

University at Albany, State University of New York

## Scholars Archive

---

Political Science

Honors College

---

Spring 5-2021

# America Delayed: An Analysis of Comprehensive Sex Education in the US

Carolyn Jones

University at Albany, State University of New York, ccjones@albany.edu

Follow this and additional works at: [https://scholarsarchive.library.albany.edu/honorscollege\\_pos](https://scholarsarchive.library.albany.edu/honorscollege_pos)



Part of the [Political Science Commons](#)

---

### Recommended Citation

Jones, Carolyn, "America Delayed: An Analysis of Comprehensive Sex Education in the US" (2021). *Political Science*. 38.

[https://scholarsarchive.library.albany.edu/honorscollege\\_pos/38](https://scholarsarchive.library.albany.edu/honorscollege_pos/38)

This Honors Thesis is brought to you for free and open access by the Honors College at Scholars Archive. It has been accepted for inclusion in Political Science by an authorized administrator of Scholars Archive. For more information, please contact [scholarsarchive@albany.edu](mailto:scholarsarchive@albany.edu).

**America Delayed: An Analysis of Comprehensive Sex Education in the US**

An honors thesis presented to the  
Department of Political Science,  
University at Albany, State University of New York  
in partial fulfilment of the requirements  
for graduation with Honors in Political Science  
and  
graduation from The Honors College

Carolyn Jones

Research Advisor: Zsofia Barta, Ph.D.

January 2021

## **Abstract**

Sex education in the United States has been and continues to be a threat to public health. Compared to European countries, the United States has incredibly poor health outcomes all of which are a direct result of poor sex education. A deep dive into sex education per state reveals a list of bad actors across the United States, not just a result of a few bad acting states. In 2015 California passed what many health experts consider the exemplary sex education bill. A comparison of two similar states, New York and California try to identify the casual mechanisms that allowed a bill passage in one state but not the other. All of this in an attempt to understand more broadly why the United States struggles to pass sex education reform.

**Keywords:** *Sex education, Public health, California Healthy Youth Act*

## **Acknowledgments**

Many people have helped me complete this thesis. First, thank you so much to my thesis advisor Dr. Zsofia Barta for seeing and inspiring my ideas for this paper, even when it looked like a bunch of numbers. Another thanks to all my advisors at the university who have advised me to this point and provided me with excellent guidance which has allowed me to write this very thesis. I would have never been able to finish if it were not for their help.

Another thank you to my parents who have tip toed around my house while I have been completing my research. Not to mention the countless hours they have spent revising and proofreading my paper.

Lastly, thank you to all my friends at Albany who have pushed me to be my very best and support me in everything that I do.

## List of Figures

<b>Figure 1</b> Teen Pregnancy Rates by Country in 2018 .....	1
<b>Figure 2</b> Rates of Chlamydia by Country in 2018 .....	1
<b>Figure 3</b> Rate of Gonorrhea by Country in 2018 .....	2
<b>Figure 4</b> Comparison of Chlamydia and Gonorrhea rates in New York and California ...	9
<b>Figure 5</b> Comparison of Syphilis Rates in New York and California .....	9
<b>Figure 6</b> Comparison of Teen Pregnancy Rates in New York and California.....	9
<b>Figure 7</b> Comparison of HIV Rates in New York and California .....	10
<b>Figure 8</b> NYS Senate Majority 2016-2018 .....	11

**List of Tables**

**Table 1** List of Bad Actors ..... 4

**Table 2** New York State Senate and New York State Assembly ..... 11

**Table 3** Women in the NYS Legislature ..... 12

**Table 4** California Senate and California Assembly ..... 12

**Table 5** Women in the California State Legislature ..... 13

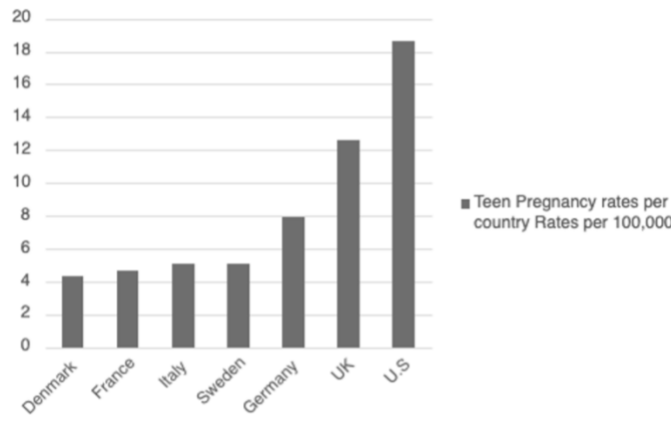
**Table 6** Summary of Results ..... 18

## Table of Contents

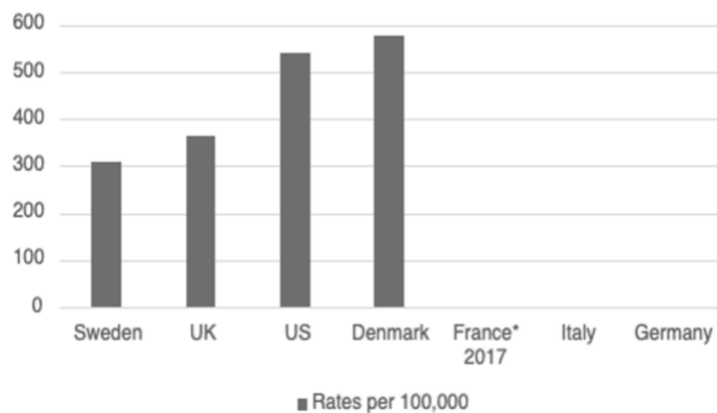
<b>Abstract</b> .....	ii
<b>Acknowledgements</b> .....	iii
<b>List of Figures</b> .....	iv
<b>List of Tables</b> .....	v
<b>Introduction</b> .....	1
<b>Scholarship on Sex Education</b> .....	5
<b>Methods</b> .....	7
Case Study: Comparison of New York and California .....	7
Health Outcomes .....	8
Composition of State Legislatures: Majority Party and the Number of Women .....	10
Public Opinion.....	14
Interest Group Advocacy .....	14
Funding .....	17
<b>Conclusion</b> .....	17
<b>References</b> .....	19

## Introduction

Countries with better sex education tend to have better sexual health outcomes such as lower rates of unwanted pregnancy, STI and STD infections. Compared to other industrialized countries, the US has the worst health outcomes (See Figure 1, Figure 2, & Figure 3). Previous research concluded that sex education which focused on contraceptive use and promoted healthy choices explained why France, Germany and the Netherlands had better health outcomes than the US (Mcgee, 1998).

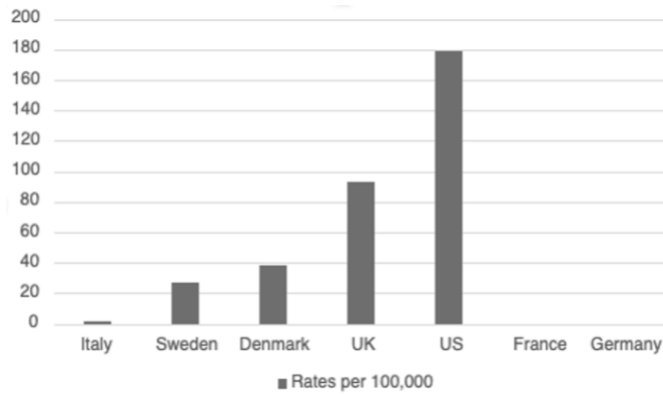


**Figure 1** Teen Pregnancy Rates by Country in 2018



**Figure 2** Rates of Chlamydia by Country in 2018





**Figure 3** *Rate of Gonorrhea by Country in 2018*

In a majority of the six European countries charted above, sex education standards are nationalized and mandatory. While the European Union cannot mandate education policy, it has realized statements and policy recommendations for member states. These recommendations include comprehensive sex education and is taught with openness to ensure the best results. The US however, has no such national standards for sex education and is likely the reason it falls behind on an international stage. Instead of a national policy on education, education policy in the US is left to individual states. While the federal government can incentivize education policy, this is unlikely to yield results since different administrations have addressed sex education in drastically different ways. Starting in the 1980's, sex education became highly politicized and led to the rise of Absence-only-until-marriage (AOUM) education. AOUM withholds information about contraceptives and STI's (Planned Parenthood Action Fund, n.d.). AOUM programs remained popular until the Obama administration placed an emphasis on evidence-based sex education programs and decreased funding for absence only education. The Teen Pregnancy Prevention Program (TPPP) and The Personal Responsibility Program (TPRP) were meant to “provide funding and support for sex education programs that are backed by science, proven to increase safer sex and help young people prevent unintended pregnancy” (Planned Parenthood

Action Fund, n.d.). The Trump administration has since reversed and defunded many of the Obama era policies and tried to incentivize AOUM programs.

Since federal policies are unreliable, states can provide their own standards of sex education. However, few states in the U.S have required the type of comprehensive sex education (CSE) that is likely to yield positive health outcomes. Currently in the US only 39 states mandate sex education or HIV/AIDs, 9 with only 28 which require both (Guttmacher Institute, 2020). While mandates on sex education may seem positive, only 17 states are required to be medically accurate and only 19 states cover information about different methods of contraception, while 39 states cover or stress abstinence. The chart below highlights many of the states which fail to provide students with comprehensive sex education.

**Table 1**  
**List of Bad Actors**

No Sex Education Mandate	No HIV Mandate	Not medically accurate	Does not provide Information on contraceptives
1. Alabama	1. Arizona	1. Alabama	1. Alaska
2. Alaska	2. Arkansas	2. Alaska	2. Arizona
3. Arizona	3. Colorado	3. Arizona	3. Arkansas
4. Arkansas	4. Idaho	4. Arkansas	4. Florida
5. Colorado	5. Indiana	5. Colorado	5. Georgia
6. Connecticut	6. Iowa	6. Connecticut	6. Idaho
7. Georgia	7. Kansas	7. Delaware	7. Indiana
8. Idaho	8. Kentucky	8. Florida	8. Iowa
9. Illinois	9. Louisiana	9. Georgia	9. Kansas
10. Indiana	10. Maine	10. Idaho	10. Kentucky
11. Louisiana	11. Maryland	11. Indiana	11. Louisiana
12. Massachusetts	12. Massachusetts	12. Kansas	12. Massachusetts
13. Michigan	13. Minnesota	13. Kentucky	13. Michigan
14. Missouri	14. Mississippi	14. Louisiana	14. Minnesota
15. Nebraska	15. Nebraska	15. Maryland	15. Mississippi
16. New York	16. South Dakota	16. Massachusetts	16. Missouri
17. Oklahoma	17. Wyoming	17. Michigan	17. Montana
18. Pennsylvania		18. Minnesota	18. Nebraska
19. South Dakota		19. Mississippi	19. Nevada
20. Wisconsin		20. Montana	20. New Hampshire
21. Wyoming		21. Nebraska	21. New York
		22. Nevada	22. North Dakota
		23. New Hampshire	23. Ohio
		24. New Mexico	24. Oklahoma
		25. New York	25. Pennsylvania
		26. North Dakota	26. South Dakota
		27. Ohio	27. Tennessee
		28. Pennsylvania	28. Utah
		29. South Carolina	29. Wisconsin
		30. South Dakota	30. Wyoming
		31. Texas	
		32. Vermont	
		33. West Virginia	
		34. Wisconsin	
		35. Wyoming	

This chart makes it clear that poor health outcomes in the United States cannot be blamed on a few states bringing up the averages. Rather, the entire country has a problem related to sex education. Only California, New Jersey Oregon and Washington have managed to pass comprehensive sex education. Even progressive states in New England, New York,

Massachusetts, Vermont and Maine, are among the list of offenders when it comes to sex education. The question that remains is exactly what explains the lack of interest in sex education in progressive states?

### **Scholarship on Sex Education**

Scholars have analyzed the existing barriers in the passage of sex education. One possible explanation is public support or opinion for AOUM. However, in 2006 research conducted by the University of Pennsylvania examine how public opinion on AOUM align with policy makers actions. Their research concluded “that current investments in abstinence-only sex education programs do not correspond with either public opinion or scientific consensus on how sex education should be taught in schools. Their results demonstrated that American adults, regardless of political ideology, favor a more balanced approach to sex education compared with the abstinence-only programs funded by the federal government” (Bleakley et al., 2006). This conclusion indicates that it is not public opinion that prevents the passage of sex education. Similarly in 2017 a survey of democratic and republican parents both showed strong support for sex education in schools despite common conceptions about republican voters (Kantor & Levitz, 2017).

Other literature blames partisanship among politicians and that differing views in core ideological beliefs stops sex education reform. Boryczka (2009) argues that right leaning politicians support personal responsibility opposed to, a more liberal view of, social responsibility, which fits more neatly with AOUM programs. While liberals support social responsibility, which aligns with comprehensive sex education. The article believes that sex education is just another arena for the responsibility debate (Boryczka, 2009). Similarly, research evaluating the political debate in the UK about sex education, not found in the Netherlands,

argued that it came down to a “struggle over ideas in respect of the wider issues of change in the family & sexuality” (Lewis & Knijn, 2002).

Some researchers go even further in blaming religious factions of the republican party. An article by Janice Irvine goes as far as to blame the Christian right. She argues “the Christian Right has long utilized emotions such as shame & fear as part of its effort to strengthen opposition to sex education. They have also attempted to portray sex education as immoral, & extremist. As a result, a conservative, restrictive climate has emerged in the US -- a climate wherein it has become politically dangerous to speak out in support of sex education” (Irvine, 2002).

Research has eliminated public opinion as a potential explanation for the passage of comprehensive sex education. However, it has indicated that religious rhetoric and partisanship among politicians may be responsible for the inability for sex education to pass. Other possible explanations could include health outcomes in a state. If California has severe health outcomes they may be more inclined to pass legislation to combat poor outcomes. This could include STI, STD and teen pregnancy rates. The composition of a state legislature may also have an effect on the passage of sex education reform. For example, we have seen that partisanship matters but does it matter more if a new party has just gained control. It will also be important to evaluate the number of women in the legislature. Often times girls are the ones who are impact most by a lack of sex education and education itself is often thought of as a “women’s issue”. Therefore, we might expect that a greater number of women in the legislature could result in sex education reform. Public opinion will be evaluated just in case it does not follow previous research. Interest group advocacy could be another potential explanation. If there are groups frequently coming to visit and lobbying for legislation, the legislators might take it into more serious consideration.

Lastly, funding of different sex education bills may inhibit progress. Some states may pass progressive legislation but did not approve any funding. This may pass more easily than a bill with a large number of allocated funds.

## **Methods**

### **Case Study: Comparing New York and California**

Table 1 has shown us that there are multiple bad actors in sex education, not just a few states that bring everyone down. While California has set standards for comprehensive sex education in the US, other seemingly progressive states like New York have fallen far behind. In California's public schools sex education is mandated, medically accurate and provides contraceptive education, all of which New York does not. The comparison of these two states, both progressive and not deeply religious, should point to other more nuanced reasons why sex education might not be getting the attention it deserves in the United States.

In 2015 California was one of the first states in the US to pass comprehensive sexuality education under the California Healthy Youth Act. It is rather unusual for California to pass such a liberal policy and not see New York follow after they were given an opportunity in the 2019. During New York States 2019-2020 Legislative Session, Senate Bill S4844 sponsored by Metzger and Assembly Bill A6512 Sponsored by Nolan were introduced to establish sexuality education as an integral part of health education. The bill amends the education law to establish a sexuality education program within the department to educate students. Essentially it would require that the Board of Regents, Commissioner of Health and the Education Department of the State set basic requirements for a k-12 program that would be based on science and inclusivity while allowing schools to develop their own curriculums. The bill still allows for a parental opt-out option and would only apply to only public schools in New York State.

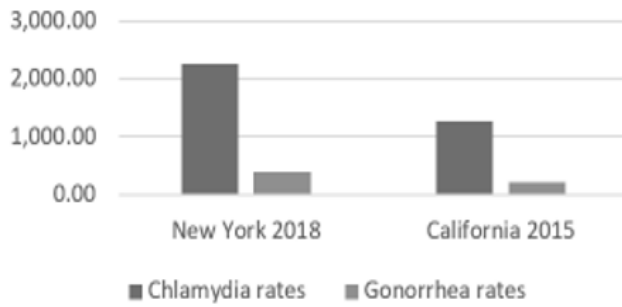
This policy was in many ways a replica of the California Healthy Youth Act of 2015. However, this bill never made it out of committee in NYS. The rest of this paper will seek to analyze alternative explanations as to why California was able to pass the Healthy Youth Act in 2015 and New York Failed. To identify the key to passage in one state and not another we will compare health outcomes, composition of the legislature, public opinion data and interest group advocacy. After evaluating these aspects of the two states, it should be more evident why California was able to address sex education and why New York has failed.

In an attempt to explain California's success and New York's failure to adopt comprehensive sex education we will look to a number of different dimensions. We will start by comparing health outcomes, STI/STD and teen pregnancy rates, for the year of or before the legislation was introduced to identify if one state had a larger problem than the other. We will then look to composition of the two state legislatures when the bill was introduced. Next, we will compare public opinion in both states to ensure that the literature was correct in assumptions about majority approval of sex education programs. Then a comparison of the amount of advocacy activity in the two states will be evaluated. Lastly, we will look to the funding attached to both bills.

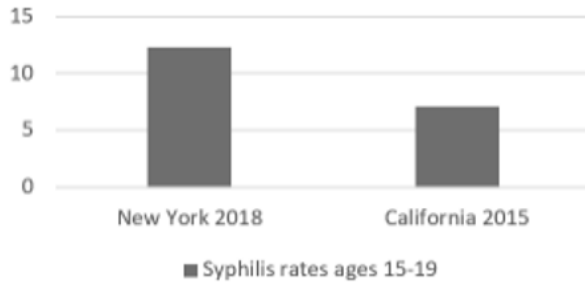
### **Health Outcomes**

In New York we will focus on health outcomes directly before the bill was introduced. This will primarily be statics from 2018. In some cases, there wasn't recent enough data to account for 2018. In California we will evaluate health statics from 2015 since the bill went into effect January 1, 2016. It would follow that a state which has poor health outcomes would want to adjust their sex education policy. In the state of New York, we would expect the rates and health outcomes to be lower since California passed the bill and New York did not. Below there is a

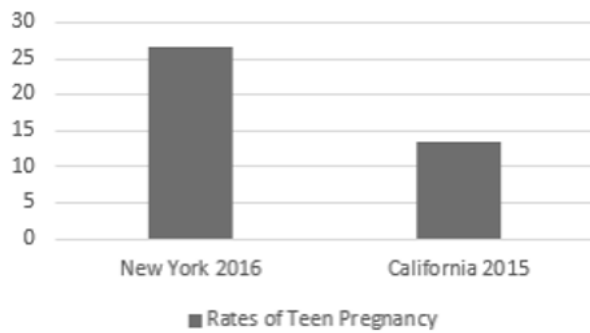
comparison of infection rates for adolescents ages 15-19 per 100,000 and teen pregnancies in New York and California. The Data was gathered from The New York Department of Health, California Department of Health and The Centers for Disease Control.



**Figure 4** STI Rates in New York and California



**Figure 5** Comparison of Syphilis Rates in New York and California



**Figure 6** Comparison of Teen Pregnancy Rates in New York and California





**Figure 7** *Comparison of HIV rates in New York and California*

After a comparison of the two states, the data clearly reveals that health outcomes in the state of New York prior to the introduction of the senate and assembly bill was much worse than outcomes in California. New York rates of adolescent STI infections and pregnancy were much higher than that of California. However, California did have a slightly higher rate of HIV. This was opposite what I would have predicted since the bill was passed in California and not New York. While these health outcomes may have signaled to the California State Legislators to act, they did not seem to affect many New York Legislators.

### **Composition of the State Legislatures: Majority Party and the Number of Women**

Similar to the last section, we will track the composition of the legislature for the corresponding year the bill was introduced or in California's case, passed. We will start with an evaluation of majorities in the state legislature, whether they are democratic or republican. We will then track the party which held majority in the last election cycle and if it had changed. The number of women in the legislatures will also be compared because education is commonly thought of as a "women's issue".

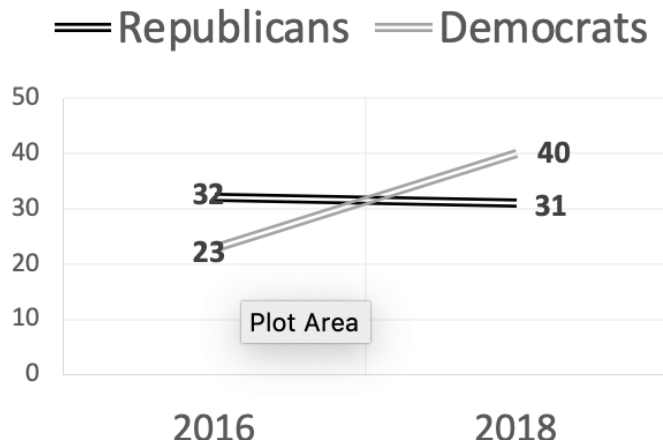
The New York State legislature is comprised of two houses: the State Assembly and Senate. Elections happen every two years so we will evaluate the senate during after the 2018 election since these representatives introduced and would have voted on Bills S4844 Metzger/

and A6512 Nolan. The Chart below provides the composition of the NYS Legislature after the 2018 election.

**Table 2**  
**Party Composition of The New York State Legislature 2018**

	Number of Democrats	Number of Republicans	Total Number of Seats
Senate	40	23	63
Assembly	106	43	150

Here we clearly see a democratic majority in both houses after the 2018 election (Ballotpedia, n.d.). Democrats were previously the majority party in the Assembly, but Republicans have controlled the Senate since 2010 (Ballotpedia, n.d.).



**Figure 8** *NYS Senate Majority 2016-2018*

Table 3 below tracks the number and percentage of women in the state legislature before and after the 2018 election. Here we see an increase of women elected to the state legislature between 2016 and 2018 (Ziegler, 2016, 2018).

**Table 3**  
**Women in the NYS Legislature**

New York	Number of Women in 2016	Number of Women in 2018
Senate	11	15
Assembly	43	45
Percentage of women in the State Legislature	25.4	28.2

The California state legislature also has an Assembly and Senate. The Assembly has 80 seats and members are elected for two-year terms, while the Senate has 40 seats and are elected for four-year terms. The 2015 state legislature was controlled by democrats in both houses, decided by the 2014 election. The table below provides the composition of the California State Legislature after the 2014 election.

**Table 4**  
**Party Composition of the California State legislature 2014**

	Number of Democrats	Number of Republicans	Total Number of Seats
Senate	26	13	40
Assembly	52	28	80

Although party control has not changed, there was a decrease in democratic seats in the Assembly between 2012 and 2014. In 2012 there were 56 democratic members of the Assembly compared to 52 in 2014 (Ballotpedia, n.d.). The senate majority for democrats was the same in 2012 and 2014 (Ballotpedia, n.d.).

The table below tracks the number and percentage of women in the California State Legislature between 2012 and 2014. In 2014, California actually had a decrease in women elected to the state legislature compared to 2012 (Ziegler, 2013, 2015).

**Table 5**  
**Women in the California State Legislature**

California	Number of Women 2012	Number of Women 2014
Senate	12	12
Assembly	22	20
Percentage of Women in the State Legislature	26.7	25

I would have expected a shift in New York to signal the passage of the sex education bill since the democratic party had a two-house majority and the ability to bring any bill to the floor. However, a shift in majority party in NY but not in California could be a potential explanation for the failing of NYS to pass CSE. It could be possible that since the democrats had just become the majority party in both houses that other bills were at the top of their policy agenda. In the 2018-2019 legislative session New York State democrats successfully passed gun control legislation which expanded the SAFE Act passed in 2013, expanded abortion protections, approved licenses for undocumented immigrants, reformed and eliminated cash bail, ended religious exemptions of vaccination, decriminalized marijuana, voting reforms, the Child Victims Act and reformed rape law in NYS. Democrats in New York covered even more topics but those were just a few of the most notable accomplishments (Spector & Campbell, 2019).

As for women in the state legislature, it seems that this did not have much of an effect. New York had both an increase in women between the two cycles, opposed to California, and a higher percentage of female legislature than California. Therefore, we can rule out that a higher percentage or number of female legislatures had anything to do with the passage of CSE in California and not in New York. It could still be possible that the female legislature in California care more about CSE than New York but that inference cannot simply be drawn by comparing the number of women in each state house.

## **Public Opinion**

According to the New York Civil Liberties Union, a poll conducted in 2009 showed widespread support for sex education in schools. According to their report “87 percent of New York voters said it was important that public schools provide sex education to students. A 2011 poll showed that more than three-fourths of New York voters favor teaching comprehensive sex education” (New York Civil Liberties Union, 2012).

In California a random digital survey of 1,284 California parents was conducted in 2006. It, like survey data from New York, showed widespread support for sex education in schools. Specifically, 89% of parents supported comprehensive sexuality education while only 11% supported abstinence only education (Constantine et al., 2016). “Four types of reasons for preferences emerged: those focused on the consequences of actions, on the importance of providing complete information, on the inevitability of adolescents’ engaging in sex and on religious or purity-based morality concerns. While 64% of abstinence-only supporters cited the last type, 94% of comprehensive sex education supporters cited one of the first three (Constantine et al., 2016).

## **Interest group Advocacy**

Since the bill has not left committee it has a low profile and most New Yorkers probably do not know it exists. Although this bill might not be known to constituents, it has caught the attention of several other groups who now lobby for bills A6512 and S4844. Groups in Support of Bill A6512 include New York State Bipartisan Pro-Choice Legislative Caucus, Planned Parenthood of Greater New York, Stop the Shaming, National Institute for Reproductive Health and New York Civil liberties Union. The Bipartisan Pro-Choice Caucus is comprised of over 50 legislators from both side of the isle. They released a statement in support of Comprehensive

Sexuality Education. On Planned Parenthood's website they list Comprehensive Sexuality Education Bill A6512 as a 2020 legislative priority claiming that this is a "need for students in New York State" (Planned Parenthood of Greater New York, 2020). Stop the Shaming was founded by a mother in Baldwinsville, New York, who watched a "presentation by a faith-based crisis pregnancy center in her [daughters] health class at Baker High School" (Casey, 2019). Her daughter recorded the lecture and showed her mother, Gina Tonello, founder of Stop the Shaming. After that Tonello made it her mission to stop the spread of inaccurate sexual education and advocate for Comprehensive sexuality education in schools across New York State (Casey, 2019). The New York Civil Liberties Union released a memo in which they voiced strong support for bill A6512. They believe that CSE is critical to the health and safety of today's teens. Claiming that bill A6512 is a "common sense measure" (New York Civil Liberties Union, 2019)

One of the most influential groups may be The National Institute for Reproductive Health (NIRH). They were successful during the 2019 legislative session for the passage of the Reproductive Health Act, they have now shifted their focus to sexuality education. In NYC the NIRH has been extremely active. In 2016 they "successfully advocated for a package of bills requiring the NYC Department of Education to better track and evaluate sexuality education provision and teacher training, providing administrators, lawmakers, and advocates with vital data to better understand what is happening with sexuality education in our schools" (National Institute for Reproductive Health, 2017). Even with success in NYC the NIRH continues to advocate for CSE in Albany because they believe that "focusing on the use of evidence-based curriculum and reducing disparities are central to improving the health and well-being of children and young adults" (National Institute for Reproductive Health, 2019). The NIRH held

Repro Freedom Day of Action, a legislative action day in June of 2019. This day was centered around lobbying legislators and advocating for A6512, comprehensive sexuality education (National Institute for Reproductive Health, 2019).

The group who poses the greatest opposition to CSE in New York State is the Catholic Conference. The Catholic Conference supports increasing funding for abstinence only education and is opposed to sexuality education that would encourage promiscuous behaviors and affirm certain beliefs pertaining to sexuality (Woyton, 2020). An activist for the group, Kathleen Gallagher believes that bill A6512 offers a “one-size-fits-all state mandate that doesn’t take into consideration the religious and moral beliefs of parents, and their fundamental right to direct the education of their children” (Grosserode, 2020).

In California there was little activism before the passage of the California Healthy Youth Act. A Memo in support of the legislation, Bill AB 329 by Assemblywomen Sherly Weber, came jointly from the American Civil Liberties Union of California, Equality California, Planned Parenthood of California, Move Forward and California Latinas for Reproductive Justice. The California Women’s Law center also sent memos in support of the legislation and even had a fill in the blank letter that could be sent to different state legislators. There was no press release made by Assembly Member Weber’s office, nor could I obtain any information about a lobby day at the state legislature. It seems as though opposition was limited when Bill AB 329 was first introduced on the floor. Most opposition came when the education framework was drafted in 2018. This sparked opposition from many parents and religious groups who opposed the inclusion of LGBTQ+ education.

The limited amount of information about advocacy in California but the seemingly abundant advocacy in New York remains an even more confusing piece of the puzzle. Common

sense would suggest that the more advocacy, the more likely a bill is to pass the state legislature. However, here we see the opposite, New York, a state with advocacy much higher than California, was not able to get the bill to even be voted on in a committee hearing, yet California was able passed the bill.

### **Funding**

Neither bill in New York nor California had any funding attached. This could have been a possible snag if New York had funding attached and California did not but this was not the case. As a result, we can rule out funding as a possible explanation.

### **Conclusion**

While this comparison has not yielded one convincing reason why sex education has not passed, in New York State it has indicated a number of other things. While New York State is celebrated as one of the most progressive states, it can only do so much during one legislative session. Therefore, sometimes big problems like sex education just do not get enough attention. This is not just true in New York but for all other state legislatures. Regardless, in a democracy the will of the people should eventually be made law and sex education is no different. The public opinion data was pretty clear, parents approve of sex education in New York and in theory that should be enough for it to pass the legislature. Sex education should not be left up to legislatures who prioritize their personal views over that of their constituency. However taboo it may seem, lack of sex education has real and sometimes devastating consequences for young adults in the US.

If the state legislatures cannot get their act together, then congress should act. If the US continues to ignore sex education, health outcomes will only get worse. While sex education might not seem linked to our international standing, it easily could be. Eventually, a lack of



action on an issue like sex education could change the way Americans are perceived abroad. Not as a world superpower but as a country that refuses to act even when presented with scientific facts.

**Table 6**  
**Summary of Results**

	New York	California
Health Outcomes	Poor	Moderate
Legislative Control	Democrats	Democrats
Shift in Legislative Majority	Shift Senate: R→D Assembly: D→D	No Shift Senate: D→D Assembly: D→D
Women in the legislature	Assembly: 45/ 150 Senate: 15/ 63 Total: 60/213 or 28.2% Increase of 3.2%	Assembly: 20/ 80 Senate: 12/40 Total: 32/ 120 or 26.7% Decrease of 2%
Public Approval of CSE	High	High
Interest Group Advocacy	High	Low
Funding	None	None

## References

- Ballotpedia (n.d.). *California State Assembly elections, 2012*. Retrieved January 2021, from  
[https://ballotpedia.org/California\\_State\\_Assembly\\_elections,\\_2012](https://ballotpedia.org/California_State_Assembly_elections,_2012)
- Ballotpedia (n.d.). *California State Senate*. Retrieved January 2021, from  
[https://ballotpedia.org/California\\_State\\_Senate\\_elections,\\_2012](https://ballotpedia.org/California_State_Senate_elections,_2012)
- Ballotpedia (n.d.). *New York State Senate elections, 2018*. Retrieved January 2021, from  
[https://ballotpedia.org/New\\_York\\_State\\_Senate\\_elections,\\_2018](https://ballotpedia.org/New_York_State_Senate_elections,_2018)
- Ballotpedia. (n.d.). *New York State Assembly elections, 2018*. Retrieved January 2021, from  
[https://ballotpedia.org/New\\_York\\_State\\_Assembly\\_elections,\\_2018](https://ballotpedia.org/New_York_State_Assembly_elections,_2018)
- Bleakley, A., Hennessy, M., & Fishbein, M. (2006). Public opinion on sex education in US schools. *Archives of Pediatrics and Adolescent Medicine*.  
<http://doi.org/10.1001/archpedi.160.11.1151>
- Boryczka, J. (2009). Whose responsibility? The politics of sex education policy in the United States. *Politics & Gender*, 5(2), 185-210. <http://doi.org/10.1017/S1743923X09000154>
- Brangoccio, K., & Ziegler, K. (2014, April 1). *Women in state legislatures for 2014*. National conferences of state legislatures. <https://www.ncsl.org/legislators-staff/legislators/womens-legislative-network/women-in-state-legislatures-for-2014.aspx>
- Bureau of HIV/AIDS Epidemiology AIDS Institute New York State Department of Health. (2018). *New York State HIV/Aids annual surveillance report*.  
[https://www.health.ny.gov/diseases/aids/general/statistics/annual/2018/2018\\_annual\\_surveillance\\_report.pdf](https://www.health.ny.gov/diseases/aids/general/statistics/annual/2018/2018_annual_surveillance_report.pdf)

- California Department of Public Health. (2018). *Sexually transmitted diseases data [Data Set]*.  
<https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/STD-Data-Chlamydia-Tables.pdf>
- California Department of Public Health. (2018). *Sexually transmitted diseases data [Data Set]*.  
<https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/STD-Data-Gonorrhea-Tables.pdf>
- California Department of Public Health. (2018). *Sexually transmitted diseases data [Data Set]*.  
<https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/STD-Data-Syphilis-AllStages-Tables.pdf>
- California Department of Public Health. (2018). *Adolescent births in California 2000-2016*.  
<https://www.cdph.ca.gov/Programs/CFH/DMCAH/CDPH%20Document%20Library/Data/Adolescent/Adolescent-Birth-Rates-2016.pdf>
- California Department of Public Health. (2018). *2018 STD surveillance report*.  
<https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/STD-Surveillance-Executive-Summary.pdf>
- Casey, A. M. (2019, July 8). B'ville mom advocates for comprehensive sex ed. *Eagle News Online*. <https://www.eaglenewsonline.com/news/new/2019/07/08/bville-mom-advocates-for-comprehensive-sex-ed/>
- Center for Disease Control. (2019, July 30). *Sexually transmitted diseases surveillance 2018*.  
<https://www.cdc.gov/std/stats18/gonorrhea.htm>
- Center for Disease Control. (2019, September 30). *Sexually transmitted diseases surveillance 2018*.

<https://www.cdc.gov/std/stats18/chlamydia.htm#:~:text=Chlamydia%20%E2%80%94%20United%20States,539.9%20cases%20per%20100%2C000%20population>

Center for Disease Control. (2015). *State health profile*.

[https://www.cdc.gov/nchhstp/stateprofiles/pdf/California\\_profile.pdf](https://www.cdc.gov/nchhstp/stateprofiles/pdf/California_profile.pdf)

Constantine, N. A., Jerman, P., & Huang, A. X. (2016). California parents' preferences and beliefs regarding school-based sex education policy. *Perspectives on Sexual and Reproductive Health*, 39(3), 167-175. <https://doi.org/10.1363/3916707>

European Centre for Disease Prevention and Control. (2018). Annual epidemiological report for 2018: Chlamydia infection.

<https://www.ecdc.europa.eu/sites/default/files/documents/AER-for-2018-STI-chlamydia.pdf>

European Centre for Disease Prevention and Control. (2018). Annual epidemiological report for 2018: Gonorrhoea. <https://www.ecdc.europa.eu/sites/default/files/documents/gonorrhoea-annual-epidemiological-report-2018.pdf>

Grosserode, S. (2020, February). Could sex ed be required in NY Schools? *Times Herald Record*. <https://www.recordonline.com/news/20200219/could-sex-ed-be-required-in-ny-schools>

Guttmacher Institute (2020, November 30). *Sex and HIV education*.

<https://www.guttmacher.org/state-policy/explore/sex-and-hiv-education#>

Irvine, J. M. (2002). *Talk about sex: The battles over sex education in the United States*. California Press.

Kantor, L., & Levitz, N. (2017). Parents' views on sex education in schools: How much do

- Democrats and Republicans agree?. *PLOS ONE*, 12(7), <https://doi.org/10.1371/journal.pone.0180250>
- Lewis, J., & Knijn, T. (2002). The politics of sex education policy in England and Wales and the Netherlands since the 1980s. *Journal of Social Policy*, 31(4), 669-694. <http://doi.org/10.1017/S0047279402006761>
- Mcgee, M. (1998). Comparing European and U.S. approaches to adolescent sexual health. *Education Update*. Retrieved January 2021, from <https://pubmed.ncbi.nlm.nih.gov/12322060/>
- National Institute for Reproductive Health (2017, May 1). *Improving sexual health education in New York City*. <https://www.nirhealth.org/blog/2017/05/01/improving-sexual-health-education-new-york-city/>
- National Institute for Reproductive Health (2019, June 19). *Comprehensive sexuality education*. <https://www.nirhealth.org/what-we-do/youth-initiatives/comprehensive-sexuality-education/>
- National institute for Reproductive Health (2019, November 9) *New York Repro Freedom Day of Action 2019*. <https://www.nirhealth.org/lobby-day/>
- New York Civil Liberties Union (2019, May 31). *Legislative memo: Comprehensive sex ed*. <https://www.nyclu.org/en/legislation/legislative-memo-comprehensive-sex-ed>
- New York Civil Liberties Union. (2012, September 12). *NYCLU study shows gaps, inaccuracies and bias in NY sex ed instruction*. <https://www.nyclu.org/en/press-releases/nyclu-study-shows-gaps-inaccuracies-and-bias-ny-sex-ed-instruction>
- New York State Department of Health. (2018). *Sexually transmitted infections surveillance report New York State*.

[https://health.ny.gov/statistics/diseases/communicable/std/docs/sti\\_surveillance\\_report\\_2018.pdf](https://health.ny.gov/statistics/diseases/communicable/std/docs/sti_surveillance_report_2018.pdf)

New York State Department of Health. (2016). *Total pregnancies and teenage pregnancies by type and resident county New York State [Data Set]*.

[https://www.health.ny.gov/statistics/vital\\_statistics/2016/table30.htm](https://www.health.ny.gov/statistics/vital_statistics/2016/table30.htm)

Panchaud, C., Singh, S., Feivelson, D., & Darroch, J. (2016). Sexually transmitted diseases among adolescents in developed countries. *Perspectives on Sexual and Reproductive Health*, 32(1), 167-175. <https://doi.org/10.1363/3202400>

Planned Parenthood Action Fund. (n.d.). *Abstinence-only-until-marriage programs*.

<https://www.plannedparenthoodaction.org/issues/sex-education/abstinence-only-programs>

Planned Parenthood Action Fund. (n.d.). *How sex education gets funding*.

<https://www.plannedparenthoodaction.org/issues/sex-education/how-sex-education-funded>

Planned Parenthood of Greater New York. (2020). *Legislative and policy agenda*.

<https://www.plannedparenthood.org/planned-parenthood-greater-new-york/about/legislative-agenda>

Spector, J., & Campbell, J. (2019, June 23). 20 major laws passed at the New York State Capitol this year. *Democrat & Chronicle*.

<https://www.democratandchronicle.com/story/news/politics/albany/2019/06/21/20-major-laws-passed-new-york-state-capitol-year-marijuana-abortion-guns-licenses/1522933001/>

The World Bank (n.d.). *World development indicators [Data set]*.

<https://databank.worldbank.org/reports.aspx?source=2&series=SP.ADO.TFRT&country>

Woyton, M. (2020, February 22). NYS considering sex ed for all grades. *Patch News*.

<https://patch.com/new-york/newrochelle/nys-considering-sex-ed-all-grades-poll>

Ziegler, K. (2013, September). *Women in State Legislatures: 2012 Legislative Session*. National

Conferences of State Legislatures. <https://www.ncsl.org/legislators->

[staff/legislators/womens-legislative-network/women-in-state-legislatures-2012.aspx](https://www.ncsl.org/legislators-staff/legislators/womens-legislative-network/women-in-state-legislatures-2012.aspx)

Ziegler, K. (2015, September 20). *Women in the State Legislature for 2014*. National

Conferences of State Legislatures. <https://www.ncsl.org/legislators->

[staff/legislators/womens-legislative-network/women-in-state-legislatures-for-2014.aspx](https://www.ncsl.org/legislators-staff/legislators/womens-legislative-network/women-in-state-legislatures-for-2014.aspx)

Ziegler, K. (2016, September 20). *Women in the State Legislature for 2016*. National

Conferences of State Legislatures. <https://www.ncsl.org/legislators->

[staff/legislators/womens-legislative-network/women-in-state-legislatures-for-2016.aspx](https://www.ncsl.org/legislators-staff/legislators/womens-legislative-network/women-in-state-legislatures-for-2016.aspx)

Ziegler, K. (2018, June 28). *Women in State Legislatures for 2018*. National Conferences of

State Legislatures. <https://www.ncsl.org/legislators-staff/legislators/womens-legislative->

[network/women-in-state-legislatures-for-2018.aspx](https://www.ncsl.org/legislators-staff/legislators/womens-legislative-network/women-in-state-legislatures-for-2018.aspx)