

# A History of Federal Funding for Abstinence-Only-Until-Marriage Programs

Government funding of abstinence-only-until-marriage programs is not new. In fact, the federal government has poured tax-payer money into such programs for over a quarter century. Beginning in 1981 under the Reagan Administration, the federal government has consistently funded abstinence-only-until-marriage programs despite an overwhelming body of research proving they are ineffective and that this federal expenditure has failed to achieve its stated goals. Funding for these unproven programs grew exponentially from 1996 until 2006, particularly during the years of the George W. Bush Administration. The funding leveled out between 2006 and 2009 and then reduced significantly in 2010. Between 1996 and federal Fiscal Year 2010, Congress funneled a total of over one-and-a-half billion tax-payer dollars into abstinence-only-until-marriage programs and the funding continues today. (See the *Dedicated Federal Abstinence-Only-Until-Marriage Funding by Year* graph and chart for more information.)

Fiscal Year 2010, however, marked a significant shift in the federal government's funding for abstinence-only-until-marriage programs. After nearly thirty years of strong support for such programs, the Obama Administration and Congress eliminated the two discretionary federal funding streams for abstinence-only-until-marriage programs—the Community-Based Abstinence Education grant program and the abstinence-only-until-marriage portion of the Adolescent Family Life Act. In addition, Congress allowed the third funding stream, the Title V abstinence-only-until-marriage program, to expire on June 30, 2009.

Unfortunately, in March 2010 that program was resurrected as part of the health care reform package, which allocated \$50 million a year in mandatory funding for five years (2010–2014; a total of \$250 million). For Fiscal Year 2010, the year covered in this edition of the *State Profiles*, the federal government allocated \$50 million through the Title V abstinence-only-until-marriage program. The same amount of funding was also allocated in Fiscal Year 2011.

## DEDICATED FUNDING STREAMS FOR ABSTINENCE-ONLY-UNTIL-MARRIAGE PROGRAMS

Since the 1981, the federal government has provided funding for abstinence-only-until-marriage programs through three separate funding streams. The Adolescent Family Life Act (AFLA) was the first of these, created in 1981, followed by the Title V abstinence-only-until-marriage program, created in 1996 as part of welfare reform legislation, and finally the Community-Based Abstinence Education (CBAE), the most restrictive of the three, was created in 2000. Funding for CBAE and the abstinence-only-until-marriage portion of AFLA was eliminated as part of the *Consolidated Appropriations Act of 2010*. The Title V abstinence-only program, resurrected through recently passed health care reform legislation, is the only dedicated federal funding stream that supports abstinence-only-until-marriage programs. Details on the history and content of each funding stream are below.

### Adolescent Family Life Act

The Adolescent Family Life Act (AFLA) was quietly signed into law in 1981 as Title XX of the Public Health Service Act without hearings or floor votes in the U.S. Congress. In addition to providing comprehensive support services to pregnant and parenting teens and their families, AFLA was established to promote “chastity” and “self-discipline.”

The program always had a pregnancy-prevention component aimed at discouraging premarital sexual behavior among teens and “encouraging abstinence until marriage.”<sup>1</sup> Beginning in Fiscal Year 1997, however, the prevention funds within AFLA were explicitly tied to the more stringent eight-point definition of “abstinence education” found in the Title V abstinence-only-until-marriage program (see below) and, therefore, to a stricter interpretation of what must be taught. Faith-based organizations were eligible to receive AFLA funds; however, they were prohibited from using government money to teach or promote religion as the result of a court settlement arising from a court case in 1988 which challenged AFLA for violating the Constitution's mandated separation of church and state.

Since its inception, AFLA has received more than \$200 million. From Fiscal Year 2005 until Fiscal Year 2009, abstinence-only-until-marriage programs under AFLA received \$13 million a year. In December 2010, Congress passed the *Consolidated Appropriations Act of 2010*, which eliminated all existing discretionary funding for abstinence-only-until-marriage programs, including the portion of AFLA that had been tied to the eight-point definition of abstinence-only-until-marriage programs. This bill marked the first time since 1981 that abstinence-only-until-marriage programs did not receive dedicated federal funding through AFLA. The abstinence-only-until-marriage portion of AFLA continued to receive zero funding in Fiscal Year 2011.

**Title V Abstinence-Only-Until-Marriage Program**

The *Temporary Assistance for Needy Families Act (TANF)*, better known as “welfare reform,” was signed into law in 1996. The welfare reform law enacted Title V, Section 510(b) of the Social Security Act which established a new federal funding stream to provide grants to states for abstinence-only-until-marriage programs. The program was originally administered by the Maternal and Child Health Bureau (MCHB) at the U.S. Department of Health and Human Services (HHS). Similar to AFLA, this program was enacted quietly, without public or legislative debate.

The creation of the Title V abstinence-only-until-marriage program marked a significant shift in resources and ideology from pregnancy prevention to promoting abstinence from sexual activity outside of marriage, at any age. The intent of Congress in drafting the provision was made clear in comments by Ron Haskins and Carol Statuto Bevan, congressional staff members who were instrumental in crafting the “abstinence education” language. They wrote that while some might consider the standard required by the law to be outdated, it “was intended to align Congress with the social tradition...that sex should be confined to married couples.”<sup>2</sup>

Under the Title V abstinence-only-until-marriage program, HHS allocates \$50 million in federal funds each year to the states based on a federal formula related to the number of low-income youth in each state. States that choose to accept these funds must match every four federal dollars with three state-raised dollars and are then responsible for using the funds or distributing them to sub-grantees such as community-based organizations, schools, county and state health departments, faith-based organizations, media campaigns, or other entities. Every state, with the exception of California, has at one time accepted Title V abstinence-only-until-marriage funds.

With the passage of the Title V abstinence-only program came an eight-point federal statutory definition of “abstinence education.” All programs that receive Title V abstinence-only-until-marriage funds are governed by this definition, which specifies:

<b>Section 510 (b) of Title V of the Social Security Act, P.L. 104–193</b>	
For the purposes of this section, the term “abstinence education” means an educational or motivational program which:	
<b>A</b>	has as its exclusive purpose teaching the social, psychological, and health gains to be realized by abstaining from sexual activity;
<b>B</b>	teaches abstinence from sexual activity outside marriage as the expected standard for all school-age children;
<b>C</b>	teaches that abstinence from sexual activity is the only certain way to avoid out-of wedlock pregnancy, sexually transmitted diseases, and other associated health problems;
<b>D</b>	teaches that a mutually faithful monogamous relationship in the context of marriage is the expected standard of sexual activity;
<b>E</b>	teaches that sexual activity outside of the context of marriage is likely to have harmful psychological and physical effects;
<b>F</b>	teaches that bearing children out-of-wedlock is likely to have harmful consequences for the child, the child's parents, and society;
<b>G</b>	teaches young people how to reject sexual advances and how alcohol and drug use increase vulnerability to sexual advances, and
<b>H</b>	teaches the importance of attaining self-sufficiency before engaging in sexual activity.

Because the first element of the definition requires that Title V-funded abstinence-only-until-marriage programs have as their “exclusive purpose” promoting abstinence outside of marriage, programs may not in any way advocate contraceptive use or discuss contraceptive methods except to emphasize their failure rates. Guidelines issued by MCHB during the Clinton Administration in May 1997 stated that “it is not necessary to place equal emphasis on each element of the definition;” however, according to the guidance “a project may not be inconsistent with any aspect of the abstinence education definition.”<sup>3</sup> This language gave states flexibility in designing their abstinence-only-until-marriage programs and message; however, states were still unable discuss contraception except in terms of their failure rates. In the May 1997 guidelines, MCHB also recommended that states apply the same criteria that resulted from the legal challenge to AFLA to the Title V abstinence-only program; meaning that while faith-based organizations were eligible for funding, they were prohibited from using government money to teach or promote religion.<sup>4</sup>

In Fiscal Year 2005, the George W. Bush Administration moved control over the funding stream to HHS’ Administration for Children and Families (ACF), which at the time was more conservative than MCHB. In Fiscal Year 2007, ACF issued more restrictive program guidance which required states to “meaningfully represent each” element of the definition. In addition, while historically the program announcement did not specify the age of intended participants, allowing many states to choose to focus on the importance of delaying sexual initiation among younger youth ages 9–14, the Fiscal Year 2007 guidance stated that Title V-funded programs must focus on individuals ages 12–29. The new focus on older youth and, indeed, those who no longer fall within the category of “youth” at all, went against common sense given that at the time, according to the National Center for Health Statistics, over 90% of people ages 20 to 29 had sexual intercourse.<sup>5</sup> This change was further evidence that this funding stream was based on a conservative ideology about sex outside of marriage.

In 2007, the same year that the new guidance was released, findings were published from a congressionally mandated study of the Title V abstinence-only-until-marriage program. The study found that federally funded Title V abstinence-only-until-marriage programs had no beneficial impact on young people’s sexual behavior. The study, conducted by Mathematica Policy Research over nine years, at a cost of almost \$8 million and on behalf of HHS, closely examined four hand-picked programs considered by state officials and “abstinence education” experts to be especially promising. Even so, after following more than 2,000 teens for as long as six years, the evaluation found that none of the four programs was able to demonstrate a statistically significant beneficial impact on young people’s sexual behavior. Students in the abstinence-only programs had a similar number of sexual partners and a similar age of first sexual intercourse as their peers not in the programs.<sup>6</sup> This report followed the findings from 13 states, including such states as Kansas,<sup>7</sup> Texas,<sup>8</sup> Pennsylvania,<sup>9</sup> and Minnesota,<sup>10</sup> that evaluated their own Title V abstinence-only-until-marriage programs with results ranging from finding the programs ineffective to finding them to be harmful.

The Title V abstinence-only-until-marriage program was originally authorized for five years, 1998–2002. After years of continuing resolutions extending the program, it was officially reauthorized in July 2008 for a 12-month extension and received \$50 million in federal funds for Fiscal Year 2009. The program was then allowed to expire by Congress on June 30, 2009. Due to the expiration of the grant program on June 30, 2009, three months prior to the end of the federal fiscal year, the states that did accept the funding received three quarters of the total funding allocated for the full fiscal year.

There is a long history of states declining funding for the Title V abstinence-only program. Maine and California were among the pioneers in the moment of rejecting Title V abstinence-only-until-marriage funding. California has never accepted Title V abstinence-only funding due in large part to its own state evaluations showing that abstinence-only-until-marriage programs are ineffective. Maine was the next to decline funding beginning in 2005 because the programs would put the state out of compliance with their own law. New Jersey was the next state to decline funding in 2006, with the governor’s office cautioning that accepting the funding may in fact cost the state money because student may require additional sexuality education to clarify the partial and misinformation that is taught in abstinence-only-until-marriage programs. As states completed their own evaluations of their Title V-funded abstinence-only-until-marriage programs, more and more decided to decline funding based on their own and others results. By Fiscal Year 2007, 10 states were out of the program and by the time the program expired in June 2009, nearly half of the states had

chosen not to participate in this program and not to accept associated federal funds. Of the states that refused the money, the vast majority did so based on strong research and evaluations showing that abstinence-only-until-marriage programs are ineffective. These principled rejections came from diverse parts of the country and were not unique to any one political party affiliation.

After the expiration of the Title V abstinence-only-until-marriage program in June 2009, there were several attempts by conservative lawmakers to continue the funding. Conservatives in the U.S. Congress were ultimately successful in resurrecting the program when they managed to insert funding for the Title V abstinence-only-until-marriage program into the Senate health care reform legislation (the *Patient Protection and Affordable Care Act*). The language remained in the final legislation signed by President Barack Obama. This extension equals \$250 million for abstinence-only-until-marriage programs for a five year period (2010–2014).

ACF released the first Funding Opportunity Announcement (FOA) for the Title V abstinence-only program under the Obama administration in July 2010. Although the new Title V abstinence-only guidance issued in the FOA is more flexible than it had been in previous years, programs funded with Title V abstinence-only money still must teach abstinence to the exclusion of other topics. Programs must ensure that abstinence from sexual activity is an expected outcome and no funds can be used in ways that contradict the A–H federal abstinence-only-until-marriage definition. These restrictions mean that states still cannot use Title V abstinence-only funds to provide comprehensive information about contraception or teach the complete education young people need to make informed and healthy decisions about their sexual behavior. In addition, the Title V abstinence-only program continues to require states to provide a match of three state dollars for every four federal dollars received. Despite its increased flexibility, in Fiscal Year 2010 only 30 states and Puerto Rico applied for Title V abstinence-only funding.

### **Community-Based Abstinence Education**

In October 2000, the federal government created yet another funding stream to support abstinence-only-until-marriage programs. Under this third funding stream, originally known as Special Projects of Regional and National Significance–Community-Based Abstinence Education (SPRANS–CBAE), the federal government awarded grants directly to state and local organizations. Until Fiscal Year 2005, SPRANS–CBAE was administered within the HHS by the Maternal and Child Health Bureau. Beginning in Fiscal Year 2005, however, this funding stream was also moved to HHS’ ACF, which at the time was more conservative. At that time SPRANS-CBAE began to be known simply as the Community-Based Abstinence Education (CBAE) program.

Funding for CBAE began in Fiscal Year 2001 at \$20 million. By Fiscal Year 2006, CBAE increased over 450% to a total of \$113 million where it stayed for two more years. For Fiscal Year 2009, the program was cut by \$14.2 million, bringing its funding down to \$99 million. The following year, Congress passed the *Consolidated Appropriations Act of 2010*, which eliminated all existing discretionary funding for abstinence-only-until-marriage programs, including all funding for the CBAE grant program. CBAE continued to receive zero funding in Fiscal Year 2011.

Whereas under Title V abstinence-only-until-marriage funding, states ultimately decided which programs received funding, all decisions regarding CBAE funding bypassed the state approval process entirely. Instead, HHS awarded grants directly to community-based organizations. From its inception, programs funded under CBAE were required to teach all eight points in the federal statutory definition of “abstinence education.” These more restrictive standards were clearly an attempt by conservative lawmakers to gain greater control over federal abstinence-only-until-marriage funding. In fact, certain lawmakers sought to prevent money from supporting media campaigns, youth development, and after-school programs, arguing that such programs diluted the abstinence message, did not sufficiently focus on marriage, and violated the intent of Title V’s eight-point “abstinence education” definition.

By far the most restrictive of the three funding streams, CBAE became even more ideologically driven when, in early 2006, ACF released a new funding announcement, and announced its new vision for CBAE programs. This guidance viewed sexual abstinence prior to marriage as an approach that would lead to a happier life, including having a healthier marriage and children, earning more money, being honorable and more “responsible” parents, having integrity, attaining a better education, having fewer psychological

disorders, avoiding drug, alcohol, and tobacco use, committing fewer crimes and staying out of prison, and having a longer life span.<sup>11</sup> The guidelines stated that grantees could not provide program participants with positive information about contraception or safer-sex practices, even in other settings and with non-CBAE funds. Specifically, the 2006 guidance noted that, “Material must not encourage the use of any type of contraceptive outside of marriage or refer to abstinence as a form of contraception.”<sup>12</sup> In the event that there was any confusion, the grant announcement further warned that, “Sex education programs that promote the use of contraceptives are not eligible for funding.” The guidelines also broadened the definition of abstinence from avoiding sexual intercourse to abstaining from all “sexual activity,” which “refers to any type of genital contact or sexual stimulation between two persons, including, but not limited to sexual intercourse.”<sup>13</sup> Thus, educators were even further restricted in what they could teach.

In December 2004, Representative Henry Waxman (D-CA) released a report in his role as minority leader of the House Committee on Government Reform. The report documented that 11 of the 13 abstinence-only-until-marriage programs most widely used by CBAE grantees contained false, misleading, or distorted information about reproductive health, misrepresentations about the effectiveness of condoms in preventing STIs and pregnancy, as well as gender stereotypes, moral judgments, religious concepts, and factual errors.<sup>14</sup> A report released by the non-partisan Government Accountability Office (GAO) in November 2006 found that ACF was providing very little oversight of funded abstinence-only-until-marriage programs and noted that the federal agency did not review its grantees’ materials for scientific accuracy or even require grantees to review their own materials for scientific accuracy.<sup>15</sup>

In response to this criticism, ACF’s Fiscal Year 2007 grant announcement specified that “medical information presented in all curricula funded under this program announcement [must be] accurate,” and that “mass produced materials” regarding sexually transmitted diseases (STDs) must contain medically accurate information regarding the “effectiveness or lack of effectiveness of condoms in preventing the sexually transmitted disease the materials are designed to address.”<sup>16</sup> Unfortunately, this requirement lacked any teeth as grantees were required only to sign an assurance saying the materials in their programs were medically accurate. In reality many of the grantees continued to use curricula and materials which contained medical inaccuracies.

In April 2008, Congress held the first-ever hearing on abstinence-only-until-marriage programs. Three panels of witnesses spoke at the hearing including leading medical and sexual health experts from across the country who testified to the ineffectiveness of the programs, youth speakers who testified to the program’s effects on their lives, and several government officials and Members of Congress. The vast majority of researchers testified that abstinence-only-until-marriage programs are ineffective at getting young people to delay sexual initiation and had not been effective at reducing teen pregnancies or STDs, including HIV. They called for an end to federal funding for the programs and said that funds should instead be spent on comprehensive sexuality education that had been proven to be effective. This hearing marked the beginning of the end for the CBAE program; the following year, the program received its first-ever cut and the program was finally ended in Fiscal Year 2010.

## **ADDITIONAL FEDERAL FUNDING FOR ABSTINENCE-ONLY-UNTIL-MARRIAGE PROGRAMS**

While the AFLA, Title V, and CBAE funding streams constitute the majority of federal funding for abstinence-only-until-marriage programs, they do not represent the total amount of money spent by the federal government over time. Additional funding for these programs has been allocated through a variety of federal funding vehicles, including the Healthy Marriage Initiative and the Compassion Capital Fund. In addition, abstinence-only-until-marriage providers have received funds through traditional HIV/AIDS- and STD-prevention accounts such as those administered by HHS and the Centers for Disease Control and Prevention (CDC).

Dedicated federal funding has also been provided through earmarks, a congressional provision that directs approved funds to be spent on a specific project. Former Republican Senator Arlen Specter (D-PA)

was the first of his colleagues to secure earmarks specifically for abstinence-only-until-marriage programs. In Fiscal Years 2004 and 2005, Senator Specter earmarked over \$3.75 million each year in federal funds for abstinence-only-until-marriage programs in his home state of Pennsylvania. Senator Specter's earmarks totaled more than three-quarters of a million dollars in Fiscal Year 2008 and just over half a million dollars for Fiscal Year 2009. Conservative organizations such as the Abstinence Clearinghouse and the Medical Institute (formerly known as the Medical Institute for Sexual Health), have also received funds specially earmarked by Congress.

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<sup>1</sup> Title XX of the Public Health Service Act.

<sup>2</sup> Ron Haskins and Carol Statuto Bevan, "Abstinence education under welfare reform," *Children and Youth Services Review*, 1997, 19(5/6):465-484.

<sup>3</sup> Maternal and Child Health Bureau, Health Resources and Services Administration, U.S. Department of Health and Human Services, "Application Guidance for the Abstinence Education Provision of the 1996 Welfare Law, P.L. 104-193, New Section 510 of Title V of the Social Security Act," (Rockville, MD: MCHB), May 1997, p. 9.

<sup>4</sup> Maternal and Child Health Bureau, Health Resources and Services Administration, U.S. Department of Health and Human Services, "Abstinence Advisory #1," May 12, 1997.

<sup>5</sup> Lawrence B. Finer, "Trends in Premarital Sex in the United States, 1954-2003," *Public Health Reports*, 2007; 23: 73.

<sup>6</sup> Chris Trenholm, et al., "Impacts of Abstinence Education on Teen Sexual Activity, Risk of Pregnancy, and Risk of Sexually Transmitted Diseases," *Journal of Policy Analysis and Management*, 2008, 27(2): 255-276.

<sup>7</sup> Ted Carter, *Evaluation Report for The Kansas Abstinence Education Program* (Topeka, KS: Kansas Department of Health and Environment, November 2004), 19.

<sup>8</sup> Patricia Goodson, et al. *Abstinence Education Evaluation Phase 5: Technical Report* (College Station, TX: Department of Health & Kinesiology – Texas A&M University, 2004).

<sup>9</sup> Edward Smith, Jacinda Dariotis, Susan Potter, *Evaluation of the Pennsylvania Abstinence Education and Related Services Initiative: 1998-2002*, (Philadelphia, PA: Maternal and Child Health Bureau of Family Health, Pennsylvania Department of Health, January 2003).

<sup>10</sup> Professional Data Analysts, Inc. and Professional Evaluation Services, *Minnesota Education Now and Babies Later Evaluation Report 1998-2002* (Minneapolis: Minnesota Department of Health, January 2004).

<sup>11</sup> Department of Health and Human Services, Administration for Children and Families, "Community-Based Abstinence Education Program (HHS-2006-ACF-ACYF-AE-0099)," 25 January 2006.

<sup>12</sup> Department of Health and Human Services, Administration for Children and Families, "Guidance Regarding Curriculum Content (Required for CBAE grantees as of FY 2006.)," January 2006.

<sup>13</sup> Ibid.

<sup>14</sup> Special Investigations Division, The Content of Federally Funded Abstinence-Only Education Programs, U.S. House of Representatives Committee on Government Reform, Minority Staff, December 2004.

<sup>15</sup> United States Government Accountability Office, "Abstinence Education: Efforts to Assess the Accuracy and Effectiveness of Federally Funded Programs," October 2006.

<sup>16</sup> Department of Health and Human Services, Administration for Children and Families, "Community-Based Abstinence Education Program (HHS-2007-ACF-ACYF-AE-0099)," 1 March 2007, p. 3.