

# A History of Sex Education in the United States Since 1900

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**ABSTRACT:** We provide a historical perspective toward the current public school practices of American sex education. The primary time frames include the progressive era (1880–1920), intermediate era (1920–1960), the sexual revolution era (1960s and 1970s), and the modern sex education era (1980s to the present). In each period, we highlight key developments that affect educators' current decision making as public sex education continues to develop and morph in the context of contemporary society. We show that an apt understanding of sex education's past is critical for making prudent decisions about its future.



The historical record of sex education in American public schools is relatively short. Developments after 1900 were the emphasis in this study, but a brief examination of events prior to 1900 provided an important foundation. Cultural and moral gatekeepers made sexual experimentation a forbidden activity during early American history, but those gates were forced open by a series of events after the turn of the 20th century.

## Sex Education in America Before 1900

Little has been written about sex education before 1900 (Pearsall, 2001). Searches within typical academic research vehicles do not provide much information. Traditionally, in early American history, the home was the place where discussions of sex took place, and, even then, the conversations tended to be minimal, usually a mix of practical physiology and moral instruction, grounded in religious standards (Peterson, 1983). Some children would learn about reproduction from watching animals in the barnyard, since much of early American society was agrarian. For human behavior, abstinence until marriage was expected, and although young people sometimes engaged in premarital sex, the social norm and family expectation discouraged such practice. One of the earliest examples of governmental expectations for premarital purity was included in the 1778 *Journals of the Continental Congress* stating that any soldier who was treated for venereal disease was required to pay for his own treatment (Blaine, 1778).

Sex education in pre-1900 public schools typically was not a general consideration, because most believed that this topic was not an appropriate

responsibility for the school and that doing so would supplant the role of the parent (Kaslow, 2006). In addition, population distribution significantly affected schooling opportunities afforded children in early America. The general populace was dispersed, with pockets of society congregating in growing towns and cities but many more living far from community neighbors. Before the 19th century, Christian theology often was integrated into subject matter, so morality and the development of character were prominent in textbooks (Brown, 2002). Many children learned at home. The extent or quality of education varied widely, depending on family wealth and geographic location (Delano, 1976). In the latter part of the Colonial period, school districts were established to afford educational opportunities to more children, but these schoolhouses had students of varying ages learning in the same room, making age-specific conversations difficult. Cultural mores precluded open discussions of sex, and the unsystematic organization of schools made any coordinated sex education course impossible, had the mores been different (Parkerson & Parkerson, 2001).

The 19th century signaled the beginning of the common school when education became available to the masses (Chang, 1985). Even then, schools varied widely. Some were one-room schoolhouses; others were larger schools separated by grades. The distribution of the population in a given area tended to predict the quality of education in that region (Cremin, 1980). Homeschooling was still common, especially in the more remote areas of the country (Caithier, 2008). McGuffey readers were used widely, which heavily emphasized morality and Bible-based ethics (Ellenwood, 2006). Developing and maintaining healthy relationships with others was a theme throughout the readers, with a key emphasis on making character-based decisions in all interactions (Kammen, 2009). The Comstock laws were passed in the 1870s, and they outlawed the distribution of birth control information or devices, characterizing them as “lewd” and “obscene” (Wardell, 1980). The previous *laissez-faire* attitude regarding the topic of sex quickly grew out of fashion near the end of the 19th century as progressives whet their appetite for social reform and sex education for youth.

### **The Progressive Era**

The progressive era ranged from around 1880 to 1920, and during the span of those years, America experienced significant changes in the way that it viewed sex, morality, and the sex education of children (Moran, 1996). A convergence of numerous, seemingly unrelated events during this time prepared the soil for the genesis of formalized sex education. The period represented a “hodgepodge of coalitions working for changes that often contradicted each other” (Muncy, 1991, p. 27). Within the mix were socialists, anarchists, purists, muckrakers, hygienists, eugenists, and social workers who wanted to improve American life according to their respective criteria (Mook,

2007). Many of these contradictions, however, worked together in seeming synchrony at times to quicken the arrival of school- and community-based sex education. The process was aided through the nexus of the following: an agreement that immorality had negative consequences on the individual as well as on “innocents,” a changing view regarding the purpose of sex, a rise in the belief that society was better served if birth rates were monitored, an agreement that government and other “experts” should take the lead in addressing social issues, and a view that the school could provide a virtual panacea for a host of societal problems (Tiles, 1999).

### ***Illicit Sex and Its Societal Effects***

By the turn of the 20th century, many Americans had reached a state of outrage over the moral decline in the nation. Prostitution, drunkenness, and a general moral laxity were resulting in serious problems of crime and disease. Illicit sex and alcohol were linked as vices harmful to society and degenerative to the individual (Edwards, 1909). Various groups coupled arms to stop the free flow of liquor, with the Woman’s Christian Temperance Union at the lead. The 18th amendment to the U.S. Constitution began the era of prohibition in 1919, continuing until it was repealed by the 21st amendment in 1933. But addressing the issue of drunkenness represented the tip of the iceberg vis-à-vis the problem of vice permeating the contemporary culture.

At the front of the charge for moral reform was the social hygiene movement. Founded in the United States in 1905 by Prince A. Morrow, the social hygiene movement argued that the problems of sex arose, not from an evil human nature, but from ignorance. Education was key, and teaching the young was essential (Bigelow, 1916). Sex education was described more holistically than merely “sex hygiene,” which, at the time, concerned itself solely with avoiding sexually transmitted disease (STD). Sex education included physical, social, “aesthetic,” and ethical aspects of sex to improve overall sexual attitudes and to gain important knowledge. Scientific information bolstered moral rectitude. Moran (1996) noted that although the “social evil” of prostitution had been attacked in the past by the purity movement, social hygienists added a heavy medical emphasis to the moral and religious arguments of their predecessors. Physicians largely populated the hygienist movement, contributing a professional and expert component previously missing. They insisted that sexual relations within the context of marriage were the best prevention of disease and immorality (Morrow, 1904).

Jane Addams (1912), founder of the Settlement House movement, complained that prostitution was “semi-legal” in many cities. The rampant spread of syphilis and gonorrhea demanded a strong antidote. Once believed to be a “divine chastisement of the sin of unchastity” (Morrow, 1904, p. 348), sexual diseases were then known to afflict innocent women and children. Morrow was disgusted that a “conspiracy of silence” ignored the discussion of venereal

disease in public, believing that knowledge and information were crucial to taming the effects of the diseases. Various sources cited the prevalence of venereal disease as infecting 50% to 90% of all men over the age of 18, but these statistics were largely the product of guesswork or deliberate exaggeration to incite action (Bigelow, 1916). Even conservative estimates, however, stated that more than 50% of men had one of the diseases during their lifetime, which showed that moral laxity was profound. Hygienists refuted the myth repeated by men that they had a “sexual necessity” to engage in sexual relations from adolescence onward (Lowry & Lambert, 1912). Blair (1980) indicated that the suffrage movement joined with the hygienists to banish the double standard of morality between men and women; they also supported the need for sex education for children (“New Standard,” 1908).

### ***Changing View on the Purpose of Sex***

During the progressive era, the public discussion of sex always stressed sexual abstinence until marriage. Sex generally was seen as a function primarily for procreation, particularly among eugenicists; nonetheless, Margaret Sanger and others also explored the recreation of sex (Reed, 2003). Sociologist, nudist, prolific author, and eventual member of the F. D. Roosevelt administration Maurice Parmelee sought to dispel the notion that enjoying sex should be forbidden (Woodall, 2002). In fact, he advocated that ignoring the play function would be harmful to society. Parmelee (1920) called for youth to be taught all aspects of sex. He stressed the importance of a couple fully developing the play function before bringing children into the world. For this information to be a part of marital decisions, Parmelee asserted that youth should be taught these aspects of sexual decision making. Sex education, then, would better equip them to be responsible citizens in the future.

Sanger expanded on Parmelee’s view, arguing that women should have the freedom to enjoy sex without the fear of pregnancy, giving women both sexual and reproductive freedom (Chesler, 2003). Sanger, too, supported the elimination of the sexual double standard, but her views differed from most of her contemporaries. Rather than believing that men should be expected to remain abstinent unless in marriage, as expected of women, she believed that the sexual freedom tacitly given to men should also be given to women, irrespective of the marriage union. Her newspaper, *The Woman Rebel*, used the motto “No Gods. No Masters,” which promised information that would potentially free women from pregnancy and the sexual restraint that it engendered (Galvin, 1998). Antonucci (1995) quoted Sanger’s aversion to abstinence, insisting that it caused mental disorders and “nervousness,” and her similar aversion to the marriage bed as a “degenerating influence” in society. Sanger’s views were radical at the time, but her voice gained strength in the coming decades and became an early influence in what would become sex education in American public schools.

### **Monitoring of Birth Rate**

The eugenics movement worked to change Americans' views regarding human reproduction. It was also an important tenet in early public school sex education programs (Bigelow, Balliet, & Morrow, 1913). Eugenics began in England near the end of the 19th century by Sir Francis Galton, a cousin of Charles Darwin (Gerrard, 1914). The theory quickly moved to the United States, reaching its highest point of acceptability between 1905 and 1930 when many in the church and university, in addition to well-known leaders, embraced the theory. Eugenics, or "good breeding," was a theory having an intellectual birth closely tied to Darwinian survival of the fittest (West, 2005). It suggested that cultural progress for future generations was possible through selective breeding or discriminatory reproduction, encouraging strong hereditary lines that seemingly held the key to improving the culture (Parmelee, 1920).

The birth control movement was founded during this period by Margaret Sanger, a nurse who wanted birth control to be easily accessible (Jensen, 2007). She coined the term "birth control" (Galvin, 1998), and most historians agree that her work did more to advance access to contraception than any other person in American history (Vespa, 1980). Sanger (1922) purported that the primary purpose of birth control was to encourage fewer children from the "unfit" portions of American society, a common theme among eugenicists at the time. Some argue that her fight for birth control was selfishly motivated to cover her own continuous illicit affairs, but Sanger insisted that her campaign began as a result of a plea for birth control from a poor woman dying from a self-induced abortion (Wardell, 1980). Gardiner (2006) suggested that eugenics and sexual freedom were actually the dual purposes of her campaign. Early on, her primary goal was to challenge the Comstock laws, which essentially outlawed the distribution of contraception. She created many opportunities for her own arrest (Wardell, 1980), including illegally opening the first birth control clinic in 1916 (Tolson, 1999) and distributing a how-to manual for home remedies of contraception. Sanger's contribution to sex education did not outright present itself during the progressive era, but it would become a major element of the modern sex education movement.

### **Government Involvement in Social Issues**

The increase in government intervention in social problems laid the first cornerstone for sex education in American public schools. Progressives believed that experts could more aptly respond to the problems of the day and that a more "scientific" approach was needed. It followed that, for the solutions to be implemented broadly, the government needed to take a more involved role in planning and management. Government was, in fact, to be the primary agent for social change (Pestritto & Atto, 2008).

The campaign to educate World War I soldiers about the dangers of sex provided one example of government participation. The crusade cautioned

them that STDs could make them ill and unable to defeat the enemy in the lines of battle and could also injure their wives or children. Soldiers were tested for STDs and were praised for being free of venereal disease or potentially court-martialed if found newly infected (“Only 33,” 1919). As a result of the intensive effort, the venereal disease rate dropped to the lowest rate ever reported (Wisconsin State Board of Health, 1919). The War Department (1918) sought to continue the progress made with servicemen by giving them a book upon leaving the military. It encouraged returning soldiers to instruct their younger brothers on the dangers of venereal disease and to advocate for stronger prevention measures in their communities. Eradicating this plague was viewed as a matter of national security, and returning servicemen were called to help win the war on the home front.

The Chamberlain-Kahn Act began the flow of government monies to address the venereal disease problem during 1919–1920 (Fairchild, Colgrove, & Bayer, 2003). The Public Health Service (1918) cooperated with state boards of health to prevent and control STDs. A number of states established free clinics for treatment and educational campaigns for prevention efforts. The New Jersey State Department of Health posted billboards advertising the clinics with the patriotic call to “fight the enemy at home” (Maxwell, 1919). Additionally, the Public Health Service created the single sexual standard campaign, “Keeping Fit,” particularly targeting boys between the age of 15 and 21. By 1921, 47 of the 48 state boards of health cooperated with the Public Health Service to control STDs (American Social Hygiene Association, 1921). These campaigns against STDs represented the first community sex education initiatives undertaken by the government.

### ***The Role of Public Schools in Societal Problems***

Schools were increasingly seen as arenas for social activism and reform by progressive advocates such as John Dewey (1916). Heavily grounded in pragmatism, educational experts were divided between moral absolutism and moral relativism in their application of the principle (Blanshard, 1923), and the outworking of that theory predicted the nature of sex education that was recommended. The school setting became a testing ground for new theories and social experiments, much of which was led by Dewey and the Progressive Education Association. This educational reform movement sided heavily on the side of “nurture,” as opposed to the heavy reliance on “nature” by eugenics. Musolf (2003) asserted that educational progressives opposed the view taken by eugenics that whole sectors of the population could not benefit from formal education.

Educational progressives and social hygienists prepared the environment for sex education. Advocates argued that sexual problems prevailed because there was an unwillingness to address the problems openly. “Mystery and silence” were not effective in keeping young people sexually abstinent. Children needed to learn to control their sexual appetites, and this was not possible without adequate information, reported Pivar (2002). Young people needed to know that sex could be healthy and wholesome, both pleasur-

able and reproductive (Bigelow, 1916). The work of G. Stanley Hall (1905) changed the way that the world looked at youth by identifying a definite period in a person's life called "adolescence," the time when sexual reproduction was possible. That age had special challenges and special needs that sex education could address. Hall stressed the need for sexual restraint during this critical developmental period.

In 1912 and 1914, the National Education Association passed resolutions calling for the adoption of sex education in the schools. Proponents acknowledged that this undertaking would fail without broad cooperation from home, church, and community organizations (Bigelow, 1916). Chicago was to be the first experiment in implementation (Moran, 1996). Webb and McCarthy (1998) described the chief architect behind this experiment as being Ella Flagg Young. She was both the first female superintendent of a major urban school system and the first female president of the National Education Association. Lagemann (1996) indicated that Young was a University of Chicago colleague of John Dewey, who described her as the wisest educator he had ever met. Young and Dewey had many similar views on education. As a pragmatist, she contended that a perusal of the Chicago curricula would make one conclude that "people have no sex organs" (Moran, 1996). She agreed with social hygienists that ignorance provided the perfect breeding ground for sexual vice, and she resolved to use her position to take affirmative action to curb the problem.

Chicago was thought a natural place to begin the experiment because prostitution was rampant and the hygienist movement was strong there. Jane Addams, founder of Hull House, was an active participant, and the University of Chicago provided significant leadership to the social hygiene movement (American Social Hygiene Association, 1916). Many shared the view that prevention of social ill was more effective than treating those already entwined in problem behaviors. Energy, then, seemingly needed to be directed at the young so that the health and moral framework of the city could be improved from the inside out. The Vice Commission of Chicago (1911) endorsed moral and scientific sex education in the schools for children who already reached puberty. It encouraged parents (or doctors, if parents felt uncomfortable) to teach the younger children regarding the subject. It acknowledged that school sex education was still experimental but that it offered significant promise, if trained professionals taught it. It also acknowledged that school-based sex hygiene information would have little effect without a basis on religious and moral principles. Superintendent Young had her own thoughts, however, asserting that scientific information *was* moral information (Jensen, 2007).

Moran (1996) noted that Young proposed a series of three lectures be delivered to the 20,000 Chicago high school students during the 1913–1914 school year. For the first time, medical experts would present sexually related information in a systematic way within the public school. Male physicians would speak to boys, and female physicians would speak to girls. Superintendent Young explained that the first lecture would present physical facts; the second and third would cover venereal disease and the need for personal "continence" until marriage. Since only about 20% of all

students continued high school after the primary grades, she also recommended that younger children receive a more generic talk about the need for sexual purity.

Opponents fiercely protested the program, insisting that such knowledge would awaken an unhealthy curiosity about sexual subjects, destroying their natural innocence (Jensen, 2007). The Illinois governor, for example, insisted that many students would not come into contact with sexual immorality unless they were taught about it in school. School sex education opponents also asserted that knowledge acquisition alone would not lead to moral or proper behavior. They were concerned that schools were usurping a role that uniquely belonged to parents. Additionally, parents were offended that hygienists questioned their ability to be sex educators to their own children. Religious groups, Catholics in particular, bristled that moral teaching was being separated from the supernatural source of morality (Moran, 1996). Bigelow (1916) noted that most professional educators and scientists supported sex education but that the “uninformed masses” needed a propaganda campaign to convince them of the need for this new approach. Most parents did not yet support open sex education, for three reasons: First, they believed that their children would not have access to inaccurate information elsewhere, so there was no need for the school to “correct” such misinformation; second, sexual experimentation was just a part of growing up, so efforts to curb such activity were useless; third, girls should remain pure, and boys should “sow their wild oats” during their youth, so the messages to both genders should not be uniform.

Young resigned in protest over a loss of confidence in her leadership by members of the school board. With her resignation, the “Chicago controversy” ended, lasting only one semester. Sex education supporters used the failed attempt in Chicago to fine-tune a stronger approach in other cities. They were able to learn from Chicago’s mistakes, and many errors were attributed to Young’s harsh advocacy efforts. Other schools quietly implemented many social hygiene principles in their classrooms but away from the public fanfare and without school board approval. The lessons were integrated into extant classes, such as biology and home economics, using models suggested by social hygienists. Widespread sex education in the schools was still an idea whose time had not yet come, but the foundation was largely built during this period. In fact, by 1920, 40% of all high schools responding to a survey said that they implemented sex education in some form (Carter, 2001).

### **Intermediate Era**

The period between the end of the progressive era (1920) and the beginning of the sexual revolution (1960) was the intermediate era in the development of public school sex education in America. During this period, many of the

movements begun during the progressive era continued, such as eugenics, birth control, and social hygiene. Several new developments presented themselves that significantly influenced the development of modern sex education: the new morality of the 1920s, initiation of family life education, and the influence of Alfred Kinsey.

### ***Building on Efforts Begun in the Progressive Era***

Engs (2005) reported that the influence of the eugenics movement reached its peak in the 1920s but began to wane as more information from genetic science emerged in the 1930s. Americans recognized that the simple description put forth by eugenic proponents did not adequately describe the cause of physical, mental, or social problems. Furthermore, the widespread use of the eugenics theory for the mass eradication of minority groups in Nazi Germany caused many to disassociate themselves from the movement.

Sanger and advocates within the birth control movement gained momentum as they continued to push for easy access to birth control, beginning the American Birth Control League in 1921 (which became Planned Parenthood in 1942). Sanger won an important court ruling in 1936 when the court decided that birth control devices and materials could no longer be considered “obscene” (Tuhus-Dubrow, 2007). By January 1940, Henry Fairchild, president of the American Eugenics Society, noted that “these two great movements, [eugenics and birth control], have now come to such a thorough understanding and have drawn so close together as to be almost indistinguishable” (Gordon, 2002, p. 202). This admission was telling, for as the eugenics movement was losing social acceptability, the birth control provided them a new venue for renewed—and less obvious—advocacy. Planned Parenthood adopted its first official statement on sex education in 1946. In 1948, Sanger helped fund Gregory Pincus, a research biologist, to develop an early birth control pill (Lawrence, 2008), which was introduced to the public in 1959 (Galvin, 1998). This paved the way for future sex education programs to include contraceptive advocacy as a priority message.

The Public Health Service continued to fund programs designed to prevent and treat STDs, and it targeted one part of the campaign toward teen girls and boys (Public Health Service, 1924). The economic results from the depression required the government to temporarily discontinue the program, but in 1936 the campaign was renewed following a severe syphilis outbreak (Cutler, 1988). World War II further supported the campaign, with soldiers once more heading overseas and away from the watchful eyes of family (Rotskoff, 2001). A War Department (1941) document stressed that prevention assisted in creating an “efficient military force,” suggesting that messaging for World War II was similar to that of World War I—namely, that avoiding illicit sex was an effort both personal and patriotic. The American Social Hygiene Association (1942) cooperated with the government to

distribute *Fit to Fight . . . and Fit for Life*, a campaign designed to reduce STD transmission. Loss of pay and possible court-martial were penalties for contracting an STD. Treatment centers were also created, and the discovery of penicillin, which was effective in treating the two venereal diseases of the day, aided in the cure (Cutler, 1988).

### **The New Morality of the 1920s**

A 1922 survey regarding youth concluded that the primary concern of adults was that of decline in sexual morality (Spring, 1992). Adult concern was well founded. A vocal subculture was developing during the 1920s that promoted sex without strings, even though the dominant cultural expectation continued to be abstinence until marriage. The popularity of naturalism brought a new impressionistic freedom to a significant number of young people (Carter, 2001).

In 1939, college-educated women were surveyed whether or not they engaged in premarital sex. Of those born in 1900 or before, only 26% said yes, but 69% of those born after 1913 replied yes. Another study showed a steady increase of women since 1900 who were pregnant when they married. Between 1920 and 1950, the percentage of women who admitted to premarital sex more than doubled (Tolson, 1999).

The new morality of the 1920s provided a window into the changing values among a significant number of young people. Sex and the liberal consumption of other vices were becoming increasingly commonplace. This public display of recklessness, together with the outrage by concerned members of the community, foreshadowed a coming battle over moral expectations that would move the debate to the schools.

### **Influence of Alfred Kinsey**

Indiana University zoologist Alfred Kinsey published two books on research of sexual behavior in the late 1940s and early 1950s. He allegedly collected around 18,000 sexual histories, the largest collection of such data ever assembled. At the time, many communities banned the book, and open discussion of sexual behavior was considered off-limits. The books contained controversial information about such topics as bestiality, homosexual behavior, widespread marital infidelity, and alleged infant sexual responses (Turan, 2004).

At a time that monogamy and premarital abstinence persisted as the cultural norm, Kinsey advocated “open marriage” and filmed couples having sex as a part of his research (Turan, 2004). Kinsey (Kinsey, Pomeroy, & Martin, 1948) was the first to hold that 10% of the male population was homosexual. To arrive at his information on normal sexual behavior, Kinsey interviewed a nonrepresentative proportion of sex offenders and participants in the homosexual bathhouse community, and at least 25% of his population was from the prison population. Some of the participants were also alleged pedophiles

(“Really, Dr. Kinsey,” 1991), since Kinsey’s (Kinsey et al., 1948) research described the sexual manipulation of babies as young as 2 months old. For example, he described an 11-month infant as having had 14 “orgasms” within 38 minutes, a shocking detail that led to the claim in modern sex education that humans are sexual from birth.

Although Kinsey’s views were countercultural during his life, they provided a foundation for modern sex education decades after his death. Abrams (1998) contended that Kinsey “established the sexual license he (personally) espoused” (p. 37). Kinsey (Kinsey et al., 1948) created an “anything goes” mentality in regard to sexual experimentation by stating that abstinence before marriage could lead to psychological or emotional harm. His research also prepared the way for future movements—namely, gay rights, sexual rights, and women’s rights (Turan, 2004).

### **Teenage Sex, With and Apart From Education**

A survey of young people at the end of 1920 revealed that many were engaging in sexual activity, including oral sex, but were not receiving any sex education (Wheeler, 2000), so an effort to quietly implement sex education continued during the intermediate era. From the 1920s through the 1950s, the goal of American public school sex education was to encourage premarital abstinence and faithfulness within marriage to better ensure a satisfying and happy marriage (Carter, 2001). Sex education advocates began using a new argument for premarital abstinence: that sex in marriage would be more fulfilling if individuals remained abstinent when single. This argument signified a departure from identifying sex as merely a function of procreation, but also it made certain that students knew that the pleasurable aspects of the behavior were meant for marriage (Kett, 2002).

Sex education became a formal part of the character education movement. In 1922, the Public Health Service published a manual for high schools. Continuing the view of hygienists from the previous era, the manual stated that sex education was holistic, operating as a “phase of character formation” (Gruenberg, 1922, p. 2). It warned schools that the surest way to raise opposition to the program was to call a program “sex education.” Advocates learned from the mistakes of the “Chicago experiment.” Therefore, the manual provided practical ways to integrate sex education within academic courses such as biology, physical education, English, and the social sciences, thus avoiding controversy (Gruenberg, 1922). For example, the “birds and the bees” was often taught in biology class. By 1927, 45% of schools were offering some type of sex education, though few parents were aware of the matter (Carter, 2001).

Public school sex education subsequently turned toward the sociological and psychological aspects of sex education. The term “family life education” became an important part of school-based classes during 1940s and 1950s,

in which the discussion of character building, relationships, money management, marriage, and childbearing was part of home economics classes. Marriage was increasingly seen as a companionship rather than merely an institution that legitimized procreation. Burgess and Locke (1945) noted that this transformation had been gradually taking place for several decades. The family provided a healthy and safe place for children to be born; therefore, sexual restraint before marriage was deemed necessary (Kris, 1953), and family life education classes generally reflected this sentiment.

Changing the direction of sex education classes to economic and relational subjects also helped them become much more palatable to the public (Carter, 2001). Freeman (2008) suggested that schools taught sex education without controversy “in proportion to their discretion” (p. 45), and this new focus was one part of that discretion. Though usually not addressing an explicit discussion of sex, the classes treated family life as an “academic subject” (Rotskoff, 2001). Parents continued to be concerned that teaching about sex in public schools could lead teens to experiment sexually. Indeed, boys reportedly referred to sex education lectures as “smut talks” (Gruenberg, 1940). Opponents continued to believe that parents, not the school, should teach moral values, so most schools persisted in keeping the instruction embedded, or hidden, within other academic subjects.

### **The Sexual Revolution Era: 1960s and 1970s**

The era that began in the 1960s was iconic for strong feelings of both love and hate, often simultaneously communicated by a growing subculture of cultural dissidents who protested the Vietnam War by staging love-ins. Long hair, open-air sexual orgies, drugs, student rebellions, Vietnam, and racial tensions all marked this period. Within this milieu, many of the ideas and movements begun in the progressive and intermediate eras grew to new dimensions. The emergence was so quick that, even during the 1960s, professionals were grappling with their ability to make full sense of it all. The sexual revolution was signified by exhibitionism, immediate sexual gratification, sex without emotional connection or commitment, and a general freedom to use one’s body “as he wishes, to give himself pleasure” (Gathorne-Hardy, 1998, p. 55). Not surprising, the public display of sexuality affected school sex education, further greasing the wheels on a train headed toward heated battles in the near future. The following key indicators of the sexual revolution affected the debate: a growing subculture of hippies, drugs, and free love; the rise of situational ethics; the Pill and abortion, sex education, and government funding; and the birth of “pro-sex” organizations.

#### ***Growing Subculture: Hippies, Drugs, and Free Love***

The traditional values of sex after marriage and faithfulness within marriage continued to be held by most Americans, but sexual attitudes and behaviors

were making noticeable changes, and the social norms were challenged by a diverse, often young, and vocal minority. The predilection was fed by fatalism over the Vietnam War, race riots, and anger with the “establishment” (Allyn, 2000). Kinsey’s report helped justify many in this counterculture to sexually experiment in unconventional ways. The introduction of the birth control pill (the “Pill”) in the early 1960s ushered a new era of sex without pregnancy “complications.” Continuing through the 1970s, “swing clubs,” open nudity, gay bathhouses, and pornographic movies also shocked some Americans while luring others into more participatory sexual practices (Allyn, 2000). These behaviors existed before the advent of the sexual revolution, but for the first time, their existence was visible and more tolerated within contexts of varying “community standards.” Beatniks and hippies were known for their commitment to “free love.” They purported that sex was a natural part of life and should be enjoyed without restraint. The profits amassed by Hugh Hefner’s Playboy Foundation helped to fund the creation of the Sexuality Information and Education Council of the United States (SIECUS), a new organization that supported “values neutral” sex education (Reisman, 2000).

### **Birth of “Pro-Sex” Organizations**

In 1966, Betty Friedan founded the National Organization for Women. Among other agendas, it focused efforts on attacking the sexual double standard and eliminating the male domination that it insisted was intrinsic within marriage. The group also claimed at least partial victory by legalization of the Pill and abortion. The organization’s membership increased from 1,000 in 1967 to 40,000 by 1970 (Chappell, 2002). Women’s rights activists became heavily involved in the fight for sex education in the schools.

Moran (2003) noted that SIECUS was formed in 1964 with the help of former Planned Parenthood medical director Mary Calderone. Vespa (1980) argued that Calderone did as much for sex education as Sanger did for birth control; her work with SIECUS accounted for most of this credit. They supported values-neutral “comprehensive” sex education that encouraged students to decide for themselves when to engage in sex, whether to seek an abortion, and how to obtain easy access to contraception (Kett, 2002). SIECUS (1969) maintained that the “old morality” of abstinence until marriage was widely challenged and that the “new morality” of relativism offered the most hope for modern sex education. Nonetheless, it was careful not to discount the “morality of indulgence” found among hedonists (p. 10). This philosophy of sex education may have been too radical for some because in 1969, the California legislature banned SIECUS materials in the state’s sex education classes (Mehlman, 2007).

In 1967, SIECUS leader Patricia Schiller formed the American Association of Sex Educators and Counselors and Therapists to offer training and standards for sex education providers (Engel, 1989). By 1969, school districts

were already using SIECUS consultants to assist their development of sex education classes (Moran, 2000). By 1973, more than 450 people applied to the association for certification as professional sex educators (Engel, 1989). Another organization assisted the collection of research in support of sex education. The Alan Guttmacher Institute (2009), a part of Planned Parenthood until 1977, was formed in 1968 to promote “reproductive health and rights” through the use of research, analysis, and education.

### **Situational Ethics**

Joseph Fletcher (1966) published an influential book titled *Situation Ethics: The New Morality*. He suggested a new philosophy advancing the notion that all decisions were relative to their respective situations. Love was the only absolute. Within that one absolute, every other decision could be individually determined: “What is sometimes good may at other times be evil, and what is sometimes wrong may sometimes be right when it serves a good enough end—depending on the situation” (p. 123). The theory became popular with proponents of sex education. SIECUS (1969) produced a booklet on values for sex education and referred to situation ethics as “the emerging new morality” (p. 9). The argument was that students should decide the prudence of a given sexual behavior based on the particular circumstances in which they find themselves. As an example, the booklet provided an application of the principle to premarital sex: “If you feel good about it, it’s right; if you feel bad, it’s wrong” (p. 22). SIECUS promoted “value free” sex education, appealing to numerous local school boards within the context of a pluralistic society.

### **The Pill, Abortion, Sex Education, and Government Funding**

The Pill became one of the symbols of the sexual revolution, with the Food and Drug Administration licensing its use in 1960 (Tolson, 1999). By 1962, more than 1 million women were using it (Allyn, 2000). By 1965, one in four married women younger than 45 years used the Pill (Planned Parenthood, 2009). Penicillin already removed the danger from some STDs, but the Pill uniquely removed potential pregnancy as a major reason to avoid premarital sex. The Pill was fraught with controversy at the time of its introduction to American society. This technological advance quickly became the source of heated debates over sex education in America’s public schools. Opponents warned that its usage encouraged casual sex, and women’s rights groups proclaimed it a step toward a single standard of sex for men and women. (It should be noted, however, that the single sex standard promoted during the sexual revolution was much different from the single sex standard promoted during the progressive era.) The Supreme Court ruled in 1965 that contraceptive use was a constitutional right (Galvin, 1998), but many school districts were still nervous at the time to include contraceptive information in school sex education classes.

Under Lyndon Johnson, funding earmarked at least 6% of all maternal and child health dollars for “family planning services” (Planned Parenthood, 2009). President Nixon continued the emphasis on family planning by signing Title X into law, the first funding program devoted exclusively to family planning education and services. Scales (1981) reported that as a result of this funding, the number of teens who received contraceptive education and services jumped 600% between 1969 and 1976. President Carter amended Title X in 1978, specifically mandating that part of the services and education be devoted to unmarried teens, providing the first explicit funding stream for community-based sex education designed to prevent pregnancy through risk reduction measures (U.S. Department of Health and Human Services, 1970).

The 1973 *Roe v. Wade* Supreme Court decision legalized abortion and sent shockwaves through much of the nation. It provided another solution to the possible unintended consequences of sexual activity. The 1977 Supreme Court decision *Carey v. Population Services International* established a new precedent ruling that minors could receive contraception without parental knowledge or consent (Finkel, 2007). Abortion and contraceptive counseling were promoted in the 1978 Adolescent Health Services and Pregnancy Prevention and Care Act, making the topics possible for sex education classes (Colker, 1992). The Hyde Amendment of 1976 prohibited the use of federal funds for abortions, the same year that the Republican Party passed an antiabortion platform and the Democratic Party adopted a proabortion platform. These actions signified the formal entrance of partisan politics into the debate (McBride, 2007).

Before 1970, nonmarital parenthood was stigmatized, but the sexual revolution broke down many barriers to premarital sex, and young people were among the most affected by the change (Akerlof, 1996). To address this growing problem of teen pregnancy, the U.S. Office of Education in 1966 funded 645 agencies to help develop sex education programs throughout numerous American communities (U.S. Department of Health, Education, and Welfare, 1966). SIECUS was presented a grant to develop a sex education training manual for teachers (Larson, 2002). Among public schools, the curricular content greatly varied, but “comprehensive” sex education with an emphasis on birth control was a hot topic (Balanko, 2002). Gallup polls in 1969 and 1971 showed a drop in support for public school sex education from 71% to 65%, but most Americans still approved the effort (Scales, 1981).

Nixon’s 1971 White House Conference on Youth supported a requirement that all public elementary and secondary schools implement a sex education program within academic curriculum (Engel, 1989). In the 1970s, the mission of sex education proponents changed. The goal was not as much to prevent teens from engaging in sex but rather to prevent pregnancy as a consequence of their experimentation (Rotskoff, 2001). Balanko (2002) noted that the 1970s assisted the development of a sex education component that

placed “an emphasis on pleasure and sex equity” (p. 118). Disease and morality were quickly becoming seemingly unimportant reasons to abstain from sex. The sexual revolution was invading the classroom with its me-centered emphasis, and the changes in sex education goals were evidence of it.

At the same time, some groups began to organize to counter the effects of the sexual revolution. They specifically focused their efforts to oppose sex education in the public schools (Kline, 2005). Mahoney (1979) described a national survey conducted in 1977 showing that most Americans who favored the traditional family and abstinence until marriage disapproved of sex education in public schools. Among respondents, age, religiosity, and ideology were unrelated factors in determining support or opposition. Nonetheless, by the late 1970s, about 35% of private and public schools provided sex education, but the content varied widely, determined in large part by local community standards (Scales, 1981).

### **The Modern Sex Education Era: 1980–Present**

By the dawn of the 1980s, new counterrevolution groups fixed their sights on turning back the perceived harm of the sexual revolution. Tactics changed. Rather than advocating against sex education, groups requested that “safe sex” education be replaced with abstinence education (SIECUS, 2003). Innovative organizations emerged, working to put political leadership in charge of taking on the “culture wars” in favor of more traditional values (Irvine, 2002). For the first time, abstinence education was a designated federally funded program (Pear, 1986). The increase of modern and persistent STDs caused health concerns to resurface as an additional reason for teaching sexual restraint to America’s youth. The discovery of HIV in the early 1980s caused fear over a virus that had no cure and led to almost certain eventual death (Balanko, 2002). In 1996, the bipartisan passage of a new welfare reform bill placed the debate over sex within a seemingly unrelated debate—that of child poverty and the escalating welfare rolls (Haskins & Bevan, 1997).

Two sides of the debate advocated two very different solutions to modern problems related to teen sex. Sex education advocates of the 1960s called for “safe sex” or so-called comprehensive sex education, which permitted a continuation of sexual freedom, as long as contraception was used. Abstinence proponents sought to equip teens with the skills to avoid any of the potential risks of sex, physical and emotional (Rector & Kim, 2007). The issue of sex education became increasingly volatile during the modern sex education era, as indicated by the emergence of two oppositional efforts: the first designated funding for abstinence education and the increased strength of pro-sex organizations.

#### ***First Designated Funding for Abstinence Education***

In 1980, only 6 states mandated public school sex education, but by 1989, 17 states (plus the District of Columbia) had the requirement (Donovan, 1989). Landry (1999) reported results of a national survey indicating that most sex

education courses taught about puberty, STDs, and pregnancy prevention, with at least a mention of abstinence. Birth control methods, abortion, and homosexuality were topics that were more scattered in their coverage by most public schools. The decentralized nature of curriculum decisions accounted for the wide variance.

Because of local school board control, there is no definitive source that fully explains the exact content of sex education in each district, but a contemporary study found that 68% of public schools described their sex education curriculum as “comprehensive” sex education, rather than abstinence education, and that almost 9 of 10 students stated that they received sex education during their middle or high school careers (Kaiser Family Foundation, 2002).

The creation of Title X in 1970 and its subsequent use for teen sex education motivated others to create a new funding program to encourage teenage sexual abstinence. President Reagan signed the Adolescent Family Life program into law in 1981 “to promote self-discipline and other prudent approaches to the problem of adolescent premarital sexual relations” (Pear, 1984, p. 2). The ACLU (n.d.) immediately filed a lawsuit against the program, claiming that abstinence education was inherently a religious topic and therefore violated the establishment clause of the constitution. Eventually, the ensuing Supreme Court case determined that Adolescent Family Life grants had a valid nonreligious purpose, focused on eliminating or reducing the consequences of teen sex (*Bowen v. Kendrick*, 1987).

In 1996, President Clinton signed the Welfare Reform Act into law (Klein, 2006). A small provision was included within the massive bill that began a new state block grant for abstinence education, called the Section 510 Title V Abstinence Education Program. Funding was designated to states in proportion to their child poverty figures, since abstinence education was passed primarily to avert child poverty through the prevention of nonmarital sex (Haskins & Bevan, 1997). Lawmakers reasoned that since generational poverty was related to behavioral poverty, acquiring skills for personal responsibility would help to break the poverty cycle.

A specific definition for abstinence was included in the bill. Known as the “A-H Guidelines” because of their location within the legislation, they mandated that all programs funded under the act teach the benefits of abstinence until marriage, reestablishing this behavior as the expected standard for school-age youth. The definition also listed an assortment of possible physical, social, psychological, and economic consequences that could ensue if a teen engaged in premarital sex (Social Security Administration, 2009). Support for the program was significant, as the number of teachers who implemented this approach in public schools jumped from 2% in 1988 to 23% in 1999 (Moran, 2003). The same year that Title V abstinence education funding passed, Gloria Feldt, president of Planned Parenthood, signified that another battle was brewing: “It’s an example of the kinds of things the religious political extremists would like to write into law everywhere” (Purnick, 1996, p. 1-1).

George W. Bush campaigned on a promise to provide equal funding for abstinence and so-called comprehensive sex education. While governor, Bush visited an abstinence education teacher-training workshop in Waco, where he gained an appreciation for the approach. Bush learned that abstinence education offered a practical, comprehensive skill-building approach, which reportedly made sense to a father of two teenage daughters (L. Benn, personal communication, August 11, 2009). True to his promise, the Community Based Abstinence Education program was initiated in 2002.

Popularity for the program resulted in its quickly becoming one of the most highly competitive grants offered by the federal government (U.S. Office of Management and Budget, 2009). Contraceptive-based sex education proponents regrouped their efforts after discerning the support for abstinence education across the country. They rebranded contraceptive-centered education as “abstinence-plus” (Landry, 1999), in part to assure nervous schools boards and anxious parents that students were receiving the same abstinence-until-marriage message that was taught before 1960, when in fact they were not.

Despite the rise of abstinence education funding, contraceptive or so-called comprehensive sex education continued to be given precedence. Abstinence education received only a fraction of the funds available for so-called comprehensive sex education (Pardue, Rector, & Martin, 2004). Following the panic due to the discovery of the HIV/AIDS virus in the early 1980s, by the mid-1990s, most states mandated that schools teach HIV/AIDS prevention (Stein, 1998). This discovery created a platform for sex education advocates to press for more explicit contraceptive instruction together with a discussion of homosexuality. The focus for HIV prevention funding and other STD or pregnancy prevention programs assumed that teens could not, or would not, abstain from sex; therefore, they must learn to use condoms correctly and consistently (St. Lawrence, 1998).

Advocates for “comprehensive” sex education increased their insistence for confidentiality in testing and counseling teens. The argument was that youth would not seek treatment if they knew that parents would be contacted. This line of reasoning also strengthened the argument for school-based clinics, which afforded students easy access to birth control and pregnancy or STD testing, with an array of other general health services. Although the school-based clinics movement had its roots in the 1970s, it generally did not gain popularity until the 1980s (Card, 1999). In 1984, there were only 12 school-based clinics in the United States; by 1993, the number had increased to 500 (“School-Based Clinics,” 1993). The Clinton administration attempted to insert funding for school-based clinics into a bill for health care overhaul, but the effort crumbled, leaving the Obama administration to renew the school-based clinics effort within the 2009 health care debate (Obama for America, 2008).

The election of Barack Obama as president in 2008 significantly influenced the debate over sex education. During the campaign, he was chided by some

for supporting the SIECUS-based model for K–12 sex education (Davis & Ellerson, 2007) while a legislator in Illinois (Illinois General Assembly, 2005). During the campaign, he reiterated his support for “comprehensive” sex education. Once installed as president, Obama submitted his 2010 budget proposal to Congress. In it, he called for the elimination of all funds previously devoted to abstinence education. In its place, he proposed a new “pregnancy prevention program” that would create a dedicated funding stream for “comprehensive” programs supported by pro-sex organizations (White House, 2009). Although President Bush did not decrease funding for “comprehensive” sex education during his administration, he did work to increase the primary prevention programs of abstinence education. By contrast, President Obama recommended increasing “comprehensive” sex education programs beyond their current 4:1 funding advantage by totally eliminating abstinence education.

### **Pro-Sex Organizations Gain Strength**

During the modern sex education era, competing views of sex education intensified, in large part due to the fact that the federal government was funding both approaches (U.S. Department of Health and Human Services, 2008). Advocacy groups such as SIECUS, Advocates for Youth, and Planned Parenthood receive significant funding from influential foundations, as well as from the federal government. This assists them in building their infrastructures to better lobby for “comprehensive” sex education (Guidestar, 2009).

SIECUS is the only national organization dedicated solely to advocating for so-called “comprehensive” sex education (Irvine, 2002). It does so on an annual budget of around \$2 million a year, much larger than any single-issue advocacy organization in support of abstinence education (Moran, 2003). It immediately entered the sex education battles shortly after its 1960s founding, but its influence strengthened in 1991, when it published the first edition of *Guidelines for Comprehensive Education* (Physicians Consortium, 2002). This is a curricular framework for school districts to follow when implementing so-called comprehensive sex education school programs beginning in kindergarten. The lessons include general information about human maturation, but the guidance also recommends that instructors discuss masturbation, sexual orientation, abortion, contraception, and the role of sexual fantasies in sexual health (SIECUS, 2004). It is impossible to fully know the number of states that have implemented the guidelines.

SIECUS took the lead on a “No More Money” campaign, designed to discourage future funding for abstinence education during the G. W. Bush administration. It also assembled a conglomerate group of supporting organizations, drawing mostly from abortion rights, feminist, family planning, and gay rights groups. Participants also included the ACLU, Advocates for Youth, the American Social Health Association (formerly the American Social Hygiene Association), Planned Parenthood, and the National Education

Association (SIECUS, 2008). With the election of Obama as president in 2008, SIECUS claimed a cautious victory for its quest to deliver so-called comprehensive sex education across the nation.

Other organizations assisted SIECUS's mission to discredit abstinence education. Advocates for Youth (2008b) was founded in 1980 as the Center for Population Options. From the start, it was active in movements such as the school-based clinic, gay rights, and "comprehensive" sex education, as well as the campaign to eliminate abstinence education funding (Advocates for Youth, 2008a). Fletcher's (1966) situational ethics provided the philosophical basis for its sexual experimentation beliefs.

In 1989, Planned Parenthood and others began a concerted effort to work together on common concerns, including the content of school sex education (Planned Parenthood, 2009). It also created a political and lobby arm of its organization to elect leaders who agreed with its views and to rally support for its legislative initiatives. Each year, Planned Parenthood provides sex education to more than 1.2 million teens and adults. As a result of its "comprehensive" sex education public relations campaign, 82% of Americans indicated that they favored "comprehensive" sex education over abstinence education. However, once parents understood the differences between the two approaches, their views changed dramatically with the majority of parents, regardless of race or political party, strongly endorsing all the major themes presented in an abstinence education class (Pulse Opinion Research, 2012). This resulted in the "war of words" during the modern sex education era, with parents sometimes uncertain of the alternatives in the sex education debate.

## Summary

An overview of the history of sex education provides an essential foundation for understanding the current state of sex education in America. Before 1900, there was virtually no school-based sex education, but the progressive era proved to be an important departure from the status quo. For the first time, government saw its role move inside America's bedrooms. The serious outbreaks of syphilis and gonorrhea required drastic measures to defend the national security and protect America's families. The "social disease," venereal disease, and the age-old sexual double standard became the impetus for the nation's first sex education classes. Many believed that schools held the most promise in addressing society's ills, so they easily became the natural landing spot for sex education. Movements begun during the progressive era proved to greatly influence the course of sex education, not only during that time, but also for the next century. Although sex education was controversial from the very start, the main message was character based, health based, and centered on abstinence until and faithfulness after marriage.

The intermediate era was a time of significant change. The blatant decadence of the 1920s prompted some to consider it the first sexual revolution.

Nudity on the screen and an attitude of sexual permissiveness among many of the younger generation led to a conservative reemphasis on sexual “continence.” The era saw a change of sex education from disease prevention to “family life education,” where students learned the importance of remaining abstinent to strengthen their future marriages. Relational understanding and marriage preparation skills were key components of this emphasis. Kinsey’s books on human sexual behavior, however, reignited the topic of sex and prepared America for a renewed debate on how this new information should be integrated into future sex education discussions.

The sexual revolution of the 1960s and 1970s turned America’s moral sensibility on its head. A synergy of countercultural groups flaunted lawlessness, drugs, and sex. Although most Americans still believed that sex should be reserved for marriage, a strong undercurrent was developing that would challenge this “old morality.” Situation ethics gave Americans intellectual permission to discard moral absolutes. Sex education moved away from abstinence as a priority to preventing pregnancy. The Pill and abortion provided the opportunity to experiment with sex without the previous fear of potential consequences. All of these cultural signposts afforded a healthy environment for the emergence of pro-sex organizations and governmental funding for the first contraceptive-based “comprehensive” sex education.

The modern sex education era began with a reaction to the excess of the 1960s and 1970s. Abstinence education received federal funding for the first time, but it did not keep pace with funding available for “comprehensive” sex education. Funding disparity and a misunderstanding of the two approaches contributed to the result of most schools teaching the “comprehensive” approach. Pro-sex organizations used every opportunity to attack abstinence education. They employed public relations campaigns and political action committees to advocate for their agenda. This agenda was (and is) at least as much about destroying abstinence education as it is about supporting “comprehensive” sex education and free expression of nearly all sexual behaviors among young people. The current Obama administration has used its fiscal scalpel to eliminate the growth of abstinence education within America’s school systems. IJER

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