

What to tell the kids about sex

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SEX education has been the Middle East of the culture wars and one of the longest-running, most rancorous battlegrounds of American social policy. For nearly 40 years, conservatives—many of them, though by no means all, observant Catholics and fundamentalist Christians—have been battling the increasing presence in the public schools of a permissive strain of sex education that came to be known as “comprehensive sexuality education.” Unlike sex-ed programs from the first half of the twentieth century that had frowned on teen sex, comprehensive sexuality education affected a morally neutral or even positive stance toward adolescent sexual activity, supporting what was usually described as teenagers’ “autonomous decision making,” and promoting their use of contraception.

The spread of comprehensive sexuality education in the schools coincided with a steep rise in teen sexual activity. The number of teen girls who had had sex went from 29

percent in 1970 to 55 percent in 1990. Fourteen percent of sexually active teens had had four or more partners in 1971; by 1988, that number had increased to 34 percent. But though sex educators had sought to encourage teens to practice what they called “responsible decision making,” their efforts did not seem to be paying off. Throughout the 1970s and 1980s American teenagers were not just having more sex; they were getting pregnant—and at rates that far surpassed those in other industrialized countries. Between 1972 and 1990, there was a 23 percent increase in the rate of teen pregnancy, and there was a similar increase between 1975 and 1990 in births to teen mothers.

The culture war

Thus it is hardly surprising that the new sex ed became a rallying point for the populist uprising that eventually gave rise to Reagan Democrats, the school-choice movement, and other grassroots groups chafing at the social upheavals of the sixties. Traditionalist parents opposed to sex education were often the working- and middle-class mothers of school-aged children. Sex educators, on the other hand, had influential friends in Washington and New York, including Planned Parenthood, the Sexuality Information and Education Council of the United States (SIECUS), and leading professional groups like the American Medical Association. While the federal government never directly funded comprehensive sexuality-education programs, over the years it did provide numerous funding streams, such as that from the Centers for Disease Control’s (CDC) Division of Adolescent and School Health (DASH), that were often used to support them.

True, in the early years of the Reagan administration, traditionalists had one notable success in Washington when Congress passed the Adolescent Family Life Act (AFLA), earmarking \$11 million for programs to “promote chastity and self-discipline.” But “the chastity bill,” as it came to be called, became bogged down in the courts when opponents charged that it violated the separation of church and state, and it remained a marginal cause and the subject of much eye-rolling among health professionals. At any rate,

by the time AFLA was passed, 94 percent of school districts saw “informed decision making” as the major goal of sex education according to a 1981 study by the Alan Guttmacher Institute, and for years after that, comprehensive sex education, though often sanitized for middle-class communities, was the national norm.

Today, the reign of comprehensive sex ed appears to be faltering. This is largely due to Title V, a junior provision of the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA), the landmark 1996 welfare-reform bill. Title V put substantial money behind what is now known as “abstinence education”—that is, teaching children to abstain from sexual intercourse. States could receive \$50 million a year for five years in the form of a block grant as long as they matched three dollars for every four from the federal government. In 2000, Congress added another abstinence initiative called Special Projects of Regional and National Significance (SPRANS). Today, the federal government earmarks over \$100 million annually for abstinence education. But despite close analysis by researchers and journalists on the legislation and its impact on welfare mothers and their children, in the seven years since Congress passed welfare reform, Title V’s rationale and legacy remain somewhat clouded.

A broad coalition

Critics and supporters of Title V can agree on one thing: At the time it was passed, it was a profoundly radical initiative. The architects of Title V believed that they were challenging not just the sex-ed establishment but American society overall. In a paper written for the American Enterprise Institute, Ron Haskins and Carol Statuto Bevan, congressional aides closely involved in writing Title V, conceded that “both the practices and standards in many communities across the country clash with the standard required by the law.” And this, they wrote, “is precisely the point.... [T]he explicit goal of abstinence education programs is to change both behavior and community standards for the good of the country.” Determined to avoid the fate of AFLA, whose language had

been broad enough to sneak through some programs that were all but indistinguishable from those run by sexuality educators, the authors of Title V introduced a strict eight-point definition of abstinence education. These were “education or motivational programs” that had as their “exclusive purpose teaching the social, psychological and health gains from abstaining from sexual activity.” Abstinence from sexual activity outside marriage, the definition also required, is “the expected standard for all school-age children.” The bill allowed some flexibility—funded projects could not be inconsistent with any part of the definition but they didn’t have to emphasize each part equally—but Title V was unusually specific, as well as unusually radical.

Yet much as abstinence education was promoted by social and religious conservatives determined to overthrow the liberal, nonjudgmental approach to sex ed, it also benefited from the reluctant backing of moderates frustrated with the status quo and the policies supporting it. Many Title V supporters saw a direct connection between welfare reform and sex-education reform; both could contribute to the battle against out-of-wedlock births tied to government dependency. PRWORA allows states to use a number of strategies intended to discourage out-of-wedlock births, such as a family cap and an end of direct payments to teen mothers; abstinence education was partly intended to be another weapon in that arsenal. Title V’s eight-point definition of abstinence education includes several points whose purpose is to plant the ideal of childrearing inside marriage in young minds and to promote the idea that “bearing children out of wedlock is likely to have harmful consequences for the child, the child’s parents, and society.”

Moderates who eventually got behind abstinence education were also troubled by continuing high rates of teen pregnancy. True, by the early nineties, a decline in teen sexual activity, pregnancy, and abortion began, trends that continue to this day. According to the CDC’s Youth Risk Behavior Survey, in 1991, 54.1 percent of high school students reported having sex; by 2001 that number was 45

percent. Those reporting multiple (more than four) partners declined from 18.7 percent to 14.2 percent. Pregnancy rates declined too—the CDC just announced that teen-birth rates decreased by another 5 percent in 2002, for a cumulative 28 percent decline since 1990. However, according to a 2001 study by the Alan Guttmacher Institute, even after the declines of the last decade, teen-birth, pregnancy, and abortion rates in the United States remain considerably higher than those in France, Sweden, Canada, and Great Britain. Moreover, American girls are more likely to start having sex before age 15 and to have multiple partners than their counterparts in those countries. In the United States, a full 25 percent of high school seniors have already had four or more partners, a much rarer phenomenon in the contrasting countries.

What also made the 1990s decline in teen pregnancy and sexual activity look less impressive was the growing incidence of sexually transmitted diseases. When most parents of today's teenagers were their age, the only widely reported sexually transmitted diseases in the United States were syphilis and gonorrhea. By the last decade of the century, common STDs grew to encompass over 20 kinds of infections. They include not just the one everyone knows, HIV-AIDS, but other viral diseases that can be asymptomatic and that while not fatal, are difficult, and in some cases impossible, to cure. While condom use among teenagers increased—in 2001, 57.9 percent of teens who had had sex reported using a condom in the three months prior to the survey, up from 46.2 percent in 1991—teenagers were still contracting three million STDs every year, far exceeding rates in other industrialized countries.

Everyone for abstinence?

Within a short time after Title V was passed into law, it began to seem that the idea of abstinence for teenagers wasn't so radical anymore. Just about everyone connected to the business of sex education had taken to embracing the word abstinence—to the point of meaninglessness and much terminological confusion. A mere decade ago, abstinence was something of a laughingstock at places like the

CDC and state departments of health. These days it is hard to find a state authority, sex-ed program, or organization, including Planned Parenthood, that doesn't promote "teaching abstinence." In using the term, educators sometimes mean they tell teens that abstaining from sex is one option to consider, much as comprehensive sex educators do. By "teaching abstinence," others mean they strongly encourage teens not to have sex, but still offer them information about how to use contraception. Both of these approaches fall under the now commonplace rubric "abstinence plus."

"Abstinence only" educators, on the other hand, teach abstinence as the *only* acceptable choice and discuss contraception almost entirely in terms of its failure to protect kids from pregnancy and STDs. To make matters more complicated, some abstinence supporters reject the "abstinence only" label as an overly narrow description of their goals and prefer "authentic abstinence." Meanwhile, the National Campaign Against Teen Pregnancy, the most prominent, middle-of-the-road organization in the business, has begun to promote an "abstinence first" message, apparently in order to clarify the ambiguity of "abstinence plus." Significantly, "abstinence only" programs are the only ones eligible for Title V money.

These skirmishes over terminology highlight the fact that even as American opinion leaders have grown more comfortable with the abstinence message, the handshake agreement about "teaching abstinence" only papers over a bitter, ongoing culture war. Not surprisingly, money and jobs, as well as ideology, are at stake.

For all the recent success of the abstinence forces, comprehensive sexuality education remains deeply embedded in the public-health infrastructure. While the number of schools teaching "abstinence only" has clearly grown, they are still in the minority: According to a recent article in *Family Planning Perspectives*, in 1988, 2 percent of school districts reported teaching abstinence as the sole way to prevent pregnancy whereas by 1999, 23 percent reported doing so. The liberal SIECUS receives money from the CDC to train teachers of curricula on HIV and AIDS that

are indistinguishable from comprehensive sex-ed programs. A host of organizations including SIECUS, Planned Parenthood, the National Abortion Rights Action League, various AIDS and gay-rights organizations, as well as the National Association of County and City Health Officials, have begun a campaign entitled NoNewMoney.org to stop the federal government from putting any more funds behind abstinence education.

Meanwhile, teacher unions often balk at abstinence curricula. The New Jersey Education Association has opposed a legislative proposal to “stress abstinence.” The National Education Association (NEA) suggests that members in “abstinence only” districts “lobby for those funds to be used in after-school community programs so schools can be free to teach a more comprehensive program.” In 2001, the NEA and 34 national organizations including Planned Parenthood, Advocates for Youth, and the ACLU, put out a joint statement declaring abstinence education “ineffective, unnecessary, and dangerous” as well as a form of “censorship” and an “affront [to the] principles of church state separation.” A number of states, including California, Oregon, Missouri, and Alabama have introduced “medically accurate” laws on the books that abstinence supporters claim are backhanded attempts to sabotage their programs.

An emotional appeal

What is it these programs actually teach? The most common accusation against them is that they are crude, didactic efforts to get kids to “just say no.” Whatever truth this generalization may have held years ago, it does not hold up to careful scrutiny today. For one thing, today’s abstinence programs are extremely varied. Title V funds over 700 programs. The Abstinence Education Clearinghouse, a resource organization founded 8 years ago, has 1,300 paid affiliates and includes 74 curricula in their directory, up from 49 just 2 years ago. The early curricula funded by AFLA tended to be created with conservative middle-American communities in mind. Today, many programs—like Title V itself—are targeting lower-income kids. Some programs are aimed at preteens, some late teens, others even in their twenties. Some

are community-based, others are school-based. Of those that are school-based, some are one or two sessions, others much longer. Some involve peer mentoring, some adult mentoring, some parental education. Community-based programs might use ad campaigns or cultural events or both. Some programs heavily emphasize delaying sex until marriage; others seem to be aiming to get kids to delay sex at least until they leave high school. Some programs get specific about what sexual behavior is permissible—one talks about avoiding the “underwear zone,” another about going no further than holding hands and kissing—and some avoid these details altogether.

Still, today’s abstinence programs share a few standard features. The first and most obvious is that they teach, as the Title V definition puts it, that “sexual activity outside the context of marriage is likely to have harmful psychological and physical effects.” They aim to impress youngsters with the costs of ignoring the message, much the way drug or alcohol programs do, emphasizing the risk of pregnancy and sexually transmitted diseases. One widely used activity is a graphic slide show of the effects of STDs produced by the Medical Institute for Sexual Health in Austin, Texas. The gruesome slides of genital warts and herpes sores are reminiscent of pictures of diseased lungs shown in antismoking classes. Abstinence educators strongly emphasize—critics accuse them of actually lying about—the failure rate of condoms in protecting against pregnancy and STDs. Where comprehensive sex-ed programs promote safe sex and risk reduction—“Reducing the Risk” is the name of one well-known comprehensive program—abstinence programs are intent on risk elimination.

When critics charge abstinence education with being “fear based,” they are overstating things; the newer abstinence curricula spend a relatively short amount of time on this sort of material. But there is no question that some of the warnings against sex tend toward the melodramatic. Abstinence educators are partial to stories of young people who have suffered heartbreak and misery after having sex with an unfaithful or diseased partner. In one of the more extreme examples of cautionary advice, “No Second Chance,” a video sometimes shown in abstinence classes that has raised a lot

of eyebrows in the media, a student asks a nurse, “What if I want to have sex before I get married?” “Well, I guess you have to be prepared to die. And you’ll probably take with you your spouse and one or more of your children.”

Most abstinence proponents believe premarital sex is genuinely destructive of young people’s emotional and physical well-being, but some of them also cite several tactical reasons for their sensationalism. For one thing, they argue that kids *should* be scared. Early pregnancy does ruin lives; STDs can as well. It’s not enough for kids to know how AIDS is transmitted, they argue; they need to dread the disease. For another, it makes sense to appeal to an age group partial to horror movies and gross-out reality shows—according to Health and Human Services, most programs are addressed to 9 to 14 year olds—through their emotions as well as their reason.

In fact, abstinence proponents believe that emphasizing the emotions surrounding sex sets them apart from the comprehensive sex-ed camp. They argue that comprehensive sex education gives the impression that sexual intercourse is a relatively straightforward physical transaction that simply requires the proper hygienic accessories. Abstinence proponents start with the assumption that sex elicits powerful crosscurrents of feeling that teenagers are unable to manage. Some cite new brain research showing that in adolescents the frontal lobes, the seat of judgment and self-control, are still undeveloped. They also believe that teens are not only incapable of mature, fully committed relationships but that teens have yet even to learn what such relationships are made of.

Character counts

There is much more to these programs than an appeal to the emotions. In the later-model abstinence programs, delaying sex is treated as part of a broader effort to adopt a mindful, take-charge attitude toward life. Curricula usually incorporate goal-setting exercises; some of the more intensive also include character education. The tag line on the cover of the “Game Plan” workbook, part of a curriculum for middle schoolers sponsored by the basketball

star A.C. Green from one of the oldest abstinence organizations, the Illinois-based Project Reality, says, "Everybody has one lifetime to develop your Game Plan." The booklet asks students to write down answers to questions like "What are some of your goals for the future?" "What will it take for you to reach these goals?" The workbook also tries to anticipate some of the temptations that lure kids away from their "game plan." "Describe some activities that could make it difficult for you to accomplish your goals," it asks. One section tells students to "think about how much time you spend each day on ... TV, radio/CD's, the Internet," and asks them to analyze media messages and consider "whether those messages will help them achieve their goals."

Character education reinforces these sorts of activities. As Operation Keepsake, a Cleveland area program, puts it, the point is "to develop strong character qualities for healthy relationships to endure." Character education is also supposed to promote the autonomy that would help kids resist the unhealthy influence of a powerful peer group and glamorous media. "It's OK to stand against the crowd," Operation Keepsake urges its students. Some programs also add community-service requirements to their character component, such as reading to the elderly at nursing homes.

A Washington D.C.-based program called Best Friends, a highly regarded intervention project created by Elayne Bennett, also emphasizes character development. Bennett developed her program after working with at-risk girls and being struck by how depression and the sense of helplessness often led to sexual activity as well as drug and alcohol use. Bennett was determined to instill in drifting young women a sense of their own efficacy, or what is called in more therapeutic circles "empowerment." Best Friends' Washington D.C. program is used in schools with a large number of high-risk girls, the vast majority of them African-American. Looking at pregnancy rates of the 14 and 15 year olds in her targeted population, Bennett concluded that she had to begin her program at age 11 when "[girls'] attitudes are still forming."

What is unique about Bennett's approach is that instead of softening children's allegiance to the peer group, she

tries to turn it into a force for individual improvement. “The best kind of friend is one who encourages you to be a better person,” is one of the program’s core messages. The girls in a selected class are designated “Best Friends” who meet at least once a month with a teacher, and once a week in a special fitness class, as well as at events like fashion shows, cultural activities, and recognition ceremonies. Once or twice a year there is a motivational speaker, a married woman with a successful career from the surrounding community who tells her life story, including how she met and married her husband, a narrative that Bennett says the girls particularly relish. The program also relies a good deal on mentoring. Each girl has a teacher-mentor from her school with whom she meets 30 to 40 minutes per week when she can complain about trouble with another teacher or talk about problems at home or with friends. Best Friends Foundation now licenses programs in 25 cities, reaching a total of 6,000 girls, and has recently started a Best Men program for boys.

Changing hearts and minds

The most common objection to abstinence education has always been that it turns its back on reality. Kids are going to have sex no matter what you tell them, and the best thing to do is to teach them how to be mature and responsible about it, the argument runs. What evidence do we have that it is possible to teach kids to abstain from sex?

One thing we can say with some certainty is that it is possible to change kids’ attitudes on the subject. Mathematica Research, which was awarded a federal grant to examine the problem, is conducting the most rigorous study to date of abstinence education, examining 11 diverse programs each involving 400 to 700 subjects. Mathematica began following its subjects several years ago when the children’s average age was 12 and one-half and will continue to do so until they are 16 or 17, so the organization will not have its final results until 2005. But its 2002 interim report confirms that teenagers are open to the abstinence message when teachers are clear about their message and appear committed to kids’ well-being. “Youth

tend to respond especially positively to programs where the staff are unambiguously committed to abstinence until marriage," the researchers write, "and when the program incorporates the broader goal of youth development." This change in attitude is not likely with less thorough curricula, which kids often view as "just another class."

Indeed, though it's not clear how much abstinence programs can claim credit for the decline in teen sexual activity since the early 1990s, this trend does appear to signal a growing conservatism among young people on sexual matters. In its annual survey of college freshman, the Higher Education Research Institute has shown a decline from 52 percent to 42 percent between 1987 to 2001 of the number of respondents who agree with the statement, "If two people really like each other, it's all right for them to have sex if they've known each other for a very short time." The National Campaign Against Teen Pregnancy conducted a survey in which it asked, "When it comes to teens having sex over the past several years would you say that you have become more opposed, less opposed, or remained unchanged?" Twenty-eight percent of teens said they were more opposed, as compared with 9 percent who said they were less opposed.

Surveys consistently show that somewhere around two-thirds of teenagers who have had sex say they wish they had not. In the most recent example, the National Campaign asked, "If you have had sexual intercourse, do you wish you had waited longer?" Eighty-one percent of 12 to 14 year olds and 55 percent of 15 to 17 year olds answered yes. Some of these responses are undoubtedly influenced by the bedeviling "social desirability" factor, but the very fact that kids believe they should give a positive answer suggests that the abstinence message is not out of line with social attitudes. Interestingly, there are indications that adults are more likely to be skeptical of abstinence than teens. The National Campaign asked in a 2002 survey, "Do you think it is embarrassing for teens to admit they are virgins?" Thirty-nine percent of adults said yes, while only 19 percent of teens agreed, though this finding may conflict with a Kaiser Family Foundation sur-

vey showing 59 percent of kids agreeing with the statement, “There is pressure to have sex by a certain age.”

What the data show

Regardless, wishes are not horses, and we are still left with the question of whether abstinence education actually makes kids abstain. The answer to that question is less clear. Just about everyone agrees that the decline in teen pregnancy that began in 1991 is partly attributable to a growing number of teenagers delaying sex, though there is vigorous disagreement about just how much can be chalked up to abstinence and how much to improved condom use. At any rate, a national decline in teen sexual activity cannot prove the impact of abstinence education per se, something that has been difficult to measure.

The key problem is finding well-designed research. The few early abstinence programs that did seem to show an impact on attitudes or behavior didn’t use the sort of randomized control groups that more exacting researchers tend to trust. There are many studies of kids before and after attending a program, but either there is no control group, the control group comes from a different school, the sample size is too small, there was a follow-up only three months after the invention, but nothing longer term, or some combination of all of these.

“Emerging Answers,” a 2001 review of the research on sex education sponsored by the National Campaign Against Teen Pregnancy, included only those programs that had been subjected to research with a rigorous experimental or quasi-experimental design. Douglas Kirby, the report’s author and a senior researcher at ETR, an education research organization that also produces comprehensive sex curricula, was able to find only three abstinence programs that satisfied the study’s requirements. (By contrast, there were 19 comprehensive programs that did so, of which 5 were considered successful.) And while none of the three abstinence programs could be shown to affect either sexual initiation, pregnancy rates, or condom use, the results do not lead to generalizable conclusions about abstinence education. All three studies were of older-model programs,

and as both Kirby's writings and Mathematica's research seems to confirm, straight didactic programs don't work with any message, abstinence or safe sex.

Another problem is that programs take time to test and refine. Up until two years ago there was little convincing evidence that comprehensive sex education was working. Four years before "Emerging Answers," Kirby wrote another less optimistic review of the research literature on sex education entitled "No Easy Answers," which concluded that "only a few programs have produced credible evidence that they reduced sexual risk-taking behavior," and even those results were limited to the short term.

Still, there are a few studies that provide what even the most scrupulous researchers might be willing to call "some evidence" that several abstinence programs are successful in getting kids to delay sexual initiation. One of the most intriguing, published in the *Journal of Health Communication* in 2001, looked at a community-based program called "Not Me, Not Now" in Monroe County, New York. In an effort to turn around high rates of teen pregnancy in and around the city of Rochester in the mid 1990s, the architects of "Not Me, Not Now" took a multifaceted approach to the problem: They spread the abstinence message through Internet sites, billboards, and community-sponsored events. Organizers also set up a youth-advisory panel, distributed 50,000 information packets for parents, and pushed abstinence curricula for middle schoolers. The results of the study show a decrease in the number of students who said they could "handle the consequences of intercourse" and a notable decline in sexual activity. Those who reported intercourse by the age of 15 dropped from 46.6 percent to 31.6 percent, and the rate of decline in teen pregnancy in Monroe surpassed that in comparison counties. But questions remain: Are students lying in their survey answers? Were there other interventions in the county that could explain the decline in teen pregnancy? These questions may yet yield firmer answers since "Not Me, Not Now" is one of the programs now being studied by Mathematica.

There are several reasons to anticipate that other abstinence programs will also have good results. The most

suggestive finding in “Emerging Answers” is that service-learning programs that include time for contemplation and discussion are the most uniformly effective in getting adolescents to delay sexual initiation—even though they don’t teach anything at all about sex. Kirby speculates that kids who are being supervised and mentored as they work in soup kitchens or hospitals develop close relationships with their teachers, increase their sense of competency, and gain a sense of self-respect from “the knowledge that they can make a difference in the lives of others.” In general, Kirby finds that effective programs instill feelings of connectedness in kids. A number of earlier studies had shown that children who are more rooted in their peer group have earlier intercourse, while those more attached to their families and schools tend to begin having sex later. Connectedness, competency, and self-respect are precisely the goals of abstinence programs like Best Friends.

It’s not just about sex

But the truth is, even if evidence emerges that one particular abstinence-education program drastically reduces teen pregnancy and STDs—or conversely, of a comprehensive program that makes teenagers use condoms 100 percent of the time—sex education will remain a flashpoint in the culture wars. What a society teaches its young about sex will always be a decision founded in cultural beliefs rather than science. In the case of sex education, those beliefs are not about efficacy; they are not even only about sex. They are in part about clashing notions of adolescence. Sexuality educators emphasize teens’ capacity for responsible and rational choices and their right to opportunities for self-exploration. They see their role as empowering the young to make their own decisions. Abstinence educators imagine a more impressionable and erratic adolescent. They see their role as guiding the young.

The two camps also presume different notions of identity. Comprehensive sex educators place a great deal of emphasis on gender identity and sexual orientation. Abstinence-only educators, who for the most part don’t mention homosexuality, locate identity in character as reflected

through qualities like respect, self-control, and perseverance. And finally, there are conflicting notions of freedom at stake. Sexuality educators see freedom as meaning individual self-expression while abstinence proponents tend to understand freedom in a more republican sense—the capacity for personal responsibility that allows individuals to become self-governing family members and citizens.

But it is likely that for most Americans outside the culture-war zone these are not absolute distinctions. One of the most striking flaws of the entire sex-ed dispute is that both sides talk about 13 year olds in the same breath as they do 18 or for that matter 23 year olds. It's unlikely that most Americans see age differences as insignificant. According to Mathematica's interim report, a good deal of Title V money is being directed toward middle schools because there is a general consensus that younger teens need a strong message that they are not ready for sex. Perhaps because they believe that as kids age they develop a firmer sense of identity and have even achieved some measure of character, Americans are not as likely to think the same about older teenagers and young adults in their twenties. Certainly, abstinence until marriage seems an improbable outcome in a society where people marry on average at the age of 26, and where acceptance of premarital cohabitation is widespread.

Still, in their appeal to kids' higher aspirations and need for meaningful connections, abstinence proponents are on to something that has been missing in the lives of many children of baby boomers. "My father wasn't a very responsible man. I want to be a better father when the time is right," the 18 year old son of divorced parents told the *Indianapolis Star* about his decision to remain abstinent. Comprehensive sexual education promises pleasure, but abstinence education pushes honor—and a surprising number of kids seem interested in buying.