



PARENT SUPPORT FOR COMPREHENSIVE SEX EDUCATION

Overview

As parents, our long-term goal is to raise productive, healthy, happy adults. We support young people's journeys by sharing our skills and knowledge. We offer them safe, developmentally appropriate opportunities to take on greater personal responsibility. We do everything we can to help them enter adulthood prepared for their own bright futures.

One way to do this is to support their access to high-quality, evidence-based, sexuality education at school as well as at home.

We asked Minnesota parents what they want their kids to learn about sexual health.

In 2021, the University of Minnesota's Healthy Youth Development – Prevention Research Center surveyed over 700 Minnesota parents from various communities, income and education levels, ethnicities, and religious beliefs.

We learned that 90% of Minnesota parents want public school teachers to teach abstinence AND science-based, comprehensive sexuality education.

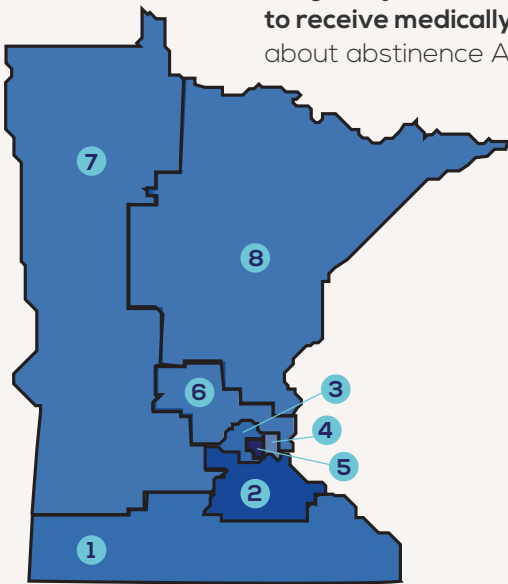
An overwhelming majority of parents surveyed—across religions, political beliefs, and geography—believe that young people deserve broad, developmentally appropriate, and medically accurate sexuality education in school. They want their children to get answers to their questions about sexual development and health no later than middle-school.



There is no rural/urban divide.

Minnesota parents in all eight Congressional districts disagree on plenty of things, but sexuality education isn't one of them.

Large majorities of Minnesota parents in every Congressional district want young people to receive medically-accurate sexuality education in school that includes information about abstinence AND prevention of pregnancy and sexually transmitted diseases.



79% of Minnesota parents want the Legislature to join the majority of states that have adopted basic standards for sexuality education.

Currently, the quality of the sexual health education a young person in Minnesota receives varies widely from district to district and school to school.

Our public policies and district practices do NOT deliver what Minnesota parents want.

- No statewide graduation health course requirement
- No statewide health instruction standards
- No state-required health teacher training
- No dedicated state funding source for health classes

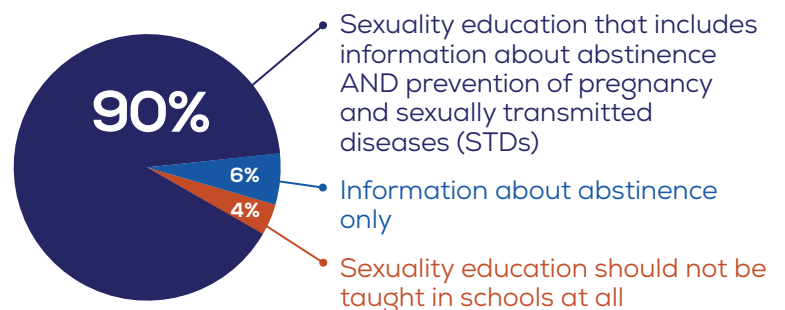


District 1 ... 85% • District 2 ... 93% • District 3 ... 87% • District 4 ... 94% • District 5 ... 97% • District 6 ... 88% • District 7 ... 88% • District 8 ... 88%



Minnesota parents want their kids to get the facts.

"What should young people be taught?"



Sexuality education helps young people become sexually healthy adults.

Adolescence marks the transition into adulthood: a young person's experiences, relationships, and values formed during this time will shape the person they become. Receiving high quality sexuality education in school correlates to improved social/emotional learning, better academic performance, development of healthy relationships, delayed initiation of sexual experience, prevention of child sex abuse, and increased media/internet literacy.

Like the driver's education, family science, and personal finance classes offered to prepare young people for life's next steps, school-based sexuality education gives them a safe space in which to learn, question, and clarify their values.

Minnesota parents can opt out their child from receiving sexuality education in an educational setting, but few tend to do so. Sexuality education in school acknowledges and prepares young people for future sexual and reproductive decision-making while also supporting those who choose to delay sexual activity.

Just as other classes help with their future decisions to get a driver's license or stick to a budget, sexuality education equips young people to do their own developmental work to become sexually healthy adults.

“WHAT IS A SEXUALLY HEALTHY ADULT?”



A sexually healthy adult knows their body deserves kindness and safety and has the knowledge and communication skills to handle the world they live in.

It means:

- Being comfortable with the right and responsibility to define your emotional and physical boundaries.
- Taking responsibility for yourself: being empowered to ask for and give consent to partnered sexual activity.
- Taking responsibility for others: respecting romantic partners' stated boundaries and bodily autonomy.
- Being knowledgeable about your own body, including how to keep it healthy, protect it from harm, and access health information and services.
- Being aware of your sexual orientation and gender identity.
- Making informed and thoughtful decisions about your health.

Sexuality education can prevent potential harms.

The research shows that accurate, developmentally appropriate sexuality education paired with instruction on how and when to say no to sex can prevent unplanned pregnancies and sexually transmitted infections by increasing condom and contraceptive use and decreasing experiences of unprotected sex. Not surprisingly, the American Medical Association and the American Academy of Pediatrics support comprehensive sexuality education.

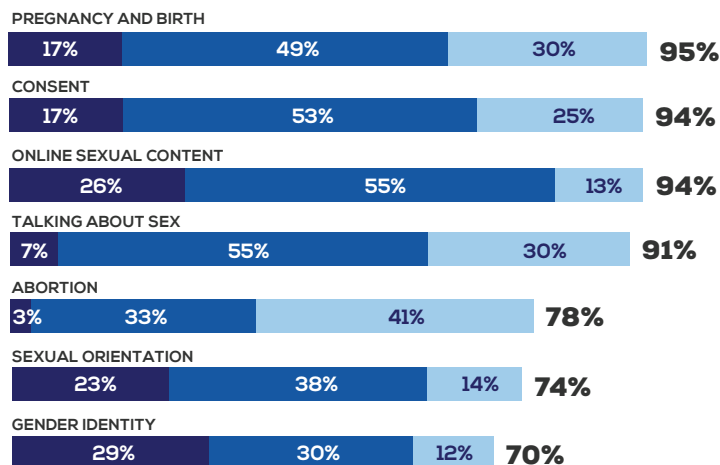
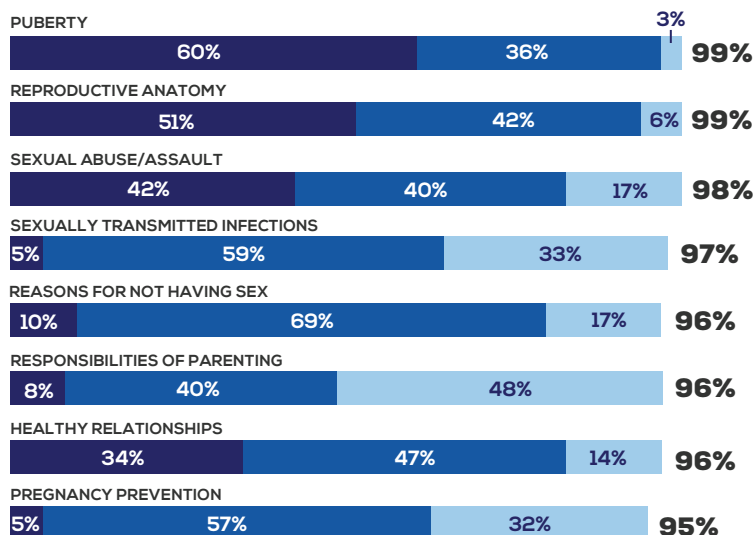
In contrast, most abstinence-only-until-marriage programs say nothing about how to prevent disease and unplanned pregnancy. Shame-based edicts to abstain from sex until marriage are political, not educational strategies: they don't support our young people in preparing for their futures. In fact, research shows that they fail to deliver any of the results they promise, including the delay of initiation of sex, a return to abstinence, or fewer sexual partners.



Rural and urban Minnesota parents agree.

This chart shows the grade level at which parents surveyed want a topic introduced in school. Minnesota parents have a wide range of opinions on when schools should introduce certain topics. But many agree that their children should start learning the basics about puberty, reproductive anatomy, healthy relationships, and sexual abuse prevention in elementary school:

INTRODUCE IN GRADES ■ K-5 ■ 6-8 ■ 9-12



96% of parents want the sexual health information young people receive to be medically accurate.



96% of parents agree that students should be encouraged to talk to a parent or guardian about sex and sexuality.



3% of parents want the Internet to be young people's main source of sexual health information.

It takes time and a lot of questions to prepare for life's tests.

Most parents want their elementary school-aged children to learn the basics of sexual health – like reproductive anatomy, sexual abuse prevention, and puberty – along with other developmentally-appropriate topics like addition and the ABCs.



“YES, young people should receive sexuality education in school.”

These charts show the **percentage of Minnesota parents** in each category who said, YES to sexuality education in school that includes information about abstinence AND prevention of pregnancy and sexually transmitted diseases.

Children's school setting and grade

In public school	93%
In private/home school	76%
In K-2nd grade	87%
In 3rd-5th grade	89%
In 6th-8th grade	87%
In 9th-12th grade	91%

Parent's gender

Male	88%
Female	92%

Parent's age group

<40	90%
40-49	91%
50+	94%

Parent's race/ethnicity

Asian American/ Pacific Islander	94%
Black	75%
Hispanic	96%
Multiracial	95%
Native American	80%
White	93%

Parent's religion

Protestant	90%
Catholic	89%
Other/no religion	94%

Parent's political leanings

Very conservative	57%
Somewhat conservative	93%
Middle of the road	94%
Somewhat liberal	98%
Very liberal	100%

Parent's level of education

High school, GED, or less	95%
Vocational/technical certificate	89%
Some college or Associate's degree	92%
Bachelor's degree	89%
Graduate school	93%

Parent's annual income

<\$40,000	94%
\$40,000-<\$60,000	93%
\$60,000-<\$100,000	90%
\$100,000 or more	94%



Start a local conversation.

By simply talking about sexual health, you can support our young people and build healthier communities.



At home. Be your child's trusted adult. Parents are their children's first and best sex educators: it doesn't always feel like it, but our young people really want to know what we think. For talking tips, go to <https://amaze.org/parents/>.



At school. Add your voice to the majority of parents in your district. Use the resources at <https://amaze.org/educators> to engage other parents at curriculum nights. Thank your children's health teachers for sharing the facts and supporting safe classroom discussions. See if you find your local schools' curricula in the context of these national best practices: <http://recapp.etr.org/RECAPP/INDEX.CFM?fuseaction=pages.ebphome>.



In community. Be a source of information in your communities. Spread the word that Minnesota's policies are out of step with what parents want. Tell your PTA, school board, or legislators that you support them in having clear, medically accurate standards for children's sexuality education. Your school and school district's approach to sexuality education is decided at the school and school board level: your opinion really matters.

Resources

Learn more about healthy youth development and comprehensive sexuality education:

Minnesota Department of Health, <https://www.health.state.mn.us/people/adolescent/youth/index.html>

SIECUS: Sex Ed for Social Change, <https://siecus.org/resources/comprehensive-sex-education-federal-fact-sheet/?eType=EmailBlastContent&id=212dc869-cb51-4824-a212-30a73b752d90>

Office of Population Affairs, <https://opa.hhs.gov/adolescent-health>

Federal Youth Services Bureau, <https://www.acf.hhs.gov/fysb/about>

Sources

Goldfarb, E. S., & Lieberman, L. D. (2021). Three Decades of Research: The Case for Comprehensive Sex Education. *Journal Adolesc Health*, 68(1), 13–27. <https://doi.org/10.1016/j.jadohealth.2020.07.036>

Lindberg, L. D., & Kantor, L. M. (2022). Adolescents' Receipt of Sex Education in a Nationally Representative Sample, 2011–2019. *J Adolesc Health*, 70(2), 290–297. <https://doi.org/10.1016/j.jadohealth.2021.08.027>

SIECUS: Sex Ed for Social Change, 2021. Comprehensive Sexuality Education Federal Fact Sheet. Available from: <https://siecus.org/wp-content/uploads/2021/10/CSE-Federal-Factsheet-Sept-2021-Update-2.pdf>

Centers for Disease Control and Prevention, 2020. What Works: Sexual Health Education Fact Sheet. Available from <https://www.cdc.gov/healthyouth/whatworks/what-works-sexual-health-education.htm>

Who was surveyed?

This survey was conducted by mail and e-mail (April–August, 2021), and in person via iPad at the Minnesota State Fair (Aug–Sept, 2021). In total, 719 parents were surveyed. Care was taken to ensure that similar numbers of parents from every congressional district in the state were sampled.

Gender	Religion	Education	Political orientation	Income
Female75%	Protestant53%	HS or less6%	Very conservative11%	<40,0005%
Male25%	Catholic21%	Vocational/tech/business4%	Somewhat conservative22%	\$40K–<\$60K6%
Race	Other/no religion26%	Some college or AA degree22%	Middle-of-the-road30%	\$60K–<\$100K20%
White89%		Bachelor's degree36%	Somewhat liberal24%	\$100K or more55%
Parents of Color11%		Graduate school31%	Very liberal13%	No answer13%
		No answer1%		

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ABOUT US

For over 30 years, the Centers for Disease Control and Prevention have worked to eliminate health disparities and create healthy communities by funding Prevention Research Centers (PRCs) throughout the United States. The Healthy Youth Development – Prevention Research Center, housed at the University of Minnesota, Department of Pediatrics, is one of 26 academic centers whose main objective – as a PRC Network – is to link science to practice through collaborations with public health agencies and community-based organizations.

Suggested citation: Eisenberg, ME., Farris, J., Oliphant, J., Plowman, S., Pierson, K (2022). Minnesota Parents' Support for Sexuality Education Report. Minneapolis, MN: University of Minnesota Healthy Youth Development – Prevention Research Center. <https://doi.org/10.1016/j.jadohealth.2022.08.005>