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DEFINING THE PROBLEM OF CONSENT EDUCATION IN HIGH SCHOOL ACROSS THE UNITED STATES

By

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Sexual education is generally thought of as something that is mentioned once in middle school, and possibly addressed in more depth in high school. Many recall a “scared straight” approach, involving an STI and STD slideshow, and countless statistics about the ineffectiveness of birth control. Some picture a more liberal approach, involving things like learning to put condoms on bananas, or learning how to obtain birth control and STD testing at Planned Parenthood. However, when many people think about their high school and middle school sex education, they do not necessarily recall explicit consent training. Why is that? Is it because people feel that if they teach students how to give consent, that they will have more sex than if they do not teach it? Is it because they do not want to scare young adults with the reality of rape culture? If sex is something that we, as human beings need, and curricula are willing to address disease prevention and unwanted pregnancy, then there is not a good reason to neglect consent. Without consent, sex is not “non-consensual.” It is rape.

This idea is not a popular one. It places criminal blame on people who are in our communities: people whom we know. Yet, the only way to keep our young men and women safe, is to explicitly teach them what is legal, and what is not. With the recent media coverage of sexual assault on college campuses, many universities and higher education institutions have developed ways to teach their post-secondary students about legal consent. For instance, at the University of Montana, there is an online module that must be completed via a student account, which places a hold on registration until the student completes it. It is required that every student on campus takes the training. This model is problematic, in that it only targets college
students, it requires little accountability, and it is forgettable. It does not leave a lasting impact on many.

The solution is not necessarily in the content matter of these interventions. It lies in the timing, and the placement. Programs that work to educate people about consent should happen before the age of consent as a preventative measure to sexual abuse. To address this issue, it is necessary to focus on high school education, and curricula that targets young adults between ages 14 and 18.

Throughout the United States, the quality of sexual education in high schools is extremely variable from state to state, school to school, and classroom to classroom. Each state determines its own requirements for middle school and high school sexual education programs. No two states seem to have the same set of standards, and emphasis shifts significantly toward abstinence in the southern states and most Midwestern states (Guttmacher Institute, 2012). As education programs attempt to cover broader information that is more inclusive of general experiences, the curriculum is failing to address the specific and very pertinent issue of sexual consent. In 1999, 68.7% percent of high school sex education teachers across the US addressed the issue of consent (Landry, Darroch, Singh & Higgins, 2003). As of 2012, only 19 of the 42 states (and Washington, D.C.) that were surveyed for sex education requirements addressed a life skills topic referred to as “avoiding coercion.” The term also does not specifically imply education about consent and rights as a sexual partner (Guttmacher Institute, 2012). The apparent drop from 68.7% to 45% could be partially related to differences in data collection methods, or analysis differences. However, this drop may also indicate a breakdown
in organization and communication between federal government, state government, and school districts.

According to a 2011 study on parent opinions of SRE (Sex Related Education) in Mississippi, a surprising 92.1% of parents surveyed were in favor of age-appropriate SRE (McKee, Ragsdale, & Southward, 2014). The survey included several items involving birth control methods, access to birth control, and conversation with parents and partners about sexual activity, STIs, and birth control. Consent was not mentioned once in this study, while it was stated that Mississippi already had AOE, also known as abstinence-plus curricula, as a state requirement for schools. Clearly, parent opposition, even in politically and socially conservative states, was not a factor in inadequate sexual education.

Lawrence Public School District of Kansas recently became the first school district in the state to adopt federally suggested curriculum, as opposed to the vague curriculum provided by the state standards. The new curriculum covers sexual consent in seemingly better detail, as compared to many programs across the country. The report that announced this update to past standards stated that “high school students learned to define sexual consent and factors such as alcohol use that can affect one’s ability to give or perceive consent,” (DeNisco, 2014).

Unfortunately, programs like this are generally rare, and are certainly uncommon at a state level, as opposed to the level of a school district as in this case. According to the 2011 Guttmacher study, 38 of the 43 surveyed states, including Washington D.C. considered abstinence to be a stressed topic, putting more emphasis on this than on most of the other topics addressed. The type of specific
response to the problem that we see happening in Lawrence school district in Kansas is a step in the right direction. Programs like these can help to bridge the gap between the abstinence-only curriculum and education improving student knowledge of legal consent and healthy sexual encounters.

The development of high school consent training programs should be inclusive in nature, and relevant to young adults. The GLI capstone group led by David Beck developed and produced a curriculum via a training manual to address this issue. The purpose of the training is to supplement the gap in consent education in high schools. It focuses on consent at all stages, conscious consent, and affirmative consent, meaning verbal and explicit consent throughout intimate activities. The program is designed to be inclusive of all gender and sexual identities, and takes into account racial, cultural, and mental diversity as well. Gender roles are examined in the modular training program, and media clips are critiqued for their consensual content, or lack-there-of. Students being trained by this model will have an interactive, provocative experience, allowing them to form a foundational working knowledge of sexual consent.

The most important thing is that the program is relevant and memorable, because those are the factors that will determine whether or not students retain the information in a way that gives them access to that knowledge when they need it. All people have the right to safe sex, which requires consent. It cannot be an after-thought, and it cannot be a reaction to abuse. Consent education is about abuse prevention and building a foundation for healthier relationships and practices.
Bibliography


