

Running Head: The School Principal and Sex Education

Disengagement, Conflict, and Mistrust:  
The School Principal and Sex Education

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### Abstract

This qualitative research pilot study investigates the engagement, attitudes, values, beliefs and sources of knowledge of public middle and high school principals regarding sex and Human Immunodeficiency Virus/Acquired Immunodeficiency Disease Syndrome (HIV/AIDS) education. The researcher conducted in-depth interviews with one female middle school principal, two male high school principals, and two female sex and HIV/AIDS instructors in two small town school districts, took detailed field-notes on observations of two state sponsored HIV training sessions, and analyzed documents from those training sessions and the Office of the Superintendent of Public Instruction (OSPI). Findings included the presence of disengagement, subtle conflict, and mistrust due to secrecy and deception in the implementation of instruction. The researcher concludes that principal disengagement may be due in part to the inefficacy of sex education, this area of inquiry lacks a much-needed theoretical framework, and that the findings warrant further research.

## Disengagement, Conflict, and Mistrust:

## The School Principal and Sex Education

Distributing condoms in public high schools encourages premarital sex! Teens need access to contraceptives to avoid pregnancy and sexually transmitted diseases! These two statements represent two sides of the raging debate on sex and Human Immunodeficiency Virus/Acquired Immunodeficiency Disease Syndrome (HIV/AIDS) education in the United States. The phrase “abstinence only sex education” defines the former group while “comprehensive sex education” defines the latter (Besharov & Gardiner, 1997). These two groups form the largest camps in the debate, but there are others. For example, the phrase “abstinence-plus” has been adopted by those who want to teach about both abstinence and contraception as opposed to those who want to teach abstinence only until some specified time such as after high school or marriage (Besharov & Gardiner, 1997). Another twist on the abstinence theme is offered by those who promote “chastity” or “virginity” pledges in programs like “True Love Can Wait” (Bearman & Brückner, 2001).

Prevention of teenage pregnancy and sexually transmitted diseases, including HIV/AIDS, stands as a national priority as evidenced by the support offered by the federal government through the Adolescent Family Life Act (1981) and section 510 of the U.S. Social Security Act (1996), both of which provide millions of dollars for sex education programs, most recently to support abstinence only education at the rate of \$87.5 million per year (Sonfield & Gold, 2001). The strong federal support for abstinence only education has sparked the recent flurry of debate between the comprehensive sex education camp and the abstinence only camp.

Researchers see school administrators as key in whether the cause of sex education is advanced or stymied (Avery & Kirkendall, 1955; Balliet, 1927; Brantlinger, 1991; Buston &

Wight, 2001; Dager & Harper, 1959; Eggert, 1954; Hale & Philliber, 1978; Harper & Harper, 1957; Huerta, 1996; Johnson & Schutt, 1966; McIntire, 1969; Reis & Seidl, 1989). Surprisingly, then, few researchers have actually talked to school administrators to ascertain their views on the subject of sex and HIV/AIDS education. Many researchers have blamed school administrators for the slow progress of sex education in public schools (Avery & Kirkendall, 1955; Brantlinger, 1991; Dager & Harper, 1959; Eggert, 1954; Hale & Philliber, 1978; Harper & Harper, 1957; Johnson & Schutt, 1966; McIntire, 1969). Years ago, some of these researchers conducted surveys of administrators to better understand their reticence regarding sex education (Johnson & Schutt, 1966; McIntire, 1969; Reis & Seidl, 1989). But problems with implementation continued to frustrate sex education reformers and they continued to blame administrators (Brantlinger, 1991; Buston & Wight, 2001; Huerta, 1996). During the past three decades, little quality information has been available regarding the attitudes and beliefs of school administrators about sex and HIV/AIDS education. Researchers, then, must rely on shaky findings, most of them nearly a half-century old and older, to begin to understand school administrators on this subject. While some qualitative research has been done on the topic of sex and HIV/AIDS education and has included findings regarding school administrators (Brantlinger, 1991; Buston & Wight, 2001; Huerta, 1996), few of the researchers have actually talked to school administrators themselves, and those who have talked to them have done so in studying other aspects of sex or HIV/AIDS education. The research problem taken up by the current study, then, is that many findings and conclusions have been drawn about school administrators on the topic of sex and HIV/AIDS education, but few of these findings are based upon data gathered directly from these educational leaders.

In order to address the research problem, the purpose of this study is to explore the involvement, personal attitudes, beliefs, values, and sources of knowledge regarding sex and HIV/AIDS education of public school principals. The purpose will be addressed through a pilot study using qualitative techniques to determine whether further study is warranted and, if so, how that deeper study might be conducted. In keeping with this limited scope, this study seeks to answer the following research questions: (1) What involvement do principals report they have in sex and HIV/AIDS education in two school districts? (2) What principal involvement do sex and HIV/AIDS teachers report in two school districts? (3) What personal attitudes, beliefs, and values do principals report regarding sex and HIV/AIDS education in two school districts? (4) From what sources do principals report that they draw their knowledge about sex and HIV/AIDS education? and (5) What training information is provided for principals regarding HIV/AIDS education by the state and how many principals take the training?

#### Theoretical Perspective?

Most studies on the topic of sex and HIV/AIDS education operate without a clear theoretical perspective. Most of these studies seem to assume one. Besharov and Gardiner (1997) offer a clear statement of the most predominant theoretical perspective in the literature: “The theory behind sex education is that inadequate knowledge can lead to unsafe sexual practices” (p. 328). This assumption, rooted in the instrumentalist model of sex education (Moran, 2000), is the most widely assumed theory in the literature. The debate rages because of differing beliefs about what constitutes “knowledge” or what “knowledge” is simply inappropriate for K-12 schools to disseminate. The most common theory behind one camp is that the only possible consistent message guaranteeing the health and safety of our youth is that sex must be monogamous and wait until marriage (Moran, 2000). The other major camp argues

that such a stand is impractical given the statistics about teenage sexual activity (Moran, 2000). They argue that “knowledge” includes comprehensive instruction on contraception, masturbation, homosexual sex, and sexually transmitted diseases (Harper & Harper, 1957; Johnson & Schutt, 1966). Both camps assume what Moran (2000) calls the “instrumentalist model” of sex education, a model which promises, but fails to deliver, behavioral and social changes (p. 219).

While theories and assumptions regarding sex and HIV/AIDS education influence administrators directly or indirectly, the study at hand seeks not a theory of sex education, but one explaining the principal’s role in administering such educational programs. The existing literature contains no clear statement of such a theory. However, Hottois and Milner (1975) do advance a very clear and provocative theory about how superintendents handle sex education policy formation. While they root their intriguing theory solidly in politico-moral conflict theory and social control theory, as applied to decision making by superintendents, their theory does not directly apply to explaining principals. With further research, their theory might be adapted to form a solid theoretical basis for interpreting the data gathered here. But that research must wait for another day.

Other researchers seem to assume theories, hint at them, or take stabs at preliminary theories. For example, Dager and Harper (1959) take a stab at theory in concluding their report. They asked principals about difficulties in teaching or offering family life education courses that specifically included sex education. Several reasons were listed, but the large numbers of principals, as many as 36%, who chose to leave these questions blank takes the researchers aback. Based upon the difficulties listed as well as the unknown difficulties lost in the unanswered questions, the authors assert, “Perhaps . . . these objections . . . may not be as

important as are the basic values and attitudes of administrators to family life materials in general” (Dager & Harper, 1959, p. 388). Johnson and Schutt (1966) assumed that administrators resisted sex education but practical necessity forced them to deal with it. They commented, “sex is becoming a subject matter whether those in the educational establishment want it or not” (p. 65). After a carefully orchestrated public relations campaign an Iowa principal confirmed this idea saying, “We couldn’t [keep quiet about sex education] in Washtenaw County. Between the series in the *Ann Arbor News* and the Health Department conference, we had to face the fact that we had to take a stand” (Chethik, 1981, p. 269). Others hint at theories. For example, some believe that male administrators’ professional ambitions, which are best served by avoiding controversy, dispose them to neglect the good of children by denying them quality sex education (Brantlinger, 1991). Such theories have roots in the “asymmetry in power relationships between administrator and teacher” (Brantlinger, 1991, p. 28) and remind one of critical theory. Others make a point of the influence administrators have on the amount of time spent on sex education and how teachers are assigned without really advancing any theory explaining differences between administrators (Buston & Wight, 2001). Still others seem to assume that administrators simply hamper the process of quality sex education for various reasons (Avery & Kirkendall, 1955; Balliet, 1927; Clawar, 1977; Eggert, 1954; Harper & Harper, 1957; Huerta, 1996). The current study seeks to understand the research questions in the absence of any clear theory within which to frame them.

### Methods

This study relied on the qualitative methods of in-depth interviewing, observation, and document analysis. Sites included the Washington State Office of the Superintendent of Public Instruction (OSPI), three schools in two rural public school districts in Washington, and a

training site for the state HIV/AIDS curriculum in a neighboring county. Participants included an OSPI assistant, principals, sex and HIV/AIDS instructors, and state appointed trainers as well as the participants in their classes.

### *Site Selection*

Two typical sites were selected for this study, both in the same rural county in Washington State. Neither the presence of sex or HIV/AIDS instruction in the curriculum nor any particular approach to these subjects played a role in the site selections. However, in Washington State, all public school districts must offer AIDS education in grades five through 12 (The AIDS Omnibus Act, 1988) and “methods to prevent exposure to and transmission of sexually transmitted diseases” (Common School Curriculum, 1988). The possibility of certain districts violating the law exists, but such a situation is unlikely. Consequently, at least an AIDS and sexually transmitted disease (STD) education program in any random Washington public school district is likely. Both districts selected did have both sex and HIV/AIDS instruction. Had these districts lacked such programs, interviews would still have been sought to answer the research questions, which have principals, not programs, as their subjects.

Only sites in districts serving kindergarten through 12<sup>th</sup> grade students were considered. Sites also had to be within a reasonable distance of the researcher in order to complete this preliminary study within a reasonable time frame of four to six months. It was also important to select schools in more than one district in order to help preserve the anonymity of the participants as well as to counter any predispositions or biases that might be present in any particular district. One district, serving approximately 1,200 students, includes three separate school buildings: a K-5 elementary, a 6-8 middle school, and a 9-12 high school. The other



district, serving about 600 students, has one campus consisting of separate buildings for a K-8 school and a 9-12 high school.

The training site was selected in an adjacent county because of its convenient location, the fact that the training sessions given over a two day period were offered within the time parameters required, and because such training sessions offer the only state endorsed education available to administrators and instructors of sex or HIV/AIDS curriculum. The training was open to anyone wishing to attend. The author registered by phone and indicated his intention to observe the training as an educational researcher. This announcement was also made to the instructors and participants at the beginning of each of two classes.

### *Participant Selection*

Participants included an assistant at OSPI, principals, sex and HIV/AIDS instructors, and participants in the training sessions observed. An assistant at OSPI, chosen for the ability to offer information about attendance at training programs, was interviewed by phone to gather information about principal participation in formal HIV/AIDS training sessions conducted through OSPI throughout the state. Within the two school district sites, the principals of three schools were selected. Two were male high school principals while one was a female middle school principal. They were all very experienced with a total of 33 years of experience as principals between them. For purposes of this study, the elementary principals were not considered because of the relatively light treatment of sex and HIV/AIDS education in the lower grades. All three principals readily agreed to participate in the study. Two sex and HIV/AIDS instructors were also included in the study. In one district the same person taught sex and HIV/AIDS education to all students in each building and agreed to participate but was a bit

guarded in the interview. The other district assigned teaching duties by grade level to various teachers. One high school level teacher reluctantly agreed to participate in the study.

Those observed in the training sessions were chosen by virtue of their having taught, been invited to speak, or registered for the classes. Thirteen classroom instructors including regular teachers, nurses, and counselors, and four trainers participated in the two training sessions.

### *Procedures for Data Collection*

Based upon the research questions, interview questions were drafted separately for the principals and the sex and HIV/AIDS instructors and are included in Appendix A. The questions were used only as a guideline during the interviews. While all questions designed for a particular participant were asked, other unplanned questions were also asked in the interest of clarifying, probing for richer data, or following up on interesting responses. All interviews were audiotape recorded and transcribed verbatim.

Detailed field notes record nine hours of training sessions. The first training, an update on sexually transmitted diseases (STDs) and HIV/AIDS was held for three hours in the evening. The second training, instruction on use of the official state curriculum, was held for six hours during the day.

In addition to observing classes for administrators and sex and HIV/AIDS instructors, documents detailing registration for these classes statewide between 1997 and 2002 were obtained from the state Superintendent of Public Instruction's office. Many documents were distributed during the two training sessions, and data in these documents were also included in this study. This data was included to help answer research questions regarding how principals are informed or educated about sex and HIV/AIDS curriculum and instruction. The training

documents also helped to compare the views of principals with the views promoted for instructors through formal education.

### *Procedures for Data Analysis*

Following Maxwell's (1996) synthesis of the views of many researchers, transcripts, field notes, and documents were read through completely with notes recorded and an analytical memo written to describe initial data analysis. The data lent itself well to "issue-focused analysis" (Weiss, 1994, pp. 153-154), so after the initial read-through themes and sub-themes were assigned codes which were applied to the transcripts and field-notes during a line-by-line analysis. During this analysis, coding categories were dropped, added, and rearranged in the initial schema as dictated by the analysis. Using this revised coding system the transcripts and field-notes were subjected to another line-by-line analysis with application of the final coding system. This analysis resulted in three major themes and sub-themes, which are reported as findings below.

The documents analyzed included information from OSPI that detailed attendance records at all state sponsored HIV/AIDS training sessions throughout Washington between 1997 and 2002. No records existed for sessions prior to 1997. The total number of registrations for this period in all categories, along with the total number of registrations from administrators, was computed from numbers given in the document. Using these two figures, the percentage of administrators receiving training could be easily calculated.

Other documents analyzed included those available on tables and handed out during the training sessions observed. These documents included copies of PowerPoint presentations, pamphlets, copies of research, business cards, copies of the covers of videos, and notes on items

deemed important by the presenters. These documents received the same pattern of analysis as the interview and observational data. The key difference was that no new coding categories were developed from these documents because they were used only in relation to the analysis of observations and interviews. The same codes developed from these transcripts and field-notes were applied to the documents.

### *Validity Considerations*

Following Maxwell (1996), this section addresses threats to validity in three categories: description, interpretation, and theory. However, since no theoretical framework could be applied to this study, threats to the validity of theory are not considered. First, in order to ensure the validity of describing what was actually said in interviews, what actually happened during observations, and what was actually contained in documents analyzed, careful steps were followed. All interviews were audiotape recorded and transcribed verbatim. Detailed field-notes were taken continuously during observations. Every document available during observations was collected and the complete documents available from OSPI were obtained. Consequently, the data includes the fullest possible description of the phenomena studied.

Care was also taken before, during, and after data collection to ensure the validity of interpretations. In order to eliminate bias from the questions, a matrix detailing the five research questions, sampling procedures, data collection methods, kinds of analyses, and interview questions was constructed. All elements of the matrix were unified consistent with the research purpose and questions as well as to eliminate any potential bias in the interview questions themselves. The same care was taken during data collection. Interviews were detailed and rich, lasting 45 to 60 minutes each. Observation was extensive lasting nine hours. Analysis began with data collection and was constant during and beyond data collection. Transcripts, field-

notes, and documents were read, coded, re-read, and re-coded to ensure consistency and validity of analysis.

In order to eliminate validity problems that might result from exclusive reliance on self-reporting by principals, data was collected from a variety of sources. Interviews were conducted with both principals and instructors so that both points of view could be considered in interpreting the data. Documents regarding participation in state sponsored HIV training sessions were obtained to compare what principals reported regarding formal training with actual records. The training documents also helped to ensure a complete picture. And finally, any patterns or conclusions that began to emerge from the data were compared with the literature reviewed to see if other researchers had discovered the same patterns. The results of these comparisons appear throughout this report.

#### *Confidentiality and Ethics*

The confidentiality of each participant in the interviewing process was assured. This study met the standards of the Institutional Review Board at Washington State University (WSU) and was granted approval by that body. Each participant in the in-depth interviews signed an informed consent form. A copy of this form is included in Appendix B.

The training sessions for administrators and instructors were open to all who wished to register. The author informed officials organizing the training at the state level that he would be observing the sessions as part of a research project through WSU. He also informed the instructors and all participants. Confidentiality of the proceedings is not necessary because both participation and content are matters of public record. Nevertheless, no effort is made to disclose the identities of the instructors or participants. All documents used in this study are also on the public record.

## Findings

This report organizes the findings into three major themes: *Disengagement*, *Principals in Conflict*, and *Mistrust*. Principals see themselves, as do their instructors, as being far less engaged with the curricular area of sex and HIV/AIDS than they do with other more traditional curricula. Subtle points of conflict abound more in the day to day implementation of sex and HIV/AIDS education than do major conflicts (e.g., Hale & Philliber, 1978). Principals are in subtle conflict with instructors, curricular demands, the “politically correct,” role definitions, the “abstinence only until marriage” message, the efficacy of sex education, and within themselves. And finally, much of the conflict principals experience can be understood in light of the mistrust engendered by secrecy and deception on the part of instructors and their trainers, a theme repeated throughout the history of sex education in the public schools (Balliet, 1927; Harper & Harper, 1957; Moran, 2000).

### *Disengagement*

Principals believe they have a very different role in terms of sex and HIV/AIDS curriculum and their instructors agree. The difference could be summed up by the word “disengagement.” They are disengaged from the sex and HIV/AIDS curriculum, observation, supervision, and evaluation of sex and HIV/AIDS classes, and from superiors. The concept of “disengagement” is being applied both transitively and intransitively here because, as will become clearer, some of the principals have been disengaged against their wills and some choose to disengage themselves. They, and their instructors, see their engagement as limited to running interference when conflict or controversy arises.

### *Curriculum*

Principals experience disengagement from the sex and HIV/AIDS curriculum for several reasons. First, they either have or exercise no voice in curriculum decisions. Second, they feel like it is not their job because they see the people they are supervising as having, or better able to gain, the experience they see themselves as lacking. Principals are content to delegate to the people they perceive as experts.

#### *Little Training or Experience*

With the exception of one principal who attended a formal training in 1988 and worked with a health teacher to launch a sex and HIV/AIDS curriculum in another district, the principals had no training. Keaster, Evans, Melville, and Cass (1995) found that school administrators had little formal training and that they had an inadequate base of knowledge concerning HIV/AIDS. Documents gathered from OSPI also support the generalization that formal training is lacking among school administrators. In a telephone conversation, the OSPI assistant in charge of health education statewide said that administrative participation in formal HIV/AIDS trainings was sparse. The assistant indicated that with the exception of 1988, when the “Aids Omnibus Bill” became law in the state of Washington (The AIDS Omnibus Act, 1988), administrators rarely attended. In 1988 many principals would attend trainings with building teams in order to gather the information and training necessary to comply with the new law. Documents she provided listed participants by category between 1997 and 2002. Data was not available for prior years. The data available showed that while school administrators comprise about 10% of the certified employees in the public schools, only 3.7% of 2,173 participants over that five year time period were administrators. The principals interviewed reported that their knowledge about the subject matter came from their second hand experience in schools and from the media. They all reported

gaining information by reading newspapers and professional journals. Consistent with the administrators studied by Keaster, et al. (1995), all of them, even the principal who had attended formal training in 1988, indicated that their knowledge and experience were limited.

*Little or No Voice*

Whether they were left out or opted out, the principals had little or no voice in sex and HIV/AIDS curriculum decisions. Expressing some frustration through laughter, one principal quipped, “I haven’t had any involvement in the curriculum selection before, during, or after.” This principal later shared that the curriculum that had been adopted the previous year had just shown up in the building, that it went to the instructor, and that this principal had to get it from him in order to preview it for the first time. This principal, like one other who was interviewed, wanted to be involved and felt left out. The remaining principal, who opted out, simply left all of the decisions to others.

*Little or No Observation, Supervision, or Evaluation*

Each of the principals commented either that they did not observe sex or HIV/AIDS classes at all or that they observed them very little. In one district, the instructor who had 15 or 16 years of experience with sex and HIV/AIDS instruction, and who had worked for 3 or 4 principals, remarked, “You know, the amazing thing is that up until last year—it was the first time I think I’ve ever been observed teaching [sex or HIV/AIDS classes].” In another district, one respondent indicated that the superintendent evaluated the sex and HIV/AIDS instructor while another said the elementary principal did. It’s unclear whether the instructor was evaluated at all. No one, including the instructor, could recall any formal observations, which by state law must last at least 30 minutes in one continuous observation, for supervision or



evaluation purposes. This is a district, as mentioned in more detail below, in which pressure was exerted on the principals, from both above and below, not to observe the instructor.

Another principal indicated that an observation had been conducted, but that such observations in the sex or HIV/AIDS classes were much less frequent than in more traditional subjects. This principal commented that when a regular education teacher handles the curriculum, it is a small part of their overall assignment making observations for a particular class less likely. The bottom line is that, no matter what the reason, little or no observation, supervision, or evaluation, related to their assignment to the sex or HIV/AIDS program, occurs with instructors.

#### *Engagement Limited to Running Interference*

In addition to having little or no involvement with the curriculum and with observation, supervision, or evaluation, principals reported little or no engagement with their superintendents or school boards on the topic of sex or HIV/AIDS education. They, and their instructors, saw their engagement as limited primarily to running interference whenever controversy or conflict might arise. This involvement as a “buffer” appears under the theme of *Principals in Conflict* below. Principals run interference at mandated meetings in which parents are to have an opportunity to view the HIV/AIDS curriculum and when there are complaints about any aspect of the program. One interesting finding, in light of this role of running interference, is that each principal reported little or no major controversy. They all dealt with conflicts and controversies, but they all saw them, in the words of one principal, as “no big deal.”

*Principals in Conflict**With Instructors*

Various personnel in different districts deliver sex and HIV/AIDS instruction. Indeed, researchers and sex education experts have come to different conclusions about the best way to choose instructors. For example, Balliet (1927) recommended that only regular education teachers be used. Johnson and Schutt (1966) found that school officials preferred that “‘experts’ such as doctors, nurses, psychologists or clergymen, rather than teachers, should *not* be called on to handle sex instruction” (p. 67). On the other hand, others have found that sex education specialists, nurses, and physicians were preferred over regular teachers as instructors (Hale & Philliber, 1978; Reis & Seidl, 1989). So it is no surprise that districts differ, as do the two sampled in this study. In one, a nurse handled HIV/AIDS instruction throughout the district and took the lead in implementing the sex education curriculum. In the other district, the task was divided between health and P.E. teachers by grade level. Three sections entitled *Openness Versus Guardedness*, *Conservative Versus Liberal*, and *Providing a Buffer* serve to organize the findings related to subtle conflict between principals and instructors. The discussion then turns to findings regarding the conflict principals have with the addition of sex and HIV/AIDS to other curricular demands.

*Openness versus Guardedness*

One unexpected research finding was that principals agreed readily to be interviewed and they responded fully, openly, and honestly even when they felt their views were not what others might expect. One principal stated, “I think my views are different than the mainstream, but I’ll be happy to answer your questions.” Another principal said, “Just to be candid, I have personal HIV thoughts that are archaic and I’m aware of that.” The principal went on to reveal these

thoughts fully in the same open spirit shared by all of the principals. On the other hand, the instructors were more reluctant to talk and exhibited discomfort in answering questions and a certain level of guardedness in their responses. Both instructors expressed some reluctance even to talk, but eventually agreed. The information they gave seemed truthful and honest, but they also seemed more uncomfortable with some of the questions and to hold back on some responses. One instructor showed evidence of such guardedness at the end of the interview by saying, "I think I shared more than I planned to." That was definitely the feeling during the interview although it did last about 50 minutes and yielded much useful data.

This finding relates to subtle conflict between principals and instructors because it represents the willingness of principals to share their reservations about sex and HIV/AIDS education and the unwillingness instructors have to talk about what really happens in their classrooms and how they really feel about the principal's attitudes, beliefs, and values. This subtle conflict becomes even clearer in the next section, which discusses the conservative/liberal dichotomy.

#### *Conservative versus Liberal*

The common view is that principals are conservative in regard to sex and HIV/AIDS education (e.g., Brantlinger, 1991; Harper & Harper, 1957). Principals are seen as stewards of the traditional Judeo-Christian moral standards (Johnson & Schutt, 1966) and promoters of a politically conservative agenda (Huerta, 1996). All three principals studied here fit these views. All three used the word "conservative" to describe their views of sex and HIV/AIDS education. All three said they were Christian. Two of them were very active in their churches while one said, "I should probably be more religious." While they were not asked about their political views, given that the "abstinence only" message has been pushed by a conservative congress and

reemphasized by a conservative president, they are at least partially promoting that politically conservative agenda.

Sex and HIV/AIDS instructors, both those who work with youth in the classrooms and those who train these teachers, are commonly seen as liberal in their approach to the subject matter (Brantlinger, 1991; Moran, 2000). Each of the two classroom instructors directly interviewed described their approach as more liberal than their communities. One said, “I always say that I’m a square peg trying to fit into a round hole up here.” She goes on to talk about being raised liberal in contrast to those in her current community whom she describes as conservative. While just a few of the 13 teachers in the two training sessions observed spoke up about being liberal in their views, none said they were conservative. The two official trainers, and the two guest speakers they relied on for most of the content in the training sessions, all either described themselves as being liberal in their views or discussed strategies for overcoming conservative administrators, parents, or communities. One guest speaker said, “Self-sex fits into the liberal views of sex education. It’s not my job to say you’ll go to hell. Make the point that masturbation doesn’t hurt you.” In contrast, the other guest speaker described herself as “a conservative Christian woman,” but she also positioned herself as liberal concerning sex and HIV/AIDS education by strategizing about how to overcome conservatism in these areas.

This conservative/liberal dichotomy between principals and instructors presents a subtle point of conflict because it leads to mistrust in several ways. First, principals perceive that instructors are hiding something. Second, they voice the belief that the appropriateness of the curriculum depends not upon the official adoption, but upon the person of the instructor. Third, principals cannot always reconcile the details of parent complaints with the explanations given

by teachers. Each of these first three issues will be discussed in detail under the theme *Mistrust* below.

#### *Providing a Buffer*

The role of the principal in providing a buffer for instructors concludes this subsection on the subtle conflicts between principals and instructors. It is not so much that the conflict here is between the principal and the instructor so much as this buffering role illustrates that subtle conflict pervades the principal's relationship with sex and HIV/AIDS instructors even when the conflict is not directly with them. Principals willingly serve as a buffer between irate parents and the instructors who consciously use them for this purpose. This theme was pervasive throughout all of the interviews and observations. It is an unwritten rule in any curricular area that teachers can freely call on principals to shield them from conflict and that principals will rise to the occasion. Ogawa (1996) finds that "research consistently demonstrates that teachers expect principals to shield them from undue parental influence and that principals do perform this function" (p. 3). This theme was so pervasive in sex and HIV/AIDS education that it can be viewed as the primary involvement of principals. One instructor speaks for all when responding to the question: "In your experience what involvement has the principal had with sex and HIV/AIDS education?" She immediately reported, "They've been more of a buffer for me. If there's been an upset parent, they would go to the principal and the principal would come to me." This buffering role is the first one that comes to mind when instructors consider the role of the principal in sex and HIV/AIDS education.

#### *With Curricular Demands*

After subtle conflict with instructors, *Curricular Demands* serves as the second major point in this theme of *Principals in Conflict*. Administrators express frustration with the many

academic and social demands they face. Reis and Seidl (1989) found that 81% of principals, who completed a survey at a sex education workshop sponsored by their district, felt that the recently adopted sex education program would require too much time. Others specifically mention the overcrowded curriculum as a reason that principals may give sex education a low priority (Clawar, 1977; Sivulich, 1973). One principal in this study commented:

I think that we have too many roles in the schools. Since I've been in education, we have gotten so many more requirements. The mission of the schools is so fragmented at times that it's hard to really focus in on those academic standards we talked about when we're doing so many other things.

Within this theme, principals talked about sports, student events like homecoming week, and counseling needs in addition to the pressure to meet academic requirements through testing programs like the Washington Assessment of Student Learning (WASL) and the Scholastic Achievement Test (SAT). Another principal had this to say:

When you start talking mandated tests, and our test scores aren't where they need to be, and we're offering AP classes now and running start and all the other things that take place—[sex and HIV/AIDS education] is probably . . . not as much of my day as it needs to be.

With just simple speculation, Avery and Kirkendall (1955) anticipated these findings nearly a half century ago. They sought to correct the problem with plans to win over administrators through carefully planned public relations campaigns and summer institutes for principals. Based upon the findings here, it looks as though their plans have made little difference.

*With the Politically Correct*

Principals struggle with what they perceive as politically correct views about homosexuality and abortion. All three principals, two males and one female, take a stand against tolerance of homosexual activity. While they hesitate to impede a girl's right to choose as provided by law, they all have strong feelings against girls, or adult women for that matter, having an abortion.

*Homosexuality*

The principals interviewed don't lack tolerance for people who claim a homosexual predisposition. Two of the three acknowledge that an individual may simply be born with that sexual orientation. But all of them believe homosexual activity is wrong. One principal put it this way: "I believe that there shouldn't be men marrying men, and women marrying women; I don't think that's right." A while later the principal adds, "I think probably men shouldn't be having sex with men and women with women. I think it's damaging to them and there's a reason why those universal laws are that way." Elsewhere, the same principal comments regarding homosexual people, "I think a part of what we teach that's not really in the sex education area is a caring for all people no matter who they are. I think we need to do that—a respecting of all people."

Another principal doesn't believe people are born homosexual. This principal comments, "I personally don't agree with the homosexual lifestyle. I think it's a choice, so there's my values base." Yet another principal says:

It still kind of sends shivers up my spine—the sexual preferences that people have . . . it's hard for me to feel as much sorrow for someone whose lifestyle has placed them in the position [of having HIV or AIDS].

None of the principals advocate the inclusion of instruction about homosexual lifestyles in the sex or HIV/AIDS curriculum.

The principals' stand on the issue of homosexuality creates subtle conflict for them because of their perception that it is politically correct to be more accepting of homosexuality. The true views regarding homosexuality held by one principal in particular caused him some discomfort during the interview. He described his beliefs as "archaic" indicating that they weren't in step with the times. He made a point of repeating that he had changed some of his beliefs about HIV/AIDS based upon hearing some guest speakers at the school who had contracted the virus "innocently." In other words, he had come to understand that HIV/AIDS was not a "homosexual disease," but he still stated, "Same sex sexuality is wrong. Sex between a man and a man or a woman and a woman is wrong and I don't think schools have any business teaching about homosexual lifestyles."

#### *Abortion*

A strong theme, common to both principals and instructors, emerged in all five interviews. They all believe that the schools have no business including abortion as a sex education topic, and that having an abortion damages a young girl or a woman for life. One principal who said, in regard to teaching about access to abortion services, "I think the school should stay out of that as much as possible" also shared the following in regard to how personal religious beliefs conflict with the role of principal:

I have a sister who had three abortions, okay, and I know (long pause) I mean I know how emotionally devastating that is but it takes 10 or 15 or 20 years sometimes before the emotional devastation becomes apparent and I think that sometimes in schools, you



know, this is recommended to kids as a way out and (long pause) we're not looking far enough down the line."

Abortion is, perhaps, the most emotional issue in each interview and the one each person had the strongest beliefs about whether they were a principal or an instructor. One of the instructors had this to say:

My own personal belief is that I don't agree with abortion, but it's not my decision for somebody else and I just feel that that is something that can be (pause) have such a lifelong effect on a girl that I—I just don't know.

The other instructor said that this is how she answers kids who bring up the topic of abortion:

If you choose that route, you need to know that it's not a one time thing, it's something that you have to live with for the rest of your life—that you know that you've done that. Can you live with it?

Another principal also had life experience with abortion and offered this:

I have a sister who had an abortion at age 15 and that was very impacting to my family and then to her subsequently, at least I can see a pattern of personal issues that she's gone through that I think are related to, or at least influenced by, that whole experience which was extremely negative for her. At the time certainly the decision was made because of logistics and the age and all things, but, in hindsight, terrible decision lots of guilt and, issues that have affected her relationships and things throughout her life; so I look at that as something that kids generally don't consider and families a lot of times don't consider, those long term effects of making a decision when you're that age. So those are [the reasons] why I say that it's nice to be able to get kids to other resources where they can get that other information and have somebody who has had the experience share with

them before they make a quick decision. I think I have a lot of conflicts certainly internally, but I don't objectively believe that's affected how I've counseled kids, which generally would be through the counselor and if I'm close enough to the family to have any discussion, I would share with them where they can get information, share with them what the rights are of the kid, certainly, depending on their age, and then also share with them some personal experiences [like] before you make a decision, let me tell you a story about my sister, those kinds of things so, I don't think those are wrong things to do.

*With Role Definitions*

Principals feel subtle conflict due to their perceptions of what the roles of the family and the school ought to be versus what they really are. They believe that sex education ideally belongs in the family but that too many parents do not fulfill their role. Consequently, they feel that the school, unfortunately, must fill the gap.

Prior to 1904, educators and health professionals left sex education to families and churches without question; but with the "discovery" of adolescence in 1904, these professionals began to seek control of this stage of life arguing that families and churches were not equipped educationally or scientifically for the task (Moran, 2000). For nearly a century, many professionals have been unabashed in their views that sex education can not be trusted to parents and churches (Balliet, 1927; Breasted, 1970; Harper & Harper, 1957). Some took a bit more sympathetic approach by trying to educate ignorant parents while their children were receiving family life education only to find that their efforts failed due to lack of enthusiasm on the part of teachers and logistical problems (Avery & Kirkendall, 1955). Interestingly, Koblinsky and Atkinson (1982) found that their limited research of 152 parents in Oregon squared with a national study indicating that parents strongly believe they should be the primary sex educators

of their children. In the national study conducted in 1977, 80% of parents held the belief, while 95% of parents of preschoolers held the belief in an earlier study conducted by the same authors.

Clawar (1977) adds a provocative finding:

One of the most important findings the researchers uncovered was that the students felt sex education should also take place in the home as well as school. In fact, many students said they would prefer that discussions take place in a family setting (p. 31).

Administrators, teachers, parents, and students all believe that sex education should take place in the home, but for some reason they do not stand firmly on this belief. Sex education proponents may have something to do with this phenomenon due to their repetition of the idea that parents are incompetent and negligent in the task of fulfilling their role as the primary sex educators of their children. They have repeated this cry over and over again for nearly a century (Hale & Philliber, 1978; Harper & Harper, 1957; Hottois & Milner, 1975; Moran, 2000).

In this study, professionals do not so much feel parents are incompetent in matters of sex education as that they are negligent. For example, one principal reflected:

If every family promoted [sex and HIV/AIDS education] and made sure their kids really truly understood, then we wouldn't have to be responsible for it and that would be my first choice, but that's not the way families are made up today.

Moran (2000) notes that professionals in 1904 felt the same way.

Another principal makes a strong statement that sex and HIV/AIDS education belongs in the family but then, later, goes on to say, "not every kid certainly has that level of instruction in the home . . . so, as I look at it I'd say that some kids need to have access to [sex and HIV/AIDS education in the school]." Even though empirical studies strongly suggest that parents believe they should be the primary sex educators of their children, principals repeat the view that parents

are negligent in this matter, a view that has been advanced by sex education proponents since at least 1904.

*With the Abstinence Only Until Marriage Message*

Again, the principals' ideals conflict with what they perceive as reality. Each principal interviewed has strong feelings that abstinence only until marriage is the very best message to send to youth. For example, one principal, when asked whether sex education should teach the abstinence only message, replied, "I think that's the right approach. It's where my values are. I think it's a great message to send to kids." The same principal also commented that the abstinence only message is not going to work for students who don't have support at home. Another principal, who strongly favors the abstinence only message, agreed saying, "abstinence only until marriage is the best route to go, but I also know that once you go down that path, you're not going to meet the needs of some kids." This principal goes on to talk about how the church and the family are the only sources that can adequately lay down the values necessary for the abstinence only message to take root and that those children without such support need to learn about contraception because they will not be abstinent. The remaining principal interviewed deals with the conflict by characterizing messages as "the abstinence only message" and the "realism" message. This principal also deeply supports the abstinence only until marriage message saying, "my religious beliefs are that sex ought to wait until marriage" but, as evidenced by the earlier characterization, this principal does not believe that message is "realistic" for all students.

One of the guest speakers advanced a different view during an observation of one of the training sessions. She said:

Abstinence is a hard sell. Look at all the things you can do safely. What are some of the things kids can do to achieve orgasm safely? One resource lists ‘101 ways to make love without doing it.’ Kids are so much more receptive to this message than ‘OK, don’t do it—cross your legs.’

This contrast in views about abstinence along with the idealism/realism dichotomy defines well the subtle conflict principals deal with on the issue of abstinence only until marriage. The subtle conflict is also summed up well in the following quote: “I think that if you teach a kid how to use contraception and you’re also teaching a kid about abstinence only until marriage that that’s definitely a mixed message.”

*With the Efficacy of Sex Education*

Principals support sex education in the schools hoping that it will make a difference in preventing teen pregnancy but believing, deep down, that it does not. This conflict is seen well in the following quote from one of the principals: “We, you know, had really hoped that this [sex education program], all our bright ideas, would [prevent teen pregnancy], and within 6 years or 8 years, [our students’] children from unwanted pregnancies were coming back as kindergarteners.” In commenting on the research, another principal said, “I don’t think I’m aware of anything that shows that the incidence of student or teen pregnancies or AIDS or anything like that has been decreased.” The principal is right (see for example, Besharov & Gardiner, 1997; Breasted, 1970; Hoyt & Broom, 2002; Moran, 2000). The empirical reality that sex education does not really make a difference anyway adds to the disengagement and many other subtle conflicts principals experience regarding sex and HIV/AIDS education.

### *Conflict Within*

Several of the categories of conflict already discussed could be seen as internal conflicts. But the principals also specifically mentioned such conflicts in terms of personal and religious beliefs. This type of conflict will conclude this second major theme of *Principals in Conflict*. In talking about personal beliefs about sex education, one principal said,

I want it to occur in a values context and I don't know that we can do that in the public schools. Religion certainly is not a topic that can be integrated into sex ed, so when you talk about abstinence, the reasons . . . can't even be discussed.

This principal brings up the issue of values as being integral to sex education, along with the frustration that such sex education is impossible in public schools, several times. While many proponents of sex education believe it can be presented in a values neutral way, this principal disagrees, as do researchers. Breasted (1970) and Hottois and Milner (1975) present good discussions of the issue of values neutrality. This principal also finds many other conflicts in terms of separating the professional role from personal and religious beliefs. This conflict is illustrated in the following quote: "I have beliefs about several things that, because of laws or requirements or whatever, that's just the way it is." The principal says this after talking about the difficulty in separating a religious belief about abortion from the perceived professional obligation to provide information about abortion services to pregnant teens. The principal later comes right out and says, "I have a lot of conflicts certainly internally." This theme of internal conflict based on personal and religious beliefs cuts across all of the principal interviews.

### *Mistrust*

Secrecy and deception, on the parts of instructors and those who train them, engenders mistrust on the parts of principals. It was certainly a surprising theme when it emerged, but a

continuing review of the literature revealed secrecy and deception as a theme throughout the history of sex education. Moran (2000) chronicles this history and refers to “the secretive approach to curriculum change” in sex education (p. 110). In an earlier work (Moran, 1996), he mentions two examples of secrecy and deception: “educators after 1913 increasingly [trying] to ‘sneak’ the subject in first and ask permission later, if at all” (p. 509) and “dishonestly” changing the name of the program from “sex hygiene” to “personal purity” (p. 506). A primary source confirms this secretive approach. Thomas M. Balliet (1927) produced a booklet entitled *Some Suggestions Regarding the Introduction of Sex Education Into the Public Schools* for the American Social Hygiene Association (ASHA), one of the early organizations that advocated sex education. In it, he warned:

no course should be introduced specifically in sex education . . . no public announcement that such instruction is to be introduced should be made . . . otherwise . . . prejudice sufficient to block the way may be aroused (Balliet, 1927, p. 3).

Balliet further suggested that if the school board found out about the introduction of sex education such that a public action might be taken, that sex education reformers should “delay the whole matter” (p. 3). Harper and Harper (1957) referred to this strategy of secrecy and deception with the following:

In the pioneer days of family life education, presumably liberal and enlightened educators recommended temporarily de-emphasizing sex in suggested courses in order to get them approved by allegedly reactionary and unenlightened administrators, parents, and citizens (p. 240).

Scales (1980) picks up the theme again. In his desire to promote sex education he draws heavily on the work of Hottois and Milner (1975), but he distorts their work by failing to mention that

they denounce the social control methods he advocates. These methods emphasize silencing the opposition rather than involving them in any true democratic process. What Scales calls effective conflict management, Hottolis and Milner would call “discouraging effective mass participation” (1975, Introduction, p. xix). In order to advance the cause of comprehensive sex education, Scales lays out a blueprint for using the most secretive methods possible in a given community. Balliet would be proud. These strategies of secrecy and deception are alive and well today as will become more apparent. The sub-themes of *Secrecy and Deception* are: *What are You Hiding? The Hidden Curriculum, HIV/STD Update?, The Question Box, and Liberal and Conservative Revisited.*

#### *What are You Hiding?*

Principals perceive that sex and HIV/AIDS instructors hide certain aspects of what is really going on in their classrooms. This perception is warranted not only by their experiences, but also by an historical pattern noted above (Balliet, 1927; Harper & Harper, 1957; Moran, 2000). In one of the districts studied, this problem was exacerbated by the fact that the nurse who provided sex and HIV/AIDS programs for the whole district did not want principals or the regular teachers in the classroom while she taught. She commented, “I have asked teachers not to be in the classroom” and to a principal she said, “Come in, just don’t stay; stay for a few minutes and then leave.” A directive not to observe, given to the principals by the previous superintendent, upheld her desire for privacy. The nurse reported that the controversy arose again under the current superintendent who also upheld her desire for privacy saying to her, “The program’s working this way; we don’t have a lot of controversy and let’s leave it this way.” The superintendent’s decision fits with several research assumptions that administrators’ decisions with regard to sex education arise from a desire to avoid controversy (e.g., Brantlinger, 1991;



Dolbear & Hammond, 1971; Hale & Philliber, 1978; Huerta, 1996; Johnson & Schutt, 1966).

The perception of the principals is summed up in this quote from one of them:

I thought that sent red flags up, that we don't want other adults coming in. Are we not following the curriculum? Or is there something going on that we are concerned about, that the public would be concerned about or that kids shouldn't be exposed to? You know, for me it was a real concern, but at that time I had, you know—I basically did what I was told.

The nurse confirmed that she thought one of the administrative team had a personal agenda regarding the content of her lessons. She revealed this thought when she was questioned during the interview about the conflict, handled by the current superintendent, in which the administrator pushed to have someone else in the classroom with her at all times.

Principals also have concerns about sexual slang and obscenities used in the classroom, teachers sharing their own sexual experiences, and handling student questions inappropriately. The concern about use of sexual slang in the classroom was validated in the training observation when, against the advice of the trainers, a classroom teacher confided that she used sexual slang to better relate to students. The examples of slang mentioned referred to the penis, vagina, hymen, ejaculate, and sexual positions. Paul Dearth, a sex education teacher in Anaheim during the 1969 controversy, defended writing “F-U-C-K” on the board in his classroom, and telling students not to “squeal on him,” in order to dispel any negative feelings or attitudes students might have about sexuality (Breasted, 1970, pp. 50, 92). One principal reported a problem with a teacher “who told personal stories about her own sexual experiences, [which] was way out of line.” All of the principals expressed concern for the appropriate handling of student questions. They felt that written questions should be screened, that questions dealing with controversial

issues should not be dealt with in front of the whole class, and that students' questions should be dealt with privately in many cases. One principal talked about a teacher who dealt inappropriately with a fifth or sixth grade student's questions about bestiality in front of the whole class. This attitude conflicts with many who favor comprehensive sex education. For example, Harper and Harper (1957) contend that teachers

need to learn to handle free and open discussions on sex and to encourage all kinds of questions about sex from their students (not just 'nice' topics, but such crude-shocking matters as masturbation, oral-genital love-making, coitus during menstruation, homosexuality, and hundreds of other 'out-of-line' questions that will emerge in a group made to feel free to express its feelings about sex) (p. 243).

This striking contrast in attitudes makes the subtle point of conflict between principals and instructors quite clear.

### *The Hidden Curriculum*

Principals do not believe teachers stick with the approved curriculum in the area of sex and HIV/AIDS education (Clawar, 1977). They believe that what actually happens in the classroom depends not upon the official curriculum adoption, but upon the views and approach of the individual teacher. It is commonly understood that every school has an "unofficial curriculum." In regard to sex education curriculum in particular, Kenkel (1957) said, "it would appear that concerned teachers are 'bootlegging' family life topics into many different courses, with or without the knowledge or approval of school officials or the community" (p. 380). Moran (2000) observed that, "Even where schools claimed to be teaching integrated sex education, the actual content of the courses depended primarily on the multifarious preferences of different teachers" (pp. 110-111). Buston and Wight (2001) say, "Most schools had an

individual teacher with special responsibility for designing the sex education . . . and their motivation, views, values and experience were crucial in determining the nature of . . . sex education” (p. 366). The practice of teachers inappropriately expanding the curriculum became so commonplace that Paul Cook, the superintendent of the Anaheim Union High School District in 1969, admonished teachers not to “sneak anything in that the community had not been informed about” (Breasted, 1970, p. 91). Cook was eventually forced into retirement after a fierce battle with those opposed to sex education in Anaheim. In answering a question about the appropriateness of teaching students how to use contraception, one principal in this study commented, “It depends on your instructor. If it’s someone that approaches it the right way, it can be positive, good information, controlled information, and in some cases, not so controlled.”

Again, the principals’ concerns were validated during the training observations. In response to a teacher who felt her community was too conservative, the official OSPI trainer went into detail about how she had “pushed the envelope” on curriculum over several years. She talked about making sure to eliminate anything controversial in the beginning and gradually adding the controversial material over the years. She gave a year-by-year breakdown about how she expanded the “official” curriculum. She followed the historical pattern noted and evidenced in the literature (Balliet, 1927; Harper & Harper, 1957; Moran, 2000).

### *HIV/STD Update?*

The first of the training sessions for administrators and instructors observed was entitled “HIV/STD Update.” This title turned out to be the first deception recorded in this study because the “update” omitted critical current information about condoms. A nurse from the county health department had been asked to handle the main content of the course by the state sanctioned instructors. She introduced herself as “The Condom Lady,” an appellation she acquired because,

as she explained, she would frequently blow up a condom, place it over her head, and proclaim, “see, one size does fit all.”

The condom lady talked about the need for getting unbiased information and cautioned against going to *Catholic Digest*, for example, because it is not an unbiased source. She emphasized that a science teacher, for example, who instructs students that viruses will go through condoms is putting biased conservative views onto students. She went on to stress how important it is to “teach kids how to use condoms.” As an example of an unbiased source, the condom lady mentioned the United States Government’s Center for Disease Control (CDC) and gave out what she called “her favorite website” for the CDC. She mentioned that one could sign up for a daily email from the CDC, which she said she had done.

Given her status as an expert from the county health department, the fact that she was presenting an HIV/STD update, and her statements about CDC updates, one could reasonably assume that the condom lady possessed information regarding a recent workshop organized by the CDC in conjunction with several other agencies. A summary of this workshop is available on the web (*Scientific Evidence on Condom*, 2001). That summary indicates that epidemiological studies are insufficient to determine the effectiveness of condoms at preventing STDs. The report does indicate that correct and consistent use of condoms *can* reduce the risk of HIV/AIDS transmission and gonorrhea transmission from a female partner. A meta-analysis of several studies showed an 85% decrease in the risk of HIV/AIDS transmission among consistent condom users during vaginal intercourse. This information was released on July 20, 2001 but was not presented in the “HIV/AIDS Update” by the condom lady. Instead, an obsolete document, also citing the CDC and dated February 2000 (*Common Sense About AIDS*, 2000),

claiming, “latex condoms have been shown to prevent HIV infection and other sexually transmitted diseases” was included in the “update.”

The current information from the CDC, which contradicts the older information, is critical because, unlike the obsolete document, it reports that condoms cannot be shown to prevent most STDs, and are only 85% effective in preventing the deadly HIV virus during *vaginal* intercourse. Yet it was omitted from the condom lady’s presentation. She indicated in her presentation that, according to the CDC, HIV transmission is five times greater with receptive anal sex than with receptive vaginal sex. The latest information from the CDC indicates only that latex condoms reduce the risk of infection during vaginal sex and says nothing about anal sex. So how effective is the latex condom in preventing STDs in all sexual situations? The research answering that question has not yet been done (*Scientific Evidence on Condom*, 2001).

The position of the condom lady regarding public school classroom demonstrations of proper condom application using a banana, and distributing condoms to students, conflicts directly with the beliefs of principals. One principal interviewed was concerned because of a report that, against district curriculum guidelines, the instructor “actually showed how to put a condom on a banana.” The instructor denied doing such a demonstration, but the principal was not able to reconcile the stories. All of the principals interviewed specifically said that they did not approve of having condoms in the schools. Given the views of principals and the content of the training provided by the condom lady, one clearly sees why this theme overlaps the theme of *Principals in Conflict*.

*The Question Box*

Principals do not realize how the “Question Box” serves as a clandestine tool, but it provides convincing evidence of deliberate secrecy and deception in implementing sex and HIV/AIDS education. Many instructors employ use of a box for “unsigned questions which students might not dare to ask out loud” (Breasted, 1970, p. 34). A student simply writes a question on a 3 x 5 card and drops it in the secured box with all of the other questions. One of the principals mentioned how a conscientious instructor used such a box:

She would have them write down any questions they had on note-cards and she would go through those and the next day come in with the answers and that way she felt like if kids were embarrassed about something, but wanted to know, they would be able to have their questions answered without that embarrassment, plus she also screened out inappropriate things that might be asked.

The principal liked the way this teacher employed use of the question box and the control she thus achieved over potentially awkward queries in the classroom.

Breasted (1970) observed that students had a great time stuffing the box with mischievously inappropriate questions. The trainers in each of the sessions observed for this study also advocated surreptitious use of the question box. Each of the two official trainers and the two guest speakers who provided the bulk of the content for each session advocated “stuffing” the question box to introduce unapproved subject matter into the curriculum. Following up a suggestion by one of the trainers to leave the topic of masturbation off of any printed documents but to go ahead and talk about it with kids anyway, one of the guest speakers advised teachers to, “Use anonymous question boxes to insert controversial topics into class discussions. It’s a way to get important information to teens past the objections of parents.” The

other trainer told a story about a superintendent who prohibited information about how to use condoms in the sex and HIV/AIDS curriculum. This trainer went on to describe how the question box was used in the district to insert this precluded material into the curriculum. Before the nine hours of observation over two class sessions were concluded, each of the four official instructors and guest speakers promoted “stuffing” the question box to include proscribed material in the sex and HIV/AIDS curriculum.

### *Liberal and Conservative Revisited*

Many of those with liberal views regarding sex and HIV/AIDS education passionately believe their ideas are beacons of light in the conservative darkness of “neo-Victorianism” and “prudery” (Harper & Harper, 1957, pp. 241). This study finds that liberals and conservatives divide neatly with instructors on the one side and principals on the other. Many who see themselves as liberal believe so deeply that withholding the fullness of sexual information from children is so harmful to them that they openly advocate secrecy and deception to make sure young ones develop into sexually healthy and well balanced adults (Balliet, 1927; Harper & Harper, 1957; Moran, 2000). The ends justify the means. Even in this study, principals suspected secrecy, if not deception, on the part of an instructor who successfully kept the administrative team out of her classroom against their wills. This theme documented in the literature also emerged as a finding in this study. It defined a line, and the source of a conflict, between instructors and principals.

### Conclusions and Implications

In this pilot study, three major themes emerged regarding the principal and HIV/AIDS education. First, principals see themselves, as do their instructors, as having very different roles with curriculum, observation, supervision, evaluation, and superiors when dealing with sex and

HIV/AIDS education. They see their primary, and nearly exclusive, role as providing a buffer and running interference with all controversies or conflicts which might arise. Second, principals work in a state of subtle conflict with this subject matter on many fronts. They are in subtle conflict with instructors, curricular demands, what they perceive as the politically correct views on homosexuality and abortion, role definitions between the family and the school, abstinence only as the best message, the efficacy of sex education in preventing teen pregnancies and STDs, and within themselves based upon their personal and religious beliefs. And finally, they are confronted with secrecy and deception on the part of instructors, both in their districts and in the official training classes they send them to.

One must consider these findings in light of the limits of this study. Three principals and two instructors in two small town rural school districts were interviewed. Two training sessions were observed. A review of the literature, which revealed much congruence with the findings presented here, indicated that limited generalization would be both edifying and appropriate.

So much of the current literature frames the issue of sex and HIV/AIDS education in terms of the “abstinence only” versus “comprehensive sex education” debate. Both camps have utterly failed to reach their instrumentalist goals. Not a single study has proven the efficacy of either the comprehensive or the abstinence approach (Moran, 2000). So, in a sense, one might be guilty of playing only in the shallow end of the pool by taking one side or the other. Perhaps, the deep end of the pool conceals philosophical considerations, politico-moral conflict theory, or social control theory (Hottois & Milner, 1975); perhaps both sides of the current debate are so busy swimming in the waters of instrumentalism that they fail to realize they are in the wrong pool; and perhaps the inefficacy of sex and HIV/AIDS education engenders at least some of the disengagement principals experience. Maybe it is impossible to realize the instrumentalist goals



of reduced teen pregnancy and STDs by using either sex education approach (Moran, 2000).

With the lone exception of “virginity” pledging (Bearman & Brückner, 2001), a century of trying one approach or the other seems to confirm the thought.

This research shows the need for better theory development. Hottois and Milner (1975) understood the involvement of superintendents in the sex education controversy by drawing from politico-moral conflict theory and social control theory. Perhaps they point the way to a cogent theory explaining the role of principals. Based upon the literature reviewed and the results of this study, it seems clear that principals are stuck in the middle of political controversy rooted in the instrumentalist view of education. Fifty years ago, principals avoided the controversy by blocking sex education (Avery & Kirkendall, 1955). Now, due to the success of policy-making elites and the failure of the opposition (Hottois & Milner, 1975), principals have inherited controversy and seek to minimize it (Brantlinger, 1991; Harper & Harper, 1957; Hottois & Milner, 1975; Huerta, 1996). Whether or not they support comprehensive sex education, the abstinence only approach, or the removal of sex education from the public schools, they must deal with the subtle, and not so subtle, conflicts that arise in daily administrative life. This is why instructors and those who train them resort to secrecy and deception, why principals assume a very different role with sex and HIV/AIDS education, and why they feel pervasive conflict. Of course these observations must be tentative at this point because this study did not seek to refine, expand, or test any theories. But the results clearly imply that a more thorough development of grounded theory regarding the principal’s role in sex and HIV/AIDS education would be fruitful and would fill a gaping hole in the literature.

How can the practicing principal use the results of this study? Principals may take some comfort in the fact that any conflicts they may feel about sex and HIV/AIDS education are

common, although resolving those conflicts will not come easily. But avoidance is not the answer. Principals in this study do not get involved with curriculum decisions or training programs, observation, supervision, or evaluation either because they choose not to or because local politics keep them out. One principal commented that perhaps it was a subconscious desire to avoid conflict that kept this principal out of the classroom. This feeling squares with the findings already cited that principals do seek to minimize controversy. But conflict is like the deep end of the pool for one who fears it. Avoidance may work for a time, but the fear must eventually be conquered and eliminated for good. Principals must be willing to dive into the deep waters in order to resolve conflict. Avoiding the confrontation of secrecy and deception will result in controversy with parents or the community. Avoiding involvement with the curriculum and observation of instructors encourages development of the unofficial, and often unapproved, curriculum. In a nutshell, principals will better serve through reflecting upon the conflicts they feel in this role, from which they are often disengaged, and diving into those conflicts so as to conquer them, and finally eliminate them.

One purpose of this study was to serve as a pilot to determine the advisability of further research. The findings and unanswered questions here certainly merit further investigation. Can Hottois' and Milner's theoretical framework be applied to principals? Are the majority of principals conservative in their views of sex and HIV/AIDS education? Are most instructors and trainers liberal? Do principals in large districts work with the same kinds of subtle conflict in the area of sex and HIV/AIDS education as do those in small districts? Is the theme of secrecy and deception limited to circumstances of this study or is that theme generalizable? What distinguishes principals with more active involvement in sex and HIV/AIDS education from those who are not very involved? So many questions! And so many more could be asked.

Given the absolute lack of a theoretical framework, not to mention the lack of recent data and quality studies, quantitative or qualitative, regarding the school principal and sex and HIV/AIDS education, more research is indicated.

Despite the fact that they both seem to be standing on a weak philosophical foundation, the debate rages on between those in the abstinence only until marriage camp and those in the comprehensive sex education camp. Perhaps a whole new philosophical basis will resolve the problems with sex and HIV/AIDS education. Perhaps one side or the other in the current debate will establish its view as superior. Regardless of which view, if any, triumphs in the end, the school principal certainly plays a key role. In the words of Avery and Kirkendall, “until school administrators understand and support family life education its progress will be slow” (Avery & Kirkendall, 1955, p. 56). They wrote those words more than 47 years ago and, while “family life education” is now more openly referred to as sex education and the landscape regarding this subject matter has changed over the last half century, administrators still hold deep beliefs and attitudes that do affect sex and HIV/AIDS education. It is in the interests of all reformers to learn more about these influential leaders.

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## Appendix A

### Interview Questions

#### Questions for Principals

1. Can you walk me through your professional experiences with sex education including HIV/AIDS education?
2. Please tell me about any experiences you've had with curriculum selection, implementation, etc.
3. Describe your interactions with parents on this topic.
4. Tell me about experiences you've had with staff in this area.
5. What about with superiors and the school board?
6. Tell me about any experiences relating to students on this issue.
7. Can you recount your experiences with observing classes on these topics and your experiences with supervision and evaluation?
8. Can you share any experiences you may have with controversy in this area?
9. Compare and contrast your approach to this area of the curriculum with your approach to others.
10. Can you help me understand your personal attitudes, beliefs, and values about sex education?
11. What's your opinion on whether sex or HIV/AIDS instruction should be a part of the instructional program?
12. What are your personal views regarding teaching youth about how to use contraception? Access abortion services? Homosexual lifestyles?
13. What are your personal views about teaching abstinence only until marriage to youth?



14. Can you share with me how any religious beliefs you may have relate to sex or HIV/AIDS education?
15. What role would you want schools to play for your own children in terms of sex or HIV/AIDS education?
16. If you could have major influence on sex and HIV/AIDS education in our nation, what would you do?
17. Tell me about the sources of your knowledge about education in this area.
18. Can you describe any formal professional training you may have had in the area of sex and HIV/AIDS education?
19. Can you tell me about any research that may have informed you in these areas?
20. Are there any other sources of knowledge you've experienced in these areas?
21. Is there anything else you'd like to say?

#### Questions for Instructors

1. In your experience, what involvement has the principal had with sex education and HIV/AIDS education?
2. What role has the principal played in curriculum selection or implementation?
3. Describe the principal's interactions with parents on this topic.
4. What is the principal's relationship with you and other staff in this area?
5. What about with superiors and the school board?
6. What involvement does the principal have with students on this issue?
7. Can you recount your experiences with being observed teaching these topics and your experiences with being supervised and evaluated?

8. Can you share any experiences you may have with principal involvement in controversy in this area?
9. Compare and contrast the principal's approach to this area of the curriculum with his/her approach to others.
10. From your point of view, describe how the principal's personal attitudes, beliefs, and values about sex education come into play.
11. I have asked principals whether sex or HIV/AIDS instruction should be a part of the instructional program. Where have principals stood in your experience?
12. Talk to me about teaching youth about how to use contraception in terms of the role, attitudes, or beliefs of principals. What about access abortion services? Homosexual lifestyles?
13. In the same vein, what about teaching abstinence only until marriage to youth?
14. Can you share with me your perception of how any religious beliefs on the part of principals relate to sex or HIV/AIDS education?
15. How have principals you've worked for gained knowledge about education in this area?
16. Relate any formal professional training your principal may have had in the area of sex and HIV/AIDS education?
17. Is there anything else you'd like to say?

Appendix B

Informed Consent Form

You are being asked to participate in an interview as part of a research project by a graduate student in a qualitative research class at Washington State University. Your participation is very important to this study. The title of this project is: The Public School Administrator and Sex and HIV/AIDS Education. The purpose of the project is to discover what personal attitudes, beliefs, and values administrators have regarding sex and HIV/AIDS education, the role they play in its development and implementation, and whether there is any relationship between their personal views and their role.

This is a request for completely voluntary participation, and your responses will remain totally confidential. You may be asked questions about your personal values, religious beliefs, and attitudes in addition to questions about your professional role. You are free to not answer any questions you may find objectionable. These interviews are being conducted to fulfill the requirements of EdAd 536, Qualitative Research, for the graduate student conducting the research. Your participation in the study should take about 30 to 60 minutes. The WSU Institutional Review Board has approved this study. If you have questions or concerns regarding this study you may call the WSU IRB at (509) 335-9661 or the researcher at (509) 937-2413.

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Researcher Signature

\_\_\_\_\_  
Date