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Health Education Textbook Review and Analysis
by
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Introduction

This year's textbook adoption cycle includes Health Education books. Please examine the webpage TCS has constructed about this topic at <http://www.txscience.org/health.php>. This site contains links to all the important information you will need to study and evaluate this topic, including the statistics used below. Earlier this year I provided the members of the State Board of Education with a packet of relevant documents from SIECUS, the Alan Guttmacher Institute, and the Kaiser Family Foundation; these documents are all online and linked on the TCS Health webpage above in case you need digital copies. The general theme of the documents I gave you was that abstinence-*only* sex education doesn't work and instead leads to high rates of teenage pregnancy, sexually transmitted disease, and abortion.

Sexual abstinence-*only* instruction is unscientific, has no legitimate scientific or pedagogical evidence to support its use, and has been documented to be both emotionally and physically harmful as revealed by the above sources. Abstinence-*first* education is the best method to teach about human sexuality in health education classes; this alternative method includes information about birth control and contraception, especially the use of prophylactic condoms, and other important topics--such as dealing with students' sexuality in positive and realistic ways--that abstinence-*only* classes deliberately omit. Such abstinence-*first* programs have been statistically proven to work: just examine the difference of teen pregnancy and STD rates between the northern and southern states of the U.S., or the difference between the rates of Europe and the U.S.

In brief, health education books adopted six years ago--the ones used now in Texas--are completely inadequate in discussing topics of vital importance to teenagers. The textbooks deliberately omit information about preventing pregnancy and STDs by using prophylactic condoms, methods of contraception, birth control, family planning, abortion, sexual intimacy, different sexualities, masturbation, strategies young women can use to make sure their partners use condoms if they decide to have intercourse, and other vital topics concerning sex. Instead, the books irresponsibly devote an inordinate amount of attention to sexual abstinence, the Texas method of choice to deal with adolescent sexuality. The result has been a generation of Texas teenagers effectively kept ignorant of the most important information they need to deal with the sexual situations and sexual problems they face almost daily. The further result of such willful ignorance is the fact that Texas ranks 5th in teenage pregnancies and 2nd in teenage births (Mississippi is first; because there are so many obstacles to obtaining abortions in Texas, the

state only ranks 26th in teenage abortions; statistics from http://www.guttmacher.org/pubs/state_pregnancy_trends.pdf). The prevalence of STDs among Texans is also among the highest in the nation: Texas is 7th for chlamydia, 13th for gonorrhea, and 19th for syphilis (statistics from the Centers for Disease Control website at <http://www.cdc.gov/std/stats00/2000SFSouth.htm>). Another unhappy statistic is that almost half of all new cases of STDs and HIV occur among young adults ages 15-24 in Texas.

We will see that all of the textbooks under review avoid the very topics about which teenagers most need to know about at the age when they begin to engage in sexual activity, including intercourse, as more than 60% of them will (by their 18th birthday, 6 in 10 teenage women and nearly 7 in 10 teenage men have had sexual intercourse). Believing that students this age will remain abstinent--because that is all that is taught to them in Texas health education classes--is more than unrealistic, it is irresponsible and dangerous. Keeping students ignorant of honest, reliable, and scientific knowledge about extremely important topics of interest--and forcing them to learn about these topics from their friends, by trial and error, or from the Internet (assuming that parents also ignore these topics)--is unbelievably counter-productive and unethical. This is an example of anti-education, a crime that should be condemned, not a practice to be accepted, much less endorsed, by public officials charged with ensuring the quality of health education in Texas.

Even worse, this year our craven Texas public officials don't even have to lift a finger to be complicit in the state's traditional "Ignorance through Censorship" policy (the Texas version of "*Kraft durch Freude*"): the books come pre-censored by the authors and publishers! Self-censorship is a reoccurring problem in our state's textbook adoption process. If you remember, I happily commented on the surprising lack of self-censorship last year in the biology textbook submissions. Then, the scientists had to defend the textbooks, authors, and publishers from attacks by pseudoscientists and religious ideologues. But not this year; this year, I must criticize the textbooks, authors, and publishers. Can't we adopt textbooks two years in a row without this pestilence reappearing?

It is vital that current members of the Texas State Board of Education during this textbook cycle not attempt to adopt similar health education books in 2004 and perpetuate the ignorance, secrecy, and implied shame of human sexuality, thereby leading to the well-known effects of such cruel and misguided education in Texas: high illegitimate teenage pregnancy rate, high rate of sexually-transmitted diseases, high teenage abortion rate, high divorce rate, and similar unfavorable statistics. These undesirable statistics are completely avoidable, because other Western and industrialized countries (e.g., European countries, Japan) have such rates at about 10% of those in Texas, for the simple reason that they provide their adolescent students with reliable, scientific, and honest instruction about human sexuality and make contraception easily available to teenagers.

Texas is well-known for its pervasive use of abstinence-only sex education programs, which have been proven to be counterproductive in preventing the very undesirable social behaviors and effects that the programs and their supporters wish to end. When students are told to be sexually abstinent until marriage, they laugh inwardly. What if they choose to put off marriage until they are 25 or 30? Are teachers seriously suggesting that they avoid all sexual intimacy for

the next 10 or 15 years? That's more than unrealistic--it's a joke! Until the Texas SBOE begins to treat human sexuality in an honest and scientifically-realistic manner within the health education curriculum, stops censoring health education textbooks, and abandons its love affair with abstinence-only programs, Texas will continue to have some of the worst sexuality and health statistics in the nation.

General Analysis of Grades 7-8 Textbooks

Let's turn to the textbooks submitted for adoption. I examined two textbooks for grades 7-8 and three textbooks for grades 9-10, and checked them for conformance with the appropriate requirements of the Texas Essential Knowledge and Skills (TEKS). Here are the specific TEKS that guide health textbook content on these subjects:

§115.23. Health Education, Grade 7-8.

(b) Knowledge and skills.

(3) Health information. The student comprehends and utilizes concepts relating to health promotion and disease prevention throughout the life span. The student is expected to:

(D) summarize the facts related to Human Immunodeficiency Virus (HIV) infection and sexually transmitted diseases.

(5) Health behaviors. The student engages in behaviors that reduce health risks throughout the life span. The student is expected to:

(D) identify information relating to abstinence;

(E) analyze the importance of abstinence from sexual activity as the preferred choice of behavior in relationship to all sexual activity for unmarried persons of school age;

(F) discuss abstinence from sexual activity as the only method that is 100% effective in preventing pregnancy, sexually transmitted diseases, and the sexual transmission of HIV or acquired immune deficiency syndrome, and the emotional trauma associated with adolescent sexual activity;

Neither of the two Grade 7-8 textbooks reviewed here adequately complies with these TEKS requirements. The books leave out (by deliberate self-censorship) various important information about these topics. For HIV and STDs, the books omit the facts--which they are required to summarize by TEKS--that the transmission of these diseases can be prevented by the use of condom prophylactics used during sexual intercourse. The characteristics and dangers of these diseases are adequately covered, but not their prevention. Such self-censorship and promotion of willful ignorance about the prevention of these diseases is dangerous and unethical. Since teenagers are assumed to be sexually abstinent by health textbook authors and publishers and by Texas education officials, why are they asked to learn about STDs in any case, unless it is to scare them from having sex.

The books identify information relating to abstinence, but do *not* “analyze the importance of abstinence from sexual activity as the preferred choice of behavior in relationship to all sexual activity for unmarried persons of school age” as required. Instead, the books discuss *only* abstinence, completely omitting any information about other forms of sexual activity. *There is no analysis here, only ideology.* Do the publishers think that students who read this book are not going to engage in sexual activity after they are told that only abstinence is the “preferred choice of behavior”? Whose choice is really being considered? Indeed, no “choice” is presented, only a single religiously-inspired doctrine of the state abetted by the publishers. Apparently, the publishers believe that the students already know all about the other choices and don’t need to be educated about them--this is a dangerous fantasy, and their complicity in this charade is unethical.

The books do not mention that while abstinence is certainly 100% effective in preventing pregnancy and STDs, the proper and competent use of prophylactic condoms is almost 100% effective. This information would obviously be vital to know if any student engages in sexual intercourse. The TEKS requirement is very misleading, since it apparently assumes that no student will engage in sex if he or she is only taught abstinence, and only 100% effectiveness is adequate. This is unrealistic. Students should be taught that abstinence is the *first* and best choice for prevention of pregnancy and STDs, *and* that other methods exist that will prevent both if they learn to use condoms correctly and consistently and get to know their sexual partners before intercourse. For example, sexual monogamy with a trusted and healthy partner is almost 100% effective in preventing pregnancy when proper birth control methods are used, and is 100% effective in preventing STD and HIV infection. Both boys and girls should be taught the ethical necessity and proper use of condoms, while girls should be taught the strategies they should use to get boys to always use them. Not teaching students these skills and personal obligations to others *before* they need and begin to use them is callous and cruel.

Finally, the books discuss the “trauma associated with adolescent sexual activity” as required, but do not reliably inform students, many of whom will have to deal with such “trauma,” about how to deal with it. The quoted phrase is apparently used only to frighten students into practicing abstinence rather than actually comprehending and dealing with it. Since many students will have to deal with such “trauma,” such self-censorship is irresponsible and cruel. In fact, most students are not traumatized by their adolescent sexual activity, but use it as a learning experience. Scare tactics, glaring omissions, and willful ignorance have no place in textbooks or institutions that are supposed to have student education as a goal.

The fantasy of abstinence-only sex education is bad enough when public officials advocate it, but it is even worse when health education textbook publishers are complicit in the ideology. Self-censorship by publishers is nothing new in textbooks that deal with controversial topics. But consider the reality: students are being deliberately kept ignorant of information that they vitally need to learn from reliable and competent sources. This ill treatment is consistently counterproductive, and leads to high rates of venereal disease, unwanted teenage pregnancies, and high numbers of abortions. What kind of society engages in such immoral behavior? Only one that is blinded by an extreme religious ideology, one that doesn’t trust its own children or believes they are sexless beings, and one that cares more about authoritarian and normative

moral precepts that have little chance of being obeyed while ignoring the realistic and successful consequentialist ethical alternatives.

This alternative is to trust your children by being honest with them and not hiding the obvious truth: that they are now or soon will be sexual creatures with the same needs and desires as adults. When adults preach sexual abstinence only to them, the students already know (or soon will learn) that the adults are treating them like fools. If sexual abstinence is so good and important, why don't adults practice it? When does it become okay to abandon it? Can every student expect to marry a future spouse who practiced abstinence? Students must learn that their actions have consequences, but that it is okay to practice those actions under the proper circumstances, which they can learn. Constantly describing sexual activity as an unhealthy and frightening activity--as abstinence-only education notoriously does--demeans human sexuality, makes the activity shameful, and does far more harm than good for the future emotional lives of these students. Sexual abstinence-only instruction is unscientific, has no reliable evidence that supports its use, and has been documented to be both emotionally and physically harmful. Adopting textbooks that promote it is wrong.

General Analysis of Grades 9-10 Textbooks

Here are the relevant TEKS for grades 9-10:

§115.32. Health 1, Grades 9-10

(b) Knowledge and skills.

(7) Health behaviors. The student analyzes the relationship between unsafe behaviors and personal health and develops strategies to promote resiliency throughout the life span. The student is expected to:

(H) analyze the importance and benefits of abstinence as it relates to emotional health and the prevention of pregnancy and sexually-transmitted diseases;

(I) analyze the effectiveness and ineffectiveness of barrier protection and other contraceptive methods including the prevention of Sexually Transmitted Diseases (STDs), keeping in mind the effectiveness of remaining abstinent until marriage;

(J) analyze the importance of healthy strategies that prevent physical, sexual, and emotional abuse such as date rape;

(K) analyze the importance of abstinence from sexual activity as the preferred choice of behavior in relationship to all sexual activity for unmarried persons of school age; and

(L) discuss abstinence from sexual activity as the only method that is 100% effective in preventing pregnancy, sexually transmitted diseases, and the sexual transmission of HIV or acquired immune deficiency syndrome, and the emotional trauma associated with adolescent sexual activity.

Let's examine these in sequence:

(H) None of the books reviewed actually *analyzes* “the importance and benefits of abstinence as it relates to emotional health and the prevention of pregnancy and sexually-transmitted diseases.” Instead, the books present it as fact, and it is not a fact. Loving sexual intimacy among sexually- and emotionally-mature individuals is actually emotionally healthier than abstinence (if abstinence is so emotionally healthy, why don't all adult humans engage in it in preference to the alternatives?). Furthermore, monogamy and the use of condoms is just as important and beneficial as abstinence in preventing pregnancy and STDs, and all the books refuse to analyze this or take it seriously.

(I) This requirement is truly fascinating. Only the Thomson-Delmar Learning textbook “analyze[s] the effectiveness and ineffectiveness of barrier protection” in preventing STDs (p. 436). The other two books (Holt and Glencoe) ignore this requirement, but nevertheless were judged to be 100% conforming by the state's health education textbook review panel. This is an example of hypocrisy at its finest. Obviously, even little things such as the TEKS can't be allowed to stand in the way of the true Texas educational goal: student ignorance of all important topics that certain ideological public officials consider to be controversial or opposed by their religion (Thou shall not fornicate!). The consequences of such ignorance are unimportant (except to the Texas Department of Health, the parents, and the students . . . after the fact!).

(J), “analyze the importance of healthy strategies that prevent physical, sexual, and emotional abuse,” is an excellent requirement; unfortunately, all the textbooks reviewed ignore one of the most vital manifestations of it: healthy strategies that young women can employ to prevent sexual exploitation of them by young men who wish to engage in sexual intercourse without using a condom. This situation is more common than most adults wish to believe, and learning these techniques can do more to preserve the quality of the future lives of young women than most things learned in health education class. Learning to say no to drugs, tobacco, and unwanted sex is important, but so is learning to say no to your chosen sexual partner who wishes to not use a condom.

(K) is non-controversial: “analyze the importance of abstinence from sexual activity as the preferred choice of behavior in relationship to all sexual activity for unmarried persons of school age.” Abstinence *is* the preferred choice of behavior under these conditions. Unfortunately, not a single one of the health books reviewed here actually meets this TEKS requirement. None actually *analyze* the importance of abstinence and compare it with other forms of sexual activity; instead, it is the *only* method--not really a “choice”--considered and assumed to be best under all conditions. But what happens when conditions change? Do textbook authors and publishers not think that giving students factual and reliable knowledge *before* conditions change is a valuable educational goal, or do students remain at “school age” for the rest of their lives? And if there is a “preferred choice,” what are the other choices and how does one deal with those? Again, despite the lack of a genuine analysis on this subject, all the books were judged to meet this requirement.

(L) This requirement was discussed above in the Grades 7-8 section. While abstinence from sexual activity is indeed the only method that is 100% effective in preventing pregnancy and

STDs, teaching abstinence-only is remarkably unrealistic and counterproductive considering the factual circumstance that over 60% of high school students in Texas are going to engage in sexual intercourse whether we teach them abstinence-only, responsible sexuality, or free love. Is 100% effectiveness the *only* acceptable statistic under such circumstances? Latex condoms are 99.9% effective in doing the same thing when properly and competently used, and school is the perfect place to learn to use them correctly. Sexual monogamy with a trusted and healthy partner is almost 100% effective in preventing pregnancy when proper birth control methods are used, and is 100% effective in preventing STD and HIV infection. Additionally, the books discuss the “trauma associated with adolescent sexual activity” as required, but do not reliably inform students, many of whom will have to deal with such “trauma,” about how to deal with it. If students are going to be abstinent, why is “trauma associated with adolescent sexual activity” even mentioned. The quoted phrase is only used to frighten students into practicing abstinence rather than actually comprehending and dealing with the emotions of engaging in sexual activity. Since many students will have to deal with such emotions, self-censorship is irresponsible and cruel. In fact, most students are not traumatized by their adolescent sexual activity, but use it as a learning experience. Scare tactics, glaring omissions, and willful ignorance have no place in textbooks or institutions that are supposed to have student education as a goal.

Review of the Textbooks by Specific Topic and Page

Grades 7-8

Teen Health, Course 3, Texas Edition, 2005, Glencoe-McGraw Hill, ISBN 0-07-865033-X, Grade 8

p. 151-155. Five pages devoted to sexual abstinence, but not a single sentence about properly handling sexual relationships. Since most teenagers engage in sexual activity, some reliable or scientific information about this topic would be welcome.

p. 155. “Abstinence is the only method that is 100 percent effective in preventing pregnancy; sexually transmitted diseases, including HIV infection; and the emotional trauma associated with adolescent sexual activity.” True, and required by the TEKS, but ineffective. Latex condoms provide over 99% effectiveness in preventing the first two items; isn’t that enough? This fact should be mentioned, especially since students will need to know this information when they engage in sexual activity, as most will while still students. Perhaps they could also be reliably informed about how to actually deal with the “trauma associated with adolescent sexual activity,” rather than just frightened by its mention, since they will need that information. It’s too bad that reliable information about coping with such “trauma” isn’t required by TEKS. In fact, most students are not traumatized by their adolescent sexual activity, but use it as a learning experience.

p. 459. Practicing abstinence is the only way described to prevent the contraction or transmission of STDs. Condoms, monogamy, and knowledge of one’s sexual partner’s health or history are not mentioned. This is both irresponsible and counterproductive. The other methods should be cited, but were deliberately omitted by self-censorship.

p. 467. Two “basic guidelines” are presented to deal with the spread of HIV, avoiding sexual contact and avoiding drug use. The use of prophylactic condoms is not mentioned. This deliberate omission is irresponsible, unethical, and ultimately counterproductive. Students *must* be told to use condoms during sex, since over half of them will engage in sexual intercourse while they are students. Not providing them with reliable information here creates distrust and ignorance, which are not the goals of good education.

p. 595. Two inches of citations to “abstinence” are in the index, but not a single reference to contraception, condoms, prophylactics, birth control, family planning, etc.

This textbook leaves out, which it is required to summarize by TEKS rule §115.23 (b)(3)(D), the important information about HIV and STDs that their transmission can be prevented by the use of condom prophylactics used during sexual intercourse. Such self-censorship is irresponsible and dangerous.

This textbook identifies information relating to abstinence, but does not “analyze the importance of abstinence from sexual activity as the preferred choice of behavior in relationship to all sexual activity for unmarried persons of school age” as required by TEKS rule §115.23 (b)(3)(E). Instead, the book discusses *only* abstinence, completely omitting any information about other forms of sexual activity. This is *not* an analysis, and such self-censorship is irresponsible and counterproductive.

This textbook does not mention that while abstinence is certainly 100% effective in preventing pregnancy and STDs, the proper and competent use of prophylactic condoms is almost 100% effective. Although not required to state this by TEKS rule §115.23 (b)(3)(F), omitting it constitutes self-censorship that is irresponsible and dangerous.

This textbook discusses the “trauma associated with adolescent sexual activity,” as required by TEKS rule §115.23 (b)(3)(F), but does not reliably inform students, many of whom will have to deal with it, about how to deal with it. The phrase quoted above is used to scare students into practicing abstinence rather than actually dealing with it. Since many students will have to deal with such “trauma,” this self-censorship is irresponsible and counterproductive.

Decisions for Health, Texas Edition, Level Blue, 2005, Holt, Rinehart and Winston, ISBN 0-03-037993-8, Grade 8

p. 220. “Problems of the Male Reproductive System, Treatment or prevention of Sexually Transmitted Diseases (STDs): prevented by abstaining from sexual activity.” This is the *only* method given to prevent STDs; use of condoms, monogamy, and knowing your partner’s sexual health or history are not mentioned. This deliberate omission is irresponsible.

p. 224. “Problems of the Female Reproductive System, Treatment or prevention of Sexually Transmitted Diseases (STDs): prevented by abstaining from sexual activity.” Also, many female reproductive problems “can be avoided by . . . avoiding sexual activity. This is the *only* method given to prevent STDs; use of condoms, monogamy, and knowing your partner’s sexual health or history are not mentioned. This deliberate omission is irresponsible.

p. 226 Lesson 3, Pregnancy and Birth, “When the sperm from a man and the ovum from a woman join together, the genes of the mother and the father combine. This process, called *fertilization*, forms a new cell.” There is *no* mention of the important steps leading up to fertilization and pregnancy, i.e. sexual intercourse. As a description of pregnancy, this glaring deliberate omission is both irresponsible and laughable. How do the sperm and egg get close enough to “join together”? Does the stork manipulate them in a Petri dish?

p. 280-281. Sexual Abstinence, Strategies for “Responding to [Sexual] Pressure” are presented, but strategies for ensuring the use of condoms are omitted. This is irresponsible and dangerous.

p. 442. Sexually Transmitted Diseases, “STDs are very common. In fact, as many as one out of every five Americans may have an STD. With so many people infected, the only certain way to keep from catching these diseases is by abstinence.” This statement, while strictly true, is misleading, irresponsible, and dangerous, because it omits the other important methods people use to prevent STD infection: prophylactic condom use, monogamy, and knowing the sexual history and health of your partner. The statement is present *only* because this book was written for use in Texas, and the publisher wishes to appeal to the Texas market and sell lots of books. Both Texas public officials and the textbook publisher are blameworthy.

This textbook leaves out, which it is required to summarize by TEKS rule §115.23 (b)(3)(D), the important information about HIV and STDs that their transmission can be prevented by the use of condom prophylactics used during sexual intercourse. Such self-censorship is irresponsible and dangerous.

This textbook identifies information relating to abstinence, but does not "analyze the importance of abstinence from sexual activity as the preferred choice of behavior in relationship to all sexual activity for unmarried persons of school age" as required by TEKS rule §115.23 (b)(3)(E). Instead, the book discusses *only* abstinence, completely omitting any information about other forms of sexual activity. This is *not* an analysis, and such self-censorship is irresponsible and counterproductive.

This textbook does not mention that while abstinence is certainly 100% effective in preventing pregnancy and STDs, the proper and competent use of prophylactic condoms is almost 100% effective. Although not required to state this by TEKS rule §115.23 (b)(3)(F), omitting it constitutes self-censorship that is irresponsible and dangerous.

This textbook discusses the “trauma associated with adolescent sexual activity,” as required by TEKS rule §115.23 (b)(3)(F), but does not reliably inform students, many of whom will have to deal with it, about how to deal with it. The phrase quoted above is used to scare students into practicing abstinence rather than actually dealing with it. Since many students will have to deal with such “trauma,” this self-censorship is irresponsible and counterproductive.

Grades 9-10

Lifetime Health, Texas Edition, 2005, Holt, Rinehart and Winston, ISBN 0-03-037981-4, Grade 10

p. 463. The benefits of abstinence are described, but the book contains no information about how to handle either a mutually-chosen sexual relationship or sexual activity in general. The book apparently assumes--mistakenly--that all students will be sexually abstinent, so nothing need be said about other types of sexual experience.

p. 464-466. The book describes methods of dealing with coercive behavior and pressures to be sexually active, but omits methods of dealing with coercive behavior within a sexual relationship, such as the refusal of the male partner to use a condom. Since most high school students will engage in sexual activity while in high school, this section is inadequate.

p. 479. "Only abstinence eliminates the risks of teen sexual activity." This sentence is false and misleading. The risks of sexual activity can be eliminated under certain conditions, such as monogamy with a healthy partner and the use of proper contraceptives, and many other methods reduce to a very low level, if not eliminate, the risks for those who choose to engage in sex. Most students believe that the benefits of sexual experience outweigh the risks, but that is only true if the students understand the precautions they must take to engage in sex safely. They will only learn this information if it is taught to them by someone. Obviously, this textbook and this state don't intend to do that.

p. 482-483. This section is almost unbelievable. The text explicitly lists eight steps to preventing STDs, but doesn't include among them such things as the use of prophylactic latex condoms or practicing sexual monogamy with a healthy partner. These omissions were deliberate, and were written by a duplicitous author to appeal to a duplicitous textbook review panel in a duplicitous textbook adoption process. These two pages, more than anything else in this process, reveal the complete lack of regard for the emotional and physical lives of Texas high school students by public school officials. Such an attitude is worse than scandalous, it is criminal and should be abandoned. Students need to be made aware of the facts about contraception, prophylaxis, and responsible sexual behaviors, but they aren't getting this information from this textbook or in this state.

The textbook goes on to describe, as do all the others, the nature of STDs. Why is this even necessary if students are going to be 100% abstinent? Not one of them will get an STD under such conditions. In fact, the textbook authors and publishers and state education officials are being hypocritical, since they know that students must learn about STDs because many will be infected by them because they are engaging in unprotected sexual activity. Rather than deal with this fact openly and honestly, these adults hide the problems and issues under the rug and refuse to discuss them. This is the height of irresponsibility and unethical behavior. Texas could reduce its rate of teenage pregnancy and STD infection by 90% if schools treated these issues responsibly, as is the case in Europe and Japan and some northern states.

This textbook does not "analyze the importance and benefits of abstinence as it relates to emotional health and the prevention of pregnancy and sexually-transmitted diseases" as required by TEKS rule §115.32 (b)(7)(H). Instead of an *analysis*, it presents abstinence as the *only*

method to prevent pregnancy and STDs. By ignoring other methods--prophylactic condoms, monogamy, knowing the sexual health or history of your partner and using other contraceptives--this book actually endangers the “emotional health” and physical health of students. Deliberate omission of such vital information is irresponsible and dangerous, and will only serve to make students distrustful (because they know that teachers and the textbook are ignoring their real needs) and careless (because they have never been taught the correct methods of avoiding pregnancy and STDs when they choose to have sex, as most will).

This textbook does not “analyze the effectiveness and ineffectiveness of barrier protection and other contraceptive methods including the prevention of Sexually Transmitted Diseases (STDs)” as required by TEKS rule §115.32 (b)(7)(I). Instead, it avoids mentioning them at all! Latex condoms are almost 100% effective in preventing STDs if used correctly; this, at least, should be mentioned and analyzed. Not doing so constitutes gross disregard for the physical health of high school students and is a reprehensible deliberate omission.

This textbook does not fully and competently “analyze the importance of healthy strategies that prevent physical, sexual, and emotional abuse,” as required by TEKS rule §115.32 (b)(7)(J). The book ignores strategies to prevent sexual abuse of young women by young men who do not want to use condoms during planned sexual intercourse. Young women should be taught strategies that oblige young men to use condoms when they mutually choose to engage in sexual activity. These are just as important as strategies to avoid sex and sexual abuse.

This textbook does not “analyze the importance of abstinence from sexual activity as the preferred choice of behavior in relationship to all sexual activity for unmarried persons of school age” as required by TEKS rule §115.32 (b)(7)(K). Abstinence *is* the “preferred choice” of behavior under these conditions, but this book does not actually *analyze* the importance of abstinence and compare it with other forms of sexual activity. Instead, abstinence is the *only* method or “choice” considered and assumed to be best under all conditions. If there is a “preferred choice,” what are the other choices and how does one deal with those? This book is silent about other methods, and this deliberate omission is irresponsible and counterproductive, because the majority of students will *not* practice abstinence. Most students *will* engage in sexual activity and therefore need reliable information about them.

This textbook does not properly “discuss abstinence from sexual activity as the only method that is 100% effective in preventing pregnancy, sexually transmitted diseases, and the sexual transmission of HIV or acquired immune deficiency syndrome, and the emotional trauma associated with adolescent sexual activity” as required by TEKS rule §115.32 (b)(7)(L). Methods other than abstinence-only are deliberately omitted, so there is no real discussion. While abstinence from sexual activity is indeed the only method that is 100% effective in preventing pregnancy and STDs, teaching abstinence-only is remarkably unrealistic and counterproductive considering the factual circumstance that most high school students in Texas are going to engage in sexual activity whatever we teach them. Is 100% effectiveness the *only* acceptable statistic under such circumstances? Latex condoms are 99.9% effective in doing the same thing when properly and competently used, and school is the perfect place to learn to how to use them correctly. Sexual monogamy with a trusted and healthy partner is almost 100% effective in preventing pregnancy when proper birth control methods are used, and is 100% effective in

preventing STD and HIV infection. Additionally, the book discusses the “trauma associated with adolescent sexual activity” as required, but does not reliably inform students, many of whom will have to deal with such “trauma,” about how to deal with it. If students are going to be abstinent, why is “trauma associated with adolescent sexual activity” even mentioned. The quoted phrase is used to frighten students into practicing abstinence rather than actually teach them to comprehend and deal with the emotions of engaging in sexual activity. Since many students will have to deal with such emotions, this textbook’s self-censorship is irresponsible and cruel.

Health and Wellness, Texas Edition, 2005, Glencoe-McGraw Hill, ISBN 0-07-860768-X, Grade 10

p. 167-169. TEKS (7)(K) is actually quoted on page 167, which is hilarious, since as discussed below, the text does not truly meet this rule. Sexual abstinence is the only “choice” discussed in the text, so other forms of sexual behavior are ignored; this is an unfortunate circumstance, since most Texas students will actually engage in the other forms of sexual behavior and therefore need information about them. So the text’s “analysis” is really a pseudo-analysis that purports to meet the requirement but actually does not in an serious and honest way.

p. 170-173. Avoidance skills and resisting peer pressure to engage in sexual activity are the topics here. TEKS (7)(G) is quoted on p. 171, but the text fails to meet it responsibly by omitting information about using avoidance skills and strategies *within* an ongoing and mutually-acceptable sexual relationship. Such relationships are very common among high school students, and I do think girls would appreciate some information about using strategies to oblige their boyfriends to use a condom every time they engage in sexual intercourse. This just might reduce Texas’s enormously high teenage pregnancy rate.

p. 508-509. Yes, you knew it was coming. TEKS (7)(I) is quoted on p. 508 of this book, “Analyze the effectiveness and ineffectiveness of barrier protection and other contraception methods. . . ,” but the text makes no attempt to perform such an analysis. Condoms, diaphragms, birth control pills, morning-after pills, etc. are not treated at all. Instead, we are treated to the highly misleading statements: “Abstain from sex until you are married. The only method that is 100 percent effective in preventing the spread of STDs and HIV is abstinence. No form of contraception or barrier protection is 100 percent effective in preventing the spread of STDs.” That’s all; the *effectiveness* of barrier protection is not mentioned, although for condoms it is over 99.9 % when used correctly and competently (obviously, incorrect or incompetent use results in at least a 10% failure rate, but that’s understandable since the teenagers who use condoms this way were never taught the correct way to use them). Other ways to avoid STDs and HIV are mentioned and discussed, but not the ones that students really need to know: latex prophylactic condoms and monogamy with a healthy partner. The text does present a “monogamous marriage” as a good way to completely prevent the spread of STDs, but not a monogamous sexual relationship outside of marriage, which is equally effective. *Only* abstinence is recommended or presented as a responsible behavior for unmarried Texas students. Therefore, this text does *not* meet the TEKS requirement in a serious and effective way. Instead, it condemns students to ignorance or forces them to get the information they need from their friends, lovers, the Internet, or their parents. The Texas public school system and health textbook authors and publishers are dead set against transmitting this knowledge to students in this state,

despite the fact that most of these students are engaging in sexual activities and desperately need such reliable knowledge. This cynical and hypocritical behavior on the part of adults charged with the effective education of our state's public school children is worse than a scandal, it is a crime.

This textbook does not “analyze the importance and benefits of abstinence as it relates to emotional health and the prevention of pregnancy and sexually-transmitted diseases” as required by TEKS rule §115.32 (b)(7)(H). Instead of an *analysis*, it presents abstinence as the *only* method to prevent pregnancy and STDs. By ignoring other methods--prophylactic condoms, monogamy, knowing the sexual health or history of your partner and using other contraceptives--this book actually endangers the “emotional health” and physical health of students. Deliberate omission of such vital information is irresponsible and dangerous, and will only serve to make students distrustful (because they know that teachers and the textbook are ignoring their real needs) and careless (because they have never been taught the correct methods of avoiding pregnancy and STDs when they choose to have sex, as most will).

This textbook does not “analyze the effectiveness and ineffectiveness of barrier protection and other contraceptive methods including the prevention of Sexually Transmitted Diseases (STDs)” as required by TEKS rule §115.32 (b)(7)(I). Instead, it avoids mentioning them at all! Latex condoms are almost 100% effective in preventing STDs if used correctly; this, at least, should be mentioned and analyzed. Not doing so constitutes gross disregard for the physical health of high school students and is a reprehensible deliberate omission.

This textbook does not fully and competently “analyze the importance of healthy strategies that prevent physical, sexual, and emotional abuse,” as required by TEKS rule §115.32 (b)(7)(J). The book ignores strategies to prevent sexual abuse of young women by young men who do not want to use condoms during planned sexual intercourse. Young women should be taught strategies that oblige young men to use condoms when they mutually choose to engage in sexual activity. These are just as important as strategies to avoid sex and sexual abuse.

This textbook does not “analyze the importance of abstinence from sexual activity as the preferred choice of behavior in relationship to all sexual activity for unmarried persons of school age” as required by TEKS rule §115.32 (b)(7)(K). Abstinence *is* the “preferred choice” of behavior under these conditions, but this book does not actually *analyze* the importance of abstinence and compare it with other forms of sexual activity. Instead, abstinence is the *only* method or “choice” considered and assumed to be best under all conditions. If there is a “preferred choice,” what are the other choices and how does one deal with those? This book is silent about other methods, and this deliberate omission is irresponsible and counterproductive, because the majority of students will *not* practice abstinence. Most students *will* engage in sexual activity and therefore need reliable information about them.

This textbook does not properly “discuss abstinence from sexual activity as the only method that is 100% effective in preventing pregnancy, sexually transmitted diseases, and the sexual transmission of HIV or acquired immune deficiency syndrome, and the emotional trauma associated with adolescent sexual activity” as required by TEKS rule §115.32 (b)(7)(L). Methods other than abstinence-only are deliberately omitted, so there is no real discussion. While

abstinence from sexual activity is indeed the only method that is 100% effective in preventing pregnancy and STDs, teaching abstinence-only is remarkably unrealistic and counterproductive considering the factual circumstance that most high school students in Texas are going to engage in sexual activity whatever we teach them. Is 100% effectiveness the *only* acceptable statistic under such circumstances? Latex condoms are 99.9% effective in doing the same thing when properly and competently used, and school is the perfect place to learn to how to use them correctly. Sexual monogamy with a trusted and healthy partner is almost 100% effective in preventing pregnancy when proper birth control methods are used, and is 100% effective in preventing STD and HIV infection. Additionally, the book discusses the “trauma associated with adolescent sexual activity” as required, but does not reliably inform students, many of whom will have to deal with such “trauma,” about how to deal with it. If students are going to be abstinent, why is “trauma associated with adolescent sexual activity” even mentioned. The quoted phrase is used to frighten students into practicing abstinence rather than actually teach them to comprehend and deal with the emotions of engaging in sexual activity. Since many students will have to deal with such emotions, this textbook’s self-censorship is irresponsible and cruel.

Essentials of Health & Wellness, 2005, Thomson, Delmar Learning, ISBN 1-4018-1523-5, Grade 10

p. 27. Leading Health Indicators, Responsible sexual behavior, “Unintended pregnancy and sexually transmitted diseases, including HIV infections, can result from unprotected sexual behaviors. Abstinence is the only behavior that can completely prevent these conditions.” Not exactly true, and very incomplete and misleading. Adequate prophylactic protection is available for those who choose to engage in sexual activity, but the book doesn’t discuss their responsible use. Also, monogamy within a trusted sexual relationship with a healthy partner and the use of adequate contraceptives can largely prevent pregnancy and completely prevent STD infection.

p. 436. A brief but inadequate list of things that a person can do to decrease chances of contracting an STD. The sentence, “Sexual abstinence is the only way of preventing any sexually transmitted infection,” is incorrect; it requires the modifier of “100% effective” after the word “only.” Omitted is monogamy within a trusted sexual relationship with a healthy partner. Also, latex prophylactic condoms successfully prevent sexually transmitted infections when used correctly. The following sentence actually says this, and so directly contradicts the first sentence.

This textbook does not “analyze the importance and benefits of abstinence as it relates to emotional health and the prevention of pregnancy and sexually-transmitted diseases” as required by TEKS rule §115.32 (b)(7)(H). Instead of an *analysis*, it presents abstinence as the *only* method to prevent pregnancy and STDs. By ignoring other methods--prophylactic condoms, monogamy, knowing the sexual health or history of your partner and using other contraceptives--this book actually endangers the “emotional health” and physical health of students. Deliberate omission of such vital information is irresponsible and dangerous, and will only serve to make students distrustful (because they know that teachers and the textbook are ignoring their real needs) and careless (because they have never been taught the correct methods of avoiding pregnancy and STDs when they choose to have sex, as most will).

This textbook *does* “analyze the effectiveness and ineffectiveness of barrier protection and other contraceptive methods including the prevention of Sexually Transmitted Diseases (STDs)” as required by TEKS rule §115.32 (b)(7)(I). The requirement is met by one brief paragraph on p. 436. This one honest paragraph makes this book the preferred text to be adopted in Texas for grade 10, although it has many other omissions..

This textbook does not fully and competently “analyze the importance of healthy strategies that prevent physical, sexual, and emotional abuse,” as required by TEKS rule §115.32 (b)(7)(J). The book ignores strategies to prevent sexual abuse of young women by young men who do not want to use condoms during planned sexual intercourse. Young women should be taught strategies that oblige young men to use condoms when they mutually choose to engage in sexual activity. These are just as important as strategies to avoid sex and sexual abuse.

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