

GUIDELINES FOR SEXUAL HEALTH AND ADOPTION EDUCATION

INTRODUCTION

Evidence suggests that secondary school sex education programs that teach medically accurate, evidence-based comprehensive information about abstinence, pregnancy prevention, and safe sex practices to prevent STDs and HIV infection have a positive impact on healthy sexual behavior. This type of comprehensive programming can delay the onset of first sexual intercourse among teenagers, reduce their frequency of sexual activity, reduce their number of sexual partners, and increase contraceptive and condom use when they become sexually involved.

In *Emerging Answers, 2007*, Douglas Kirby (1) outlines 17 characteristics of effective curriculum programs. These programs had clear health goals with specific behavioral objectives and addressed perceived risks, norms, values, attitudes, and self efficacy in addition to knowledge. The programs also went further than just delineating risky behavior by teaching teens how to avoid situations that lead to negative health consequences. Teaching methods actively involved participants enabling them to understand how the information directly applied to their lives. These programs focused on encouraging protective factors while avoiding risky behaviors. In addition, these programs showed sensitivity to the developmental maturity, cultural values, and levels of sexual experience among the participants.

Several authors Kirby (1), Alford (2), and Card (3) have compiled lists of recommended programs that have been reviewed for effectiveness. These publications provide a wide choice of programs for communities to choose from which best fit in with the community's values, and resources including staff time, skills, space, and supplies. Five curriculum-based programs that were effective for both males and females were mentioned by Alford and Kirby and had at least two behavioral outcomes including delayed sex, reduced frequency of sex, reduced number of partners, increased condom use, increased contraceptive use, or decreased unprotected sex. These programs included:

- *Reducing the Risk: Building Skills to Prevent Pregnancy, STD & HIV*
- *Safer Choices: Preventing HIV, Other STD, and Pregnancy*
- *Becoming a Responsible Teen: An HIV Risk Reduction Program for Adolescents*
- *Making Proud Choices: A Safer Sex Approach to HIV/STDs and Teen Pregnancy Prevention*
- *¡Cuidate! (Take Care of Yourself) The Latino Youth Health Promotion Program*

Of these five programs, *Reducing the Risk* and *Safer Choices* focus on both Pregnancy and STD/HIV prevention and are applicable to youth of all ethnic backgrounds. *Reducing the Risk* has had outcomes replicated in other evaluation studies.

One area that has not received as much attention in designing educational programming is adoption. The literature indicates that most Americans view adoption as a viable option to consider as a pregnancy outcome. Although it is important to recognize that there are significant cultural differences particularly among some groups who have long standing cultural norms that do not view formal adoption outside the family as an option. There are also several studies demonstrating that both pregnant and never pregnant adolescents consider adoption to be a serious option. The literature also demonstrates however, that adolescents are not given adequate information on the adoption process and many even when faced with a pregnancy do not have comprehensive discussions to explore this option.

As of August, 2008, there are no published evidence-based research studies on the impact of secondary school-based classroom curricula about adoption. Further, only two adoption education curricula have been identified: (F.L.A.S.H.) from Seattle (4) and Adoption University from the Nebraska Children's Home Society (5). At this

time, the best approach to teaching adoption would be to ensure that it includes the information found to be absent in surveys of adolescents and that it follow Kirby's guidelines about effective curriculum which include interactive programming that addresses knowledge, attitudes, and self efficacy in decision making.

OVERALL GOALS OF GUIDELINES

The purpose of the following guidelines is to frame the content of a comprehensive curriculum which would achieve the goals of:

1. Improving the overall sexual health of adolescents
2. Promoting abstinence as the most effective way of preventing pregnancy, sexually transmitted infections and Human Immunodeficiency Virus infection
3. Decreasing the risk behaviors that contribute to unplanned pregnancy, sexually transmitted infections, and Human Immunodeficiency Virus infection
4. Increasing the consideration of adoption as a pregnancy outcome option

REFERENCES

1. Kirby D. *Emerging Answers 2007. Research Findings on Programs to Reduce Teen Pregnancy and Sexually Transmitted Diseases*. Washington, DC: National Campaign to Prevent Teen and Unplanned Pregnancy, 2007.
2. Alford S. *Science and Success, Second Edition: Sex Education and Other Programs That Work to Prevent Teen Pregnancy, HIV & Sexually Transmitted Infections*. Washington, DC: Advocates for Youth, 2008.
3. Card JJ, Lessard L, Benner T. PASHA: Facilitating the Replication and Use of Effective Adolescent Pregnancy and STI/HIV Prevention Programs. *Journal of Adolescent Health* 2007; 40: 275.e1
4. F.L.A.S.H. *Unplanned Pregnancy: Adoption. Grade 11, 12, Lesson 9*. Public Health, Seattle and King County. 1992, Rev. 2006. Available online at: www.metrokc.gov/health/famplan/flash
5. Adoption University. *Nebraska Children's Home Society*. 2007. Available at www.nchs.org.

GUIDELINES

The guidelines are based on a comprehensive review of the literature and are organized by the following sections:

- Section I: Sexual health and adoption topic content
Section II: Sexual health and adoption program selection
Section III: Sexual health and adoption program implementation

SECTION I: SEXUAL HEALTH AND ADOPTION TOPIC CONTENT

Medically and legally accurate information about sexual health and adoption should be addressed including:

1. Adolescent sexuality as part of normal human development
2. Sexual anatomy and physiology
3. Gender identity/roles and sexual identity including sexual orientation
4. Identifying healthy relationships
5. The definition of sexual activity
6. The definition of abstinence
7. Abstinence as a valid option which can be chosen throughout the life cycle even if the individual was previously sexually active
8. Factors which contribute to risky sexual behavior including substance use/abuse
9. Protective factors that affect sexual behavior including knowledge, attitudes, perceived risk, and self efficacy

10. Facts and myths about becoming pregnant
11. Transmission of STDs and HIV infection
12. Signs and symptoms of pregnancy
13. Signs and symptoms of STDs/HIV including the asymptomatic presentation
14. Abstinence as the most effective way to prevent pregnancy and sexually transmitted diseases
15. Use of hormonal or barrier contraceptives to reduce the risk of pregnancy
16. Use of condoms to reduce transmission of STDs and HIV infection
17. How to effectively communicate with parents, peers, and other adults about sexual health issues
18. How to resist peer pressure and media influences to engage in undesired sexual behaviors
19. How to manage conflicting messages from family, peers, school, and community regarding sexual health
20. Pregnancy outcome options including parenting, adoption, and abortion
21. Minor's access to reproductive health care in Ohio
22. Facts and myths about adoption
23. The process of creating an adoption plan
24. The spectrum of adoption plans from open and ongoing contact to traditional closed adoption
25. The effects of adoption on members of the triad including the birth parents, adoptee, and adoptive parent(s)
26. The barriers associated with considering adoption as a viable pregnancy option
27. Personal, societal, and cultural views toward adoption
28. Where and how to access information about adoption and/or make an adoption plan in Ohio

SECTION II: SEXUAL HEALTH AND ADOPTION PROGRAM SELECTION

When selecting a sexual health and adoption education program ensure that the program:

1. Follows the guidelines listed in Section I
2. Is evidence-based and research supported
3. Has been shown to positively impact sexual behaviors in adolescents including delaying the onset of sexual activity, decreasing unprotected sex, and reducing the frequency of sex and number of partners
4. Uses interactive activities that are developmentally appropriate
5. Presents information that is gender neutral (applies equally to males and females) and is sensitive to differences in sexual orientation and sexual experience
6. Includes skill based activities
7. Meets the content in Section I about adoption education*

*There are currently no adoption education programs evaluations for adolescents that have been published in the peer reviewed literature. Due to the lack of published research articles on school/community based adoption education programs, any program under consideration should follow all of the adoption specific guidelines in Section I.

SECTION III: SEXUAL HEALTH AND ADOPTION PROGRAM IMPLEMENTATION

When implementing a sexual health and adoption education program ensure that the program:

1. Has support from relevant stakeholders
2. Provides adequate training and ongoing support to all educators involved in program delivery
3. Supervises all educators to ensure program fidelity
4. Is presented in a culturally sensitive manner and is respectful of personal beliefs
5. Addresses controversial topics in a nonjudgmental and respectful manner
6. Is integrated with the available resources in the program delivery site