



**Adolescent Abstinence and Sexuality Education...
How Do Parents Fit In?**

Michigan Parent Opinions on Sex Education

September, 2009

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Background and Purpose

The Michigan Department of Education (MDE) applied for and received a competitive supplemental grant for \$75,000 for 4.5 years. The focus of the Parent Engagement Grant (PEG) is on strengthening partnerships with parents to enhance their ability to be leaders in adoption of effective youth HIV/STI prevention policies and programs in schools and communities and supporting parents in educating their children about HIV, STIs, unintended pregnancy, and abstinence. Laurie Bechhofer the MDE HIV Consultant is liaison to the project and Barb Flis, Founder of *Parent Action for Healthy Kids* is the contracted Project Coordinator. Initial grant activities include: A statewide steering committee composed of over half parents; focus groups with parents; a statewide sex education parent survey; and webinars for local Sex Education Advisory Board (SEAB) Co-Chairs to enhance their ability to effectively lead their SEAB.

The purpose of this report is to provide a snapshot of opinions on sex education in schools from parents and guardians of school-age children, based upon the stateside survey conducted in September, 2009 and regional parent focus groups conducted in Spring, 2009. The report will be used by the PEG State Steering Committee to inform the development and enhancement of policies, programs, and practices to improve parent engagement in HIV, STIs, unintended pregnancy and abstinence of young people.

Methodology

Two data sources were used to generate results about parent's attitudes about sex education in Michigan schools. Each source is listed below with details about methodology.

2009 Parent Survey

- Telephone survey of 1,005 parents and guardians of school-age children.
- Conducted by Public Policy Polling (Raleigh, NC) in September 2009.
- Four questions about sex education in schools involved: (a) whether sex education should be taught in schools; (b) the grade when sex education should start; (c) what, if anything, should be taught (e.g., abstinence and/or contraception); and (d) whether their children had any, too little, too much, or the right amount of sex education in school.
- Margin of error for entire sample is $\pm 3.0\%$.

Characteristics of the Respondents (n = 1,005)

Characteristic	%	Characteristic	%	Characteristic	%	Characteristic	%
Age of Children		Ethnic Group		Religion		Political Ideology	
5 – 8 yrs	39%	Hispanic/Latino	4%	Protestant	35%	Very Conservative	23%
9 – 11 yrs	34%	White	76%	Catholic	23%	Somewhat Conserv.	29%
12 – 14 yrs	34%	African American	14%	Jewish	3%	Moderate	28%
15 – 18 yrs	45%	Asian American	2%	Other	33%	Somewhat Liberal	15%
Age		Native American	1%	Not religious	6%	Very Liberal	6%
18 – 29	8%	Mixed	1%	Relig.Serv.Attnd/Mnth		Region	
30 – 39	27%	Something else	1%	Never	30%	City of Detroit	7%
40 – 49	41%	Income Level		1x	13%	Detroit Suburbs	30%
50 – 59	19%	Under 20K	19%	2x	10%	Northern LP	14%
60 – 69	2%	21K – 40K	18%	3x	10%	Upper Peninsula	6%
70 or older	2%	41K – 60K	19%	4x	18%	Western MI	26%
Gender		61K – 80K	15%	5x or more	19%	Central MI	18%
Female	53%	81K – 100K	13%				
Male	47%	100K or more	17%				

2009 Parent Focus Groups

- Each conducted with 6 to 17 parents/guardians of children in middle school (Grade 6 to 8) from sites across Michigan:
 - Grand Rapids at Alger Middle School;
 - Detroit at Cooley School-based Health Clinic;
 - Kalamazoo at Girl Scouts of America;
 - Sault Ste. Marie at JKL Bahweting Anishnabe Public School Academy; and
 - Royal Oak at Royal Oak Middle School.
- A session for parents of children receiving special education services was held in Waterford at Oakland Schools ($n = 6$).
- Most identified themselves as a parent (96%), married (70%), Caucasian (56%) or African-American (26%), with at least some college experience or an undergraduate or graduate degree (87%) and a household income of over \$50K (53%).
- Parent responses from the focus groups are used in this report to provide qualitative information that helps to support or illustrate the quantitative survey results. A detailed report on the focus group results is available from Barb Flis of *Parent Action for Healthy Kids*. See Appendix A for focus group questions.

Results

Results from the parent surveys and focus groups are organized by the questions posed to parents in the 2009 Parent Survey.

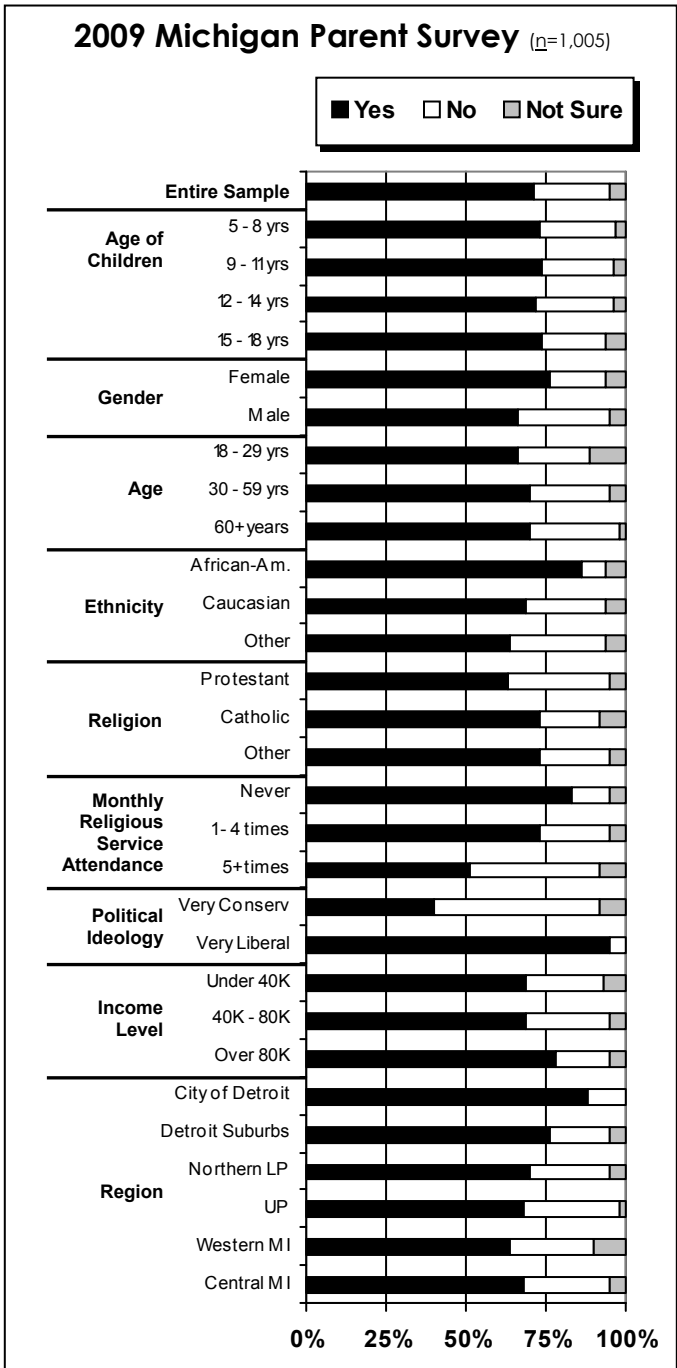
Do you think sex education, which is sometimes referred to as reproductive health, should be taught in school?

Results from the 2009 survey (see chart, right), show the following:

- 71% of Michigan parents felt that sex education should be taught in school.
- For virtually all subgroups (e.g., gender, age,), the majority of respondents felt that sex education should be taught in school.
- The highest percentage ($\geq 75\%$) of supporters of sex education in school was found among females, African-Americans, Detroiters, those who are very liberal, those who earn over \$80K, and those who do not attend religious services.
- The lowest percentage ($\leq 50\%$) of supporters for school-based sex education was found among those who are very conservative and attend religious services more than five times monthly.

A comprehensive statistical report on this question from the 2009 Parent Survey for the entire sample and various subgroups is provided in Appendix B.

Focus group results. Across all focus groups, except the Special Education focus group, parents felt strongly that parents should be the primary educator of their child's sexuality. Further conversation among the group led to the conclusion that while parents should be the primary educator, most parents are not talking to their child and so it is necessary that schools provide instruction. Each focus group had at least one parent who felt strongly that school provide instruction and in one case that sex education should be year long. No parent indicated that sex education should not be taught in school. Another parent would like to receive the same instruction as her child so that she would be better equipped to have a conversation and answer questions. In the case of the Special Education focus groups, parents definitely wanted their child to receive instruction from both home and school to insure their health, safety and well-being.

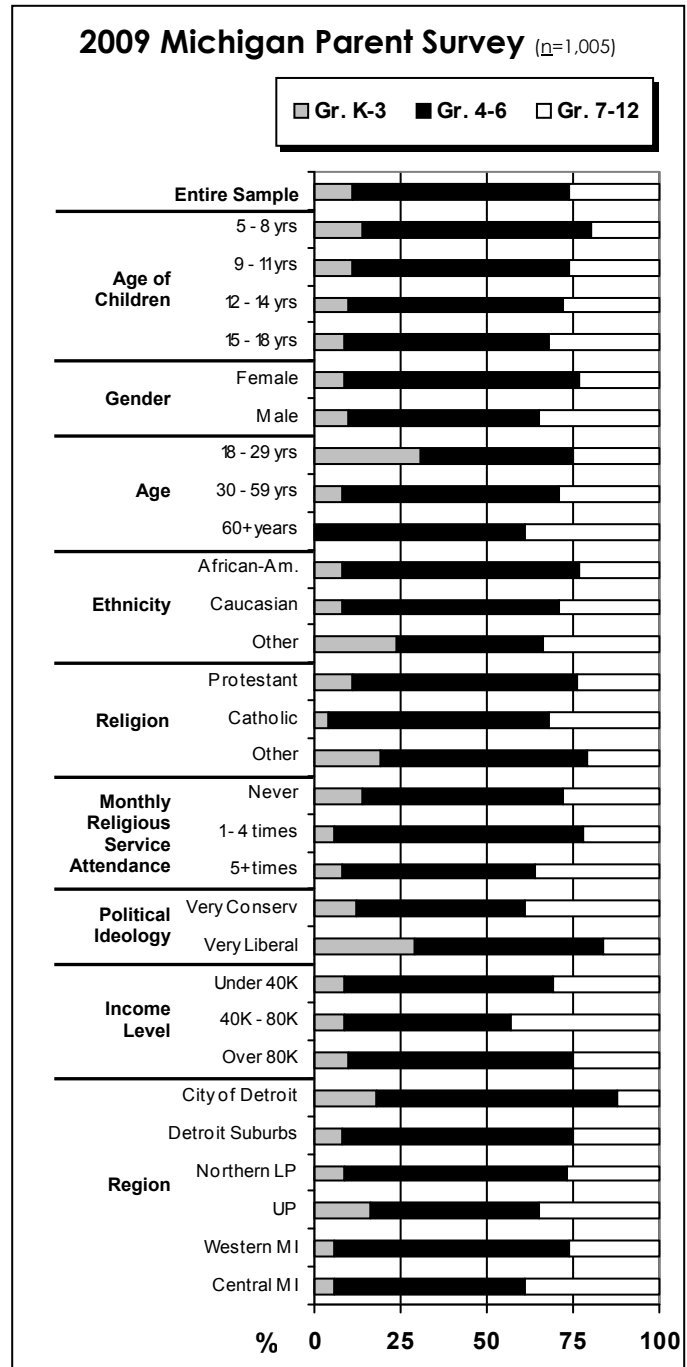


In what grade do you first think students should receive sex education, which is sometimes referred to as reproductive health?

The 2009 Parent Survey results (see chart, right) show that:

- Nearly 75% of parents feel that sex education should begin at the elementary level (K – 6).
- Between 60% and 88% of all respondents, regardless of subgroup, felt sex education in school should begin in the elementary grades.
- For most subgroups, parents felt that sex education should begin in grades 4, 5 or 6.
- The highest percentage ($\geq 75\%$) of support for elementary-level sex education was from the following subgroups: those with children age 5 – 8, females, African Americans, liberals (very), Protestants or those from “other” religions (e.g., Jewish), Detroiters, and those who attend religious services 1 to 4 times a month.
- A substantial minority (about 40%) in several subgroups felt that sex education should commence in middle or high school grades (7-12), including those who are age 60 or older, very conservative, earn \$40K-80K, or live in the central part of the state.

A comprehensive statistical report on this question from the 2009 Parent Survey for the entire sample and various subgroups is provided in Appendix B.



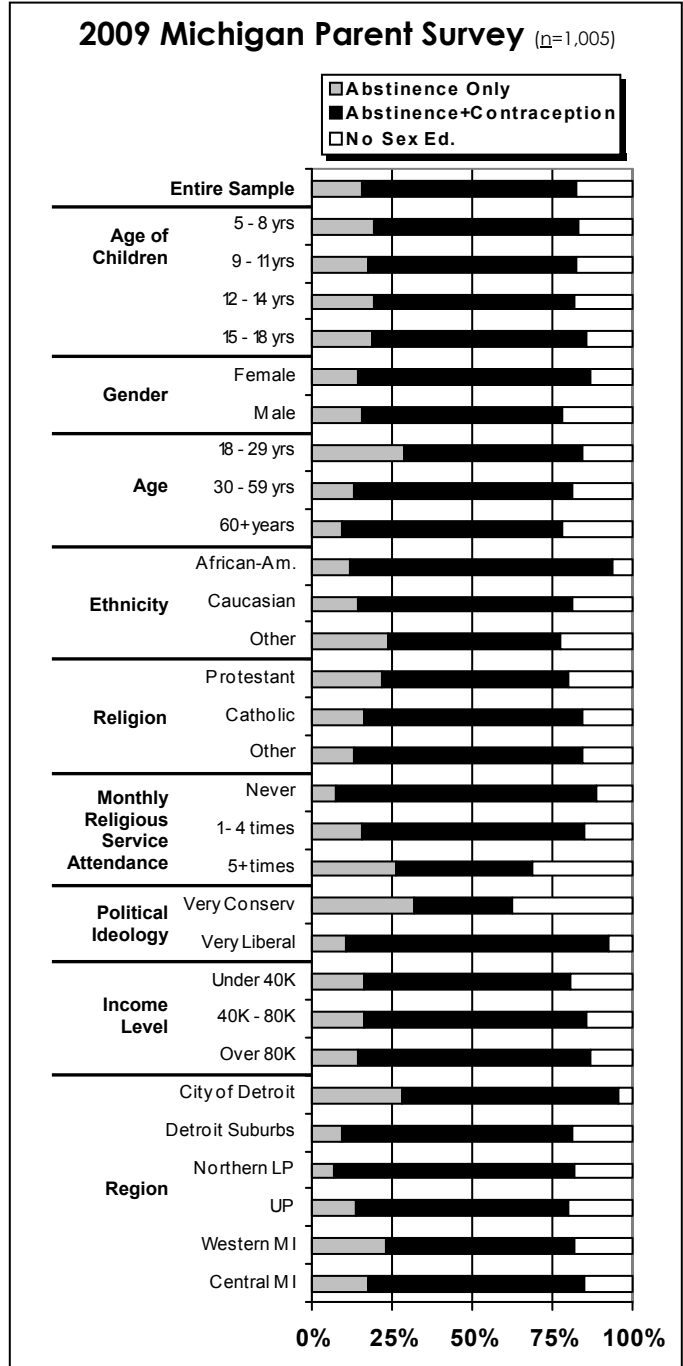
How should sex education be taught in school?

The following are highlights from the 2009 Parent Survey results (see chart, right):

- Most (65%) preferred that students should be taught about abstinence and contraception. These results were consistent across virtually all subgroups.
- Less than 50% in two subgroups felt that students should be taught about abstinence and contraception: those who are very conservative or attend religious services five or more times per month.
- A substantial minority (25% - 30%) of parents from several subgroups felt that students should be taught about abstinence only: young parents (18 – 29 yrs), those who are very conservative, those who attend religious services five or more times per month, and Detroiters. Among those subgroups, additional analysis revealed that among very conservative residents, support for abstinence-only sex education was highest (40%) among City of Detroit residents, compared to all other regions of the state (which ranged from 22% to 38%).

A comprehensive statistical report on this question from the 2009 Parent Survey for the entire sample and various subgroups is provided in Appendix B.

Focus group results. No one in any of the focus groups expressed the opinion that abstinence only should be the method of instruction. Also important to parents was instruction on communication and healthy relationships. They were very concerned about the media and societal influence on their children and that it was a full-time job to stay on top of where they were, who they were with and to keep them busy and out of trouble. Most expressed that because of so many outside influences, it is good to start early and have continuous instruction. The parents in the Special Education focus group felt strongly about a comprehensive approach and were adamant of the equal importance that it be delivered in a way that was developmentally appropriate for their child.



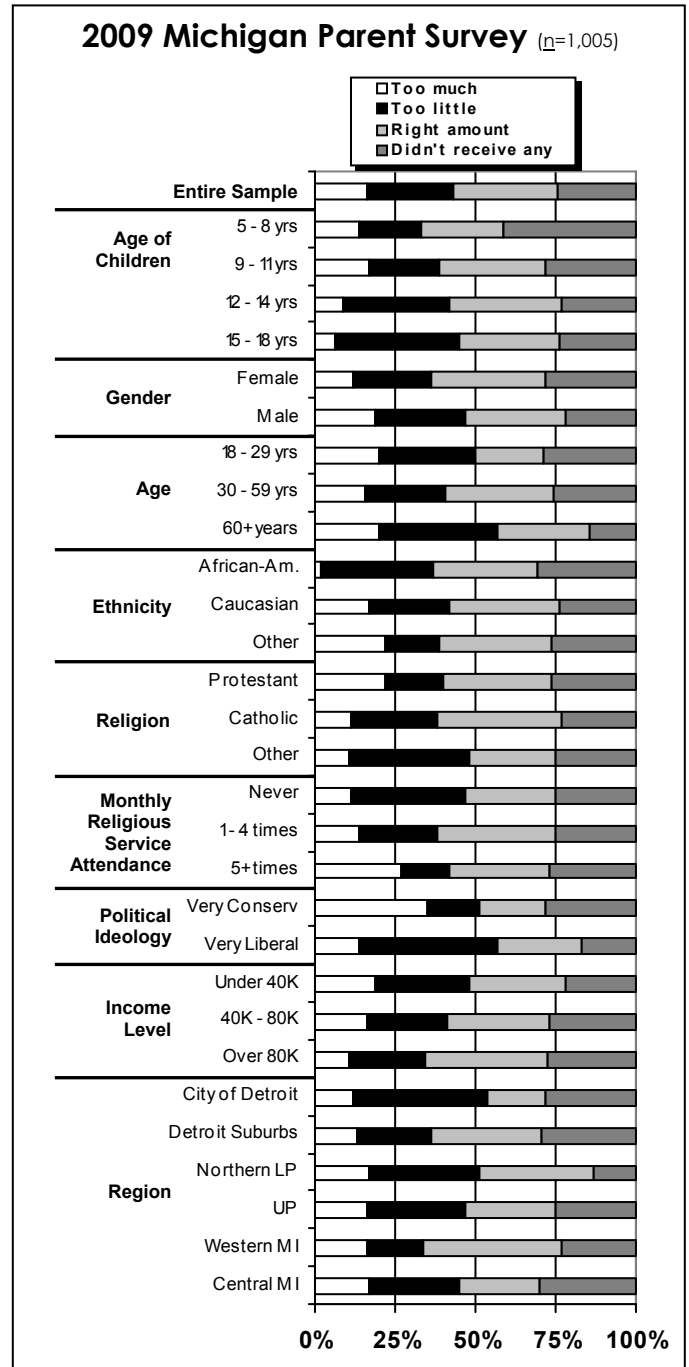
Thinking about the sex education your children received in school, do you think it was too much, too little, the right amount, or did they not receive any sex education in school?

Highlights of the **2009 Parent Survey results** (see chart, right) included:

- Most (between 60% - 80%) felt that their children received either too little or the right amount of sex education in school and nearly 25% reported that their children did not receive any sex education.
- For most subgroups, the most variation was attributable to whether their children received too much sex education. The fewest ($\leq 10\%$) who felt this way were parents of teenagers, females, African Americans, Catholics and those from "other" faiths (e.g., Jewish), or never attend religious services. The most ($\geq 25\%$) who felt there was too much school-based sex education were very conservative or attended religious services five or more times per month

A comprehensive statistical report on this question from the 2009 Parent Survey for the entire sample and various subgroups is provided in Appendix B.

Focus group results. Parents in all focus groups, except the Special Education focus group, were uncertain as to the amount of sex education instruction their child received. They were all aware that they had to be notified of instruction but were not well versed on the length or frequency of instruction. Conversely, the special education parents were very clear on the amount of instruction their children were receiving and across the board felt it was insufficient in length, frequency and method. These parents expressed concern that the teacher, in many cases, felt that the student may as well not participate in the instruction because it was not developmentally appropriate. This was extremely discouraging, frustrating and frightening to the special education parents.



Limitations and Conclusions

Limitations

- Phone surveys limit sample to those who have land lines, which biases the results toward older respondents.
- Survey results disaggregated by subgroups with small sample sizes (e.g., those age 60 or older) may not be reliable.
- Focus groups participants were limited to parents of middle-school-age children and were conducted for exploratory purposes, so they are not necessarily representative of all parents/guardians in Michigan.
- Special Education focus group represented the "most involved" parents of special education students and were not necessarily representative of parents of special education students as a whole.

Conclusions

The large majority of parents feel:

- **Sex education should be taught in schools.** Over 70% of parents felt that sex education should be taught in schools. These results did not vary by the parents' gender, income level, political ideology, or age of their children. Some differences were observed by parent's age, geographical region and religion, but in virtually all subgroups there was a majority who felt sex education should be taught in schools. Focus groups results revealed parents are the primary educator but because parents are not talking to their kids, schools should provide age appropriate instruction. The Special Education focus group indicated both should work together to maximize instruction for special education students.
- **Sex education should begin in elementary grades.** Over 70% of parents felt that sex education should start sometime in grade K – 6, with most reporting it should start in upper elementary grades (grade 4 – 6). These results did not vary by the parents' gender, income level, political ideology, or age of their children. Some differences were observed by parent's age, geographical region and religion, but in all subgroups there was a majority who felt sex education should begin in grade 4 – 6. In focus groups, most parents expressed that because of so many outside influences, it is good to start early and have continuous instruction delivered at an age-appropriate level.
- **Both abstinence and contraception should be taught in school.** Focus group parents indicated abstinence as a key message they wanted for their adolescent. They also wanted their adolescents to know about STIs and HIV, and ways to prevent and protect as well as to understand the consequences.
- **There is either too little or just the right amount of sex education for their children.** Focus group parents were uncertain as to the amount of sex education instruction their child received. Special education parents were very clear on the amount of instruction their child was receiving and across the board felt it was insufficient in length, frequency and method.
- **They (parents) are not the barrier to effective instruction.** The sparse knowledge of focus group parents had about the length, frequency and method of instruction suggests that schools should look at ways to build authentic partnerships with parents for effective classroom instruction. In Michigan, the required 50% parent membership on Sex Education Advisory Boards is a great opportunity for schools to educate, inform and create parent leaders.

Appendix A

Focus Group Questions

QUESTION 1

What kinds of **situations do parents like you face** when it comes to dealing with your adolescent, their relationships and decisions about having sex?

- By xxx, do you mean...
- We have heard from several people. Some people have been quiet. What are your thoughts?

QUESTION 2

What do you **wish you knew more about** so you could improve your communication with your adolescent about these issues?

- By xxx, do you mean...
- We have heard from several people. Some people have been quiet. What are your thoughts?

QUESTION 3

There are many **ways that parents get information** and help on these issues. (*Do nothing, read something, school/community organization/church workshop, talking with a friend or relative, internet, e-mail, television*).

How do you get information and help?

- By xxx, do you mean...
- We have heard from several people. Some people have been quiet. What are your thoughts?
- What have you found **works best** for you?
 - How is this helpful?
- What **doesn't work** for you?
 - Why is this not helpful?

QUESTION 4

What do you see as the **role of schools** when it comes to HIV/sex education for your adolescent?

- By xxx, do you mean...
- We have heard from several people. Some people have been quiet. What are your thoughts?

QUESTION 5

What do you think are **meaningful ways to involve parents** in school-based HIV/sex education?

- By xxx, do you mean...
- We have heard from several people. Some people have been quiet. What are your thoughts?

Appendix B

2009 Parent Survey Results: Item-Level and Selected Crosstabulations