



School Health Advisory Council

**Teen Pregnancy
and
Sexuality
Instruction**



Human Sexuality Education

- Teen Pregnancy has many causes
- Making true and lasting progress in preventing teen pregnancy requires a combination of programs
- Must influence values and popular culture, engage parents and schools



**OCISD wants a comprehensive
program that serves the total
population.**

**Most programs
serve only a
fraction of all the
kids in the area
who are at risk.**



**Some programs
can make a
difference.**



So, what is our process in developing the curriculum?

1. Involve multiple people
2. Use people with expertise in theory, research, and sex and STD/HIV education
3. Assess the needs of the target group
4. Use a logical model that addresses the health goals, the types of behaviors affecting those goals, the risk and protective factors, and activities to change those risk and protective factors.
5. Design activities consistent with community values



Also,

6. Provide staff time, staff skills, facility space and supplies
7. Secured at least minimal support from authorities such as health departments, schools, community
8. Selected educators, trained them, provided monitoring, supervision, and support.
9. Implemented virtually all activities with reasonable fidelity.



The program must...

1. Focus on clear health goals—prevention of STD/HIV, pregnancy, or both.
2. Give clear messages about behaviors (primarily abstinence and protection knowledge)
3. Create a safe social environment for young people to participate
4. Teaching methods must be sound and help to personalize the information that targets the risks and protective factors
5. Activities appropriate to the teens' age



Pregnancy Decline

- **Teen pregnancy and birth rates have dropped by **33%** since early 1990s.**
- **Part of the credit goes to the many pregnancy and STD/HIS prevention programs.**



Emerging Answers 2007

- **Summarized research results on sexual risk behavior and its consequences.**
- **Describes programs that have reduced teen sexual risk-taking and teen pregnancy or STD.**



Statistics

- **47%** of all high school students report having sex at least once
- **80%-90%** of teens report using contraception most of the time
- **63%** report having sex by the spring of their senior year of high school
- **70%** take a pill every day of 15-19 year old girls relying upon “the pill”

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- **764,000** girls under age 20 become pregnant each year. **80%** of these pregnancies are **unintended.**

- **40 of every 1,000** girls age 15-19 gave birth in 2005 (last year of this statistic)



Teen Mothers

- **Likely to drop out of school**
- **Less likely to go to college**
- **More likely to have large families**
- **More likely to be single**
- **Experience many, many negative consequences**



Children of Teen Mothers

- **Less support at home**
- **Lower intellectual development**
- **Less education**
- **More behavior problems**
- **Higher rates of incarceration (boys) and adolescent childbearing**



Problems!!!!


- 15-24 age account for 25% of sexually active population and 50% of all new cases of STDs.
- **Increase in HIV/AIDS**
- STDs lead to infertility, ectopic pregnancy, cancer, and other health problems
- Long term emotional suffering
- **Not curable: herpes, HIV**



Types of Sexual Behavior that Affect Pregnancy and STD

- **Two areas:**

- **Abstinence which enables teens to avoid pregnancy**
- **Correct and consistent use of contraceptions**

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- **Communities need to send clear, consistent messages about appropriate sexual behavior.**
 - **Our schools want to be the leader in this message.**



Teens Own Beliefs

- **Of all the know risk and protective factors, teens' own sexual beliefs, values, attitudes, and intentions are the most strongly related to sexual behavior.**



The Comprehensive Plan

- **80%** of the U.S. adults believe that a comprehensive sex education program, which emphasizes abstinence, but also contraceptive use, should be implemented in schools.



Impact of Comprehensive Programs

- 47% delayed initiation of sex
- 29% reduced frequency of sex
- 46% reduced # of sexual partners
- 47% reported increased use of condoms
- 44% increased use of contraceptives use
- 63% showed reduction unprotected sex
- 64% found reduced instances of risky sexual behavior
- Comprehensive programs were found to be effective with younger as well as older teens.



The Good News

- **66%** of the curriculum based sex and STD/HIV education programs studies have had positive effects on teen sexual behavior.

The importance of sex ed

Gerry Garibaldi's column makes a salient point that our society has really embraced the idea of teen pregnancy. Ironically, Garibaldi, a teacher, never addresses the lack of comprehensive and accurate sex education as a significant factor in the frequency of teen pregnancy. Nowhere is this more urgent than in Texas, where we boast the third-highest rate of teen pregnancy in the country and first in the rate of repeat teen births.

We, not coincidentally, also have ineffectual requirements for sex education. The cost is tremendous in wasted opportunity for the teen parents who have a hard time graduating from high school, in public support and in the lives of their children, which are much more likely to include poverty, abuse and jail than children of older parents.

We can act now in Texas by letting our Legislature know that we want it to support "Education Works," HB 1624 and SB 852, which require school sex education, if offered, to be age-appropriate and evidence-based; to emphasize abstinence; and include methods to prevent STDs and pregnancy (something *not* in curriculum requirements now).

*Terry Goltz Greenberg, chair,
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Abstinence Programs

- Encourage and expect abstinence
- This is the safest choice
- Encourages contraception if sexually active
- No evidence that abstinence delays sex, reduces partners, or return to abstinence
- Many programs improved teens' values about abstinence
- Do not conclude that abstinence programs are ineffective
- **32 of 48 comprehensive programs** had positive behavioral effects



Comprehensive Programs

- **Emphasizing abstinence and protection for those who do have sex is a realistic, effective approach that does not appear to confuse young people.**

Parents and Teenagers and the Dilemma

- **Have remarkably few conversation about sexual matters due to both feeling uncomfortable**
- **Participation in a program enhances these conversations**





Focus on Nonsexual Factors are Reinforced by the School

- Many nonsexual risk and protective factors affect teens' sexual behavior:
 - Good school performance
 - Positive plans for the future
 - Strong connections to family, school, faith all reduce pregnancy and birth rates, increase education and career opportunities, increase connection between young people to responsible adults and institution such as the family, schools and community organizations



To reduce teen pregnancy and STDs:

- Focus on sexual risk
- Focus on protective factors
- Address non-sexual factors
- What are resources in the community
- Address incorrect beliefs, negative attitudes or lack of skills



This must be our goals

- **For decades, dedicated adults have worked with teens to prevent unintended pregnancy.**
- **Their efforts have been rewarded with declining rates of pregnancy.**
- **Prevention efforts have also result in lower rates of some STDs**



OCISD Goals

- **Help teens avoid pregnancy and STDs**
- **Help teens make a more successful transition to adulthood**
- **Prepare to be the parents of the next generation**