



Highlights of GAO-08-664T, a testimony before the Committee on Oversight and Government Reform, House of Representatives

## Why GAO Did This Study

Among the efforts of the Department of Health and Human Services (HHS) to reduce the incidence of sexually transmitted diseases and unintended pregnancies, the agency provides funding to states and organizations that offer abstinence-until-marriage education.

GAO was asked to testify on the oversight of federally funded abstinence-until-marriage education programs. This testimony is primarily based on *Abstinence Education: Efforts to Assess the Accuracy and Effectiveness of Federally Funded Programs*, GAO-07-87 (Oct. 3, 2006). In this testimony, GAO discusses efforts by (1) HHS and states to assess the scientific accuracy of materials used in abstinence-until-marriage education programs and (2) HHS, states, and researchers to assess the effectiveness of abstinence-until-marriage education programs. GAO also discusses a Public Health Service Act requirement regarding medically accurate information about condom effectiveness.

GAO focused on the three main federally funded abstinence-until-marriage programs and reviewed documents and interviewed HHS officials in the Administration for Children and Families (ACF) and the Office of Population Affairs (OPA). To update certain information, GAO contacted officials from ACF and OPA.

To view the full product, including the scope and methodology, click on [GAO-08-664T](#). For more information, contact Marcia Crosse at (202) 512-7114 or [crossem@gao.gov](mailto:crossem@gao.gov).

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## ABSTINENCE EDUCATION

### Assessing the Accuracy and Effectiveness of Federally Funded Programs

#### What GAO Found

Efforts by HHS and states to assess the scientific accuracy of materials used in abstinence-until-marriage education programs have been limited. As of October 2006, HHS's ACF—which awards grants under two programs that account for the largest portion of federal spending on abstinence education—did not review its grantees' education materials for scientific accuracy, nor did it require grantees of either program to do so. Not all states that receive funding from ACF had chosen to review their program materials for scientific accuracy. OPA reviewed the scientific accuracy of grantees' proposed education materials, and any inaccuracies found had to be corrected before those materials could be used. The extent to which federally funded abstinence-until-marriage education materials are inaccurate was not known, but OPA and some states reported finding inaccuracies. GAO recommended that the Secretary of HHS develop procedures to help assure the accuracy of abstinence-until-marriage education materials. An ACF official reported that ACF is currently implementing a process to review the accuracy of Community-based grantees' curricula and has required those grantees to sign assurances that the materials they propose using are accurate. The official also reported that, in the future, state grantees will have to provide ACF with descriptions of their strategies for reviewing the accuracy of their programs.

As of August 2006, HHS, states, and researchers had made a variety of efforts to assess the effectiveness of abstinence-until-marriage education programs, but a number of factors limit the conclusions that can be drawn about the programs' effectiveness. ACF and OPA have required their grantees to report on various outcomes used to measure program effectiveness. To assess the effectiveness of its grantees' programs, ACF has analyzed national data on adolescent birth rates and the proportion of adolescents who report having had sexual intercourse. Additionally, 6 of the 10 states in GAO's review worked with third-party evaluators to assess the effectiveness of abstinence-until-marriage programs in their states. However, the conclusions that can be drawn are limited because most of the efforts to evaluate program effectiveness have not met certain minimum criteria that experts have concluded are necessary for such assessments to be scientifically valid. Additionally, the results of some efforts that do meet such criteria have varied.

While conducting work for its October 2006 report, GAO identified a legal matter that required the attention of HHS. Section 317P(c)(2) of the Public Health Service Act requires certain educational materials to contain medically accurate information about condom effectiveness. GAO concluded that this requirement would apply to abstinence education materials prepared and used by federal grant recipients, depending on their substantive content, and recommended that HHS adopt measures to ensure that, where applicable, abstinence education materials comply with this requirement. The fiscal year 2007 program announcement for the Community-based Program provides information about the applicability of this requirement, and future State and Community-based Program announcements are to include this information.