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Development and Implementation of Comprehensive Sexuality Education Programs for Middle School Students

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Conflict of Interest

- I declare that there are no relationships, conditions, or circumstances that present a conflict of interest relevant to the content of this presentation.

- This project was not funded.
What do we know?

- Inherent risks of sexual activity in adolescence
  - Pregnancy
  - Sexually transmitted infections (STIs)
- Developmentally relevant topics affected by sexual exploration
- Adolescent sexual health at the national and state levels

What can we do?

- Comprehensive sexual health education programs
- Burlington School District (BSD) health curricula
Why do we expect this to work?

- The case for comprehensive sexual health and safe relationship programs
- Conceptual framework: Social Emotional Learning (SEL) Theory

(Collaborative for Academic, Social, and Emotional Learning (CASEL), 2019)
Specific Aims

Develop and deliver a science- and evidence-based, comprehensive sexual health education and healthy relationship curriculum to BSD for the use in two middle schools

Provide training to health educators in implementation and use of materials and lessons
Context
Burlington School District (BSD)

Intervention
- Development and dissemination of two age-appropriate, science- and evidence-based middle school curricula
- Curricular training of BSD middle school health educators
Methods and Study of Interventions

- Review of literature and evidence- and science-based middle school sexual health curricula
- Conducted baseline informal interviews of health educators and administrators
- Developed and disseminated two age-appropriate curricula
- Offered health educator trainings
- Conducted informal follow-up interviews
Measures

- Delivery of 6th and 7th/8th grade curricula
- Adoption of curricula by BSD
- Number of students who received education
- Number of health educators trained
- Qualitative feedback from health educators
Ethical Considerations

Potential for bias when developing the curricula and providing training

Designated “not research” in June 2018

Vulnerable population and sensitive topic: Opt-out option
Outcomes

- Completion and dissemination of sexual health curricula
- Positive reception of materials and lessons
- Trainings completed
- Curricula in process of implementation
  - 7th/8th grade: 96 students received 13 lessons
  - 6th grade: 106 students received an average of 5 lessons

Contextual elements

- Challenging elements
- Positive elements
The consent lessons were powerful. I feel the students gained a lot of knowledge about puberty and sexuality.
Discussion

○ Key finding: Interprofessional collaboration is feasible

○ Strengths of project
  ● Long-term sustainability
  ● Curricula based on specific needs
  ● Online platform
Interpretation

○ Comparison of results
  ● Foundation in science- & evidence-based comprehensive sexual health
  ● Literature and SEL theory support interactive, multi-activity pedagogy

○ Impact of project on people and systems
  ● Time and resources of health educators
  ● Community health promotion
  ● Fostered collaboration

○ Cost and trade-offs
  ● No competing alternatives
  ● Time spent by health educators
Limitations

- Indirect measure of student progress and knowledge
- Content will need to be regularly updated
Conclusions

- Curricula deemed useful
- Sustainability
  - Commitment to sexual health education expansion
  - Commitment to consistency between schools
  - Financially sustainable
- Applicable to other contexts
- Next step: Coordinated outreach to community
Implications

Developing and implementing an individualized, science- and evidence-based, age-appropriate sexual health education curricula in middle schools in Burlington, VT can effectively equip subsequent generations of adolescents with essential knowledge of puberty, consent, respect, gender, equity and sex education, ideally resulting in positive lifelong health outcomes.
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References


Further references available upon request