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Family, Social, and Sexual Health Education in Elementary Aged Children

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Family, Social, and Sexual Health Education in Elementary Aged Children

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Introduction

In 2006, 7.5% of elementary schools provided health education that met the US National Health Education Standards.¹ Healthy People 2020, a 10 year agenda set by the US Department of Health and Human Services to improve health outcomes, has a goal of increasing this to 11.5% by 2020.² The World Health Organization, the US Centers for Disease Control and Prevention, and Vermont Health Education Guidelines stress the importance of school health education and identify topics that should be addressed in comprehensive health education, including family, social and sexual health.^{1,3,4}

The Schoolhouse Learning Center, a private elementary school in South Burlington, VT with grades K-5, wishes to implement a sexual health curriculum guided by the Sexuality Information and Education Council of the United States (SIECUS).^{5,6} The first step in curricular development is assessing current practices and beliefs; this project explored how faculty and families in the school community felt about various topics in sexual health education.

Methods

Study Population: 40 families with children enrolled in The Schoolhouse elementary program were surveyed on their feelings about a family, social and sexual health curriculum.⁶ 34 surveys were returned and analyzed.

Survey: The survey content was largely based on the SIECUS curriculum.⁵ A study exploring parents' perceptions of their children's school sexual health education conducted by Byers, et al. influenced the survey format.⁷ Major topics and subtopics explored in the survey are displayed (Table 1). The survey indicated that all topics would be implemented at an age appropriate level. The parents' views of importance of specific topics were compiled, giving an average score (0 - not at all important; 4 -extremely important), termed Importance Factor.

Focus group: Faculty of The Schoolhouse participated in a focus group to identify which topics are covered in the current curriculum and to share faculty perspectives on sexual health education.

Importance factors for each survey subtopic are listed below (Figure 1). Figures 2 – 4 show the extent to which sexual health topics are thought to be addressed outside of school, particularly by parents and pediatricians.

Table 1: SIECUS Guideline Topics

Human Development
• Reproductive anatomy & physiology
• Reproduction
• Puberty
• Body Image
• Sexual identity & orientation
Relationships
• Families
• Friendship
• Love
• Dating
• Marriage and lifetime commitment
• Parenting
Personal Skills
• Values
• Decision-making
• Communication
• Assertiveness
• Negotiation
• Finding help
Sexual Behavior
• Sexuality throughout life
• Masturbation
• Shared sexual behavior
• Abstinence
• Human sexual response
Sexual Health
• Reproductive health
• Sexual abuse
• Contraception
• Pregnancy & prenatal care
• Abortion
• Sexually transmitted infections & HIV infection
Society & Culture
• Diversity
• Gender Roles
• Sexuality and society
• Sexuality and religion
• Sexually and the media

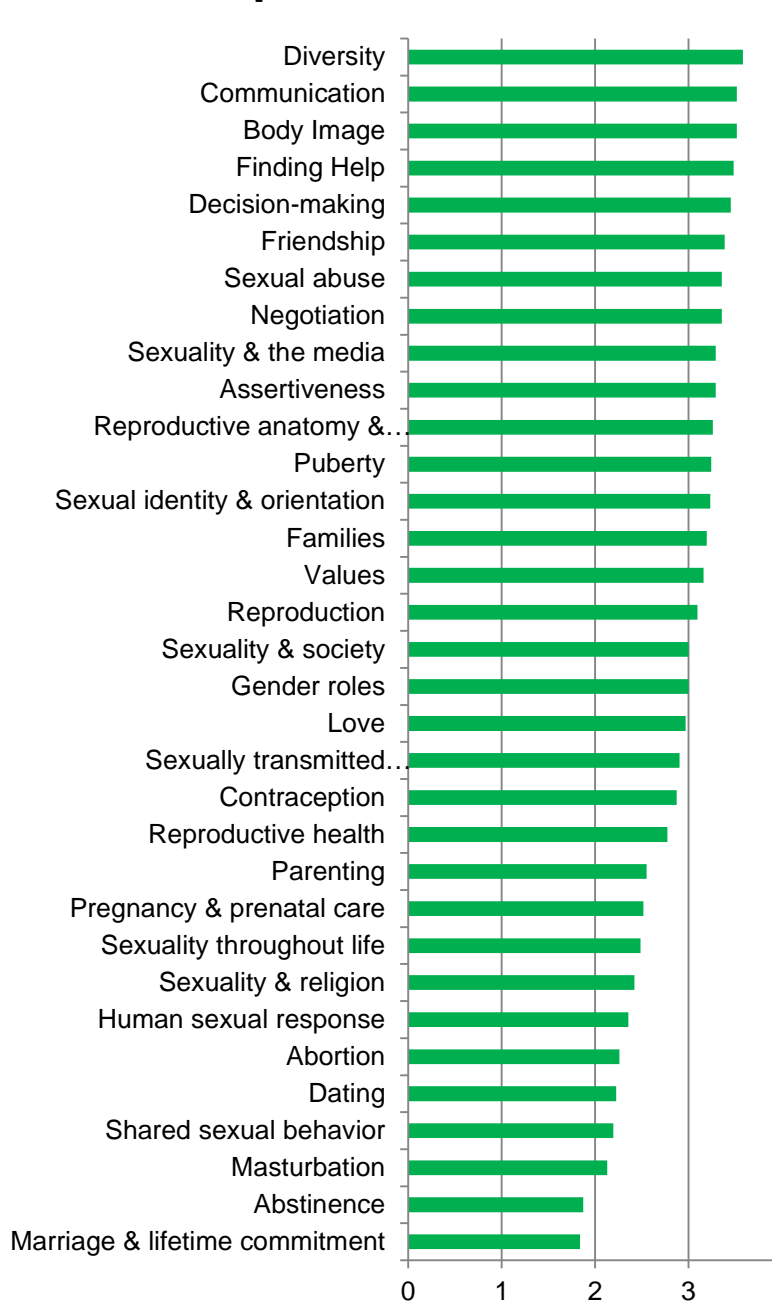


Survey Results

Parents agreed about the following points:

- Social health education should be provided in school
- Parents and schools should share responsibility for students' social health education
- The school's social health curriculum should begin in grades K-2

Figure 1 Importance Factor



Focus Group Results

- Generally, Human Development, Relationships, and Personal Skills are strongly covered in the Schoolhouse's current curriculum, but the Puberty and Dating subtopics are not systematically addressed.
- Society & Culture is emphasized mostly in the context of the subtopic Diversity.
- Sexual Behavior and Sexual Health are covered in response to individual student questions, but not as a planned curriculum because teachers questioned the appropriateness of teaching these topics to the class as a whole, preferring "a person that has been trained to teach these topics."

The extent to which family's pediatrician addresses the Sexual Health topics

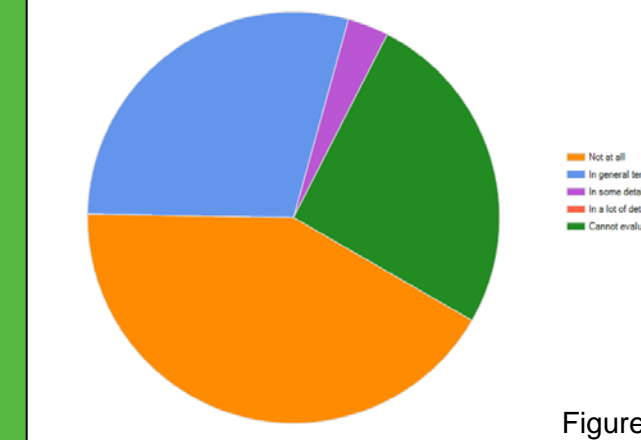


Figure 2

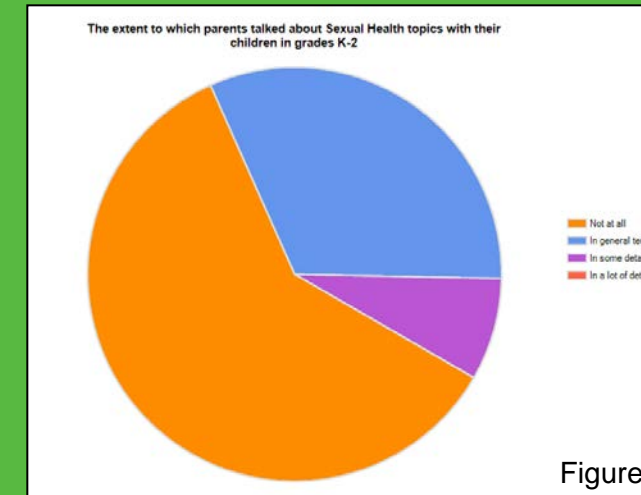


Figure 3

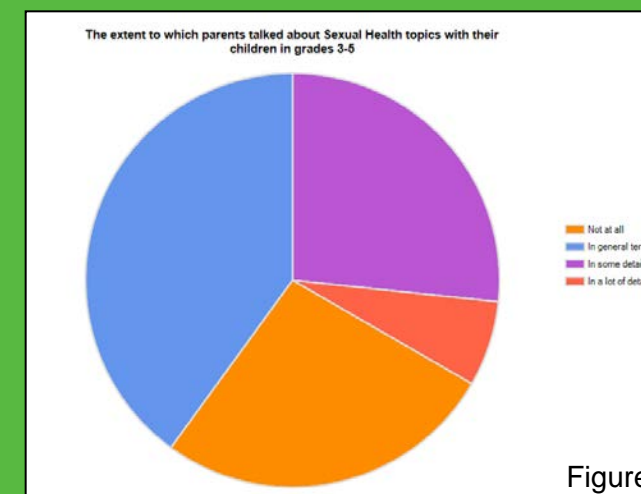


Figure 4

Discussion

Though all of the topics in the SIECUS guidelines would ideally be included in a comprehensive curriculum, the guidelines recommend prioritizing topics based on "the needs of the young people involved."⁵ The convergence between parents and educators on many topics demonstrates that The Schoolhouse is covering the majority of topics that parents consider important.

However, these results show that there are some gaps in Sexual Health and Sexual Behavior education (Figures 2-4):

- Many parents are not covering these topics, The Schoolhouse is not formally covering them, and interestingly, parents did not think they were being covered in the pediatrician's office.
- Faculty questioned the appropriateness of teaching some of the topics themselves. This suggests the need for faculty development as they work to modify the curriculum. An expert could be brought in for these sensitive areas.
- The survey found that many parents expressed interest in attending a workshop to learn how to address these topics at home. The school could facilitate this.
- Further exploration is needed to understand the parents' perception of the pediatrician's role in family, social and sexual education and to learn how the pediatrician can be a better collaborator in the process.

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