

# **Developing Guidelines for Comprehensive Sexuality Education**

**SIECUS**

Sexuality Information and Education Council of the United States

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## **ACKNOWLEDGMENTS**

This handbook is the result of more than 10 years of experience in developing, promoting, and adapting *Guidelines for Comprehensive Sexuality Education*. SIECUS acknowledges and expresses profound gratitude to those who have provided support, vision, guidance, and countless hours on such guidelines programs:

- Debra W. Haffner, former SIECUS president and chief executive officer, and William L. Yarber, former SIECUS Board chair, for providing the vision, initiative, and direction for the first *Guidelines* project in the United States.
- Members of the National Guidelines Task Force for providing the foundation for the first *Guidelines* and volunteering their time, experience, energy, and commitment to promoting sexuality education and sexual health.
- SIECUS's partners and their respective National Guidelines Task Forces responsible for adapting guidelines in other countries:
  - In Brazil.  
Grupo de Trabalho e Pesquisa em Orientação Sexual (GTPOS), whose efforts and experience have made a profound impact on the lives of Brazilian youth.
  - In Nigeria.  
Action Health Incorporated (AHI), whose visionary leadership has advanced and promoted the health of Nigerian youth.
  - In Russia.  
The Center for Formation of Sexual Culture, whose tireless efforts have led the way for improving the sexual health of adolescents in Russia.
- The John D. and Catherine T. MacArthur Foundation for its generous support of SIECUS's guidelines adaptation projects.
- The William and Flora Hewlett Foundation for its generous support of SIECUS's international program and the development of this handbook.

## **INTRODUCTION**

Educators, service providers, and health professionals worldwide are advocating that young people receive comprehensive sexuality education to help them become sexually healthy adults and to help them practice safer sexual behaviors, delay the onset of sexual intercourse, and reduce unplanned pregnancy and sexually transmitted disease (STD) rates. Though there is often consensus that young people should receive such education, few actually do.

This is primarily due to a lack of understanding and consensus about sexuality education goals, components, and standards. Educators, providers, and policymakers frequently ask: “What are the goals and objectives of such education?” “What are the topics?” “What are the developmental messages?” “When and how should young people receive these messages?”

This handbook, *Developing Guidelines for Comprehensive Sexuality Education*, will answer those questions as it shares SIECUS’s experiences in developing guidelines in the U.S. and internationally.

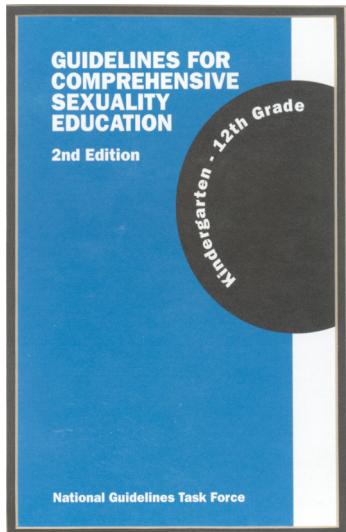
## THE US GUIDELINES

In 1990, the Sexuality Information and Education Council of the United States (SIECUS) convened the National Guidelines Task Force to develop the first framework for sexuality education in the United States.

This Task Force included 20 professionals from the fields of medicine, education, sexuality, and youth services. These individuals represented such national organizations as the American Medical Association, the Planned Parenthood Federation of America, the National Education Association, the American Social Health Association, and the U.S. Centers for Disease Control and Prevention.

In 1991, the resulting *Guidelines for Comprehensive Sexuality Education Kindergarten-12<sup>th</sup> Grade* were published. Tens of thousands of educators, program planners, and policymakers have since used them to improve or develop comprehensive sexuality education programs in communities throughout the United States.

In 1996, SIECUS adapted the *Guidelines* for Hispanic, Latino communities, in the United States and subsequently published the *Guía Para Una Educacion Sexual Integral Para La Juventud Hispana/Latina: Kindergarten-12 Grado*. It was distributed throughout the nation as part of SIECUS' work with communities of color about sexual health issues.



## **GUIDELINES INTERNATIONALLY**

Since 1991, SIECUS has worked with organizations in Brazil, Nigeria, and Russia to develop consensus on the components of comprehensive sexuality education.

Simply translating the *Guidelines* is not appropriate because of the culturally specific aspects of sexuality. Messages developed for one setting may not suit another. SIECUS's *Guidelines* were used in these countries as a template for adaptation in national, local, or cultural settings.

**Brazil.** In 1993, a core group of three leading Brazilian nongovernmental organizations (NGOs)-Grupo de Trabalho e Pequisa em Orientação Sexual (GTPOS), the Brazilian Interdisciplinary Association on AIDS (ABIA), and the Center for Study and Communication on Sexuality and Human Reproduction (ECOS)-joined together to form the National Forum on Education and Sexuality.

Under the direction of this coalition of 17 nationally respected NGOs, the *Guia de Orientação Sexual* was published in 1995. Because of widespread support, the Brazilian Ministry of Education distributed the *Guia* to 5,000 public secondary schools nationwide.

**Nigeria.** In 1995, Action Health Incorporated (AHI) of Nigeria, a leading NGO working on adolescent sexual and reproductive health, led the effort to form the National Guidelines Task Force that included such organizations as the Nigerian Medical Association, the Planned Parenthood Federation of Nigeria, and the Nigerian Ministry of Education.

In 1996, the *Guidelines for Comprehensive Sexuality Education in Nigeria* were released throughout the country. Since then, through AHI's and other NGOs' efforts, the Nigerian government has adopted a policy of requiring comprehensive sexuality education based on the *Nigerian Guidelines* for all Nigerian youth.

**Russia.** In 1997, Russian NGOs developed the *Framework for Sexuality Education for Russian Youth*. Led by the Center for Formation of Sexual Culture, a coalition of 19 NGOs outlined the objectives, concepts, and topics to include in comprehensive sexuality education programs for Russian youth. The development process provided a critical opportunity for groups to work together.

**Other countries.** SIECUS's *Guidelines* have also been adapted in Iceland, The Netherlands, and the Czech Republic.

## WHY DEVELOP GUIDELINES?

Adolescents 10 to 19 years of age make up 20 percent of the world's population. Young people lack the education, tools, skills, and information they need to become sexually healthy adults. This often results in harmful consequences for them, their partners, their families, and their communities.

The personal, social, community, and health costs related to lack of comprehensive sexuality education, information, and services are high. Consider these statistics:

- Nearly 17 million births occur to adolescent girls every year.
- The risk of death during childbirth is 24 times higher among mothers 17 years of age or younger than among those 20 years of age or older.
- More than 50 percent of women in sub-Saharan Africa and Latin America give birth before 20 years of age. Pregnancy-related complications are the major cause of death of young women worldwide.
- Over 585,000 women — 90 percent of whom are from developing regions — die from causes related to pregnancy, including unsafe abortions.
- Throughout the world, five young people 10 to 24 years of age are infected with HIV *every minute*; that translates into 7,000 every day or 2.6 million new infections every year.
- Of the 30 million people living with HIV, at least a third are young people.

Both international and national studies and reviews have indicated that sexuality education programs can help enhance and promote safer sexual behavior. Specifically, these studies have found that such programs:

- can help delay first intercourse and protect sexually active youth from STDs, HIV, and unplanned pregnancies.
- can lead to an increase in use of contraceptives and safer sexual practices.
- do not lead to an increase in sexual intercourse or activity among youth.

Studies have shown that these programs share criteria. Specifically, they:

- target specific behaviors.
- are based on a theoretical model for behavior change.
- provide information about the risks of unprotected sexual intercourse and how to reduce risk.
- provide an opportunity to practice skills and discuss meaningful and realistic situations.
- address the influence of the media, peers, and culture on sexual behaviors and decisions.
- develop and reinforce beliefs and values that support decisions to be abstinent and/or use protection.
- include opportunities to practice communication and negotiation skills.

While working on *Guidelines* adaptations with various countries, SIECUS found that each had similar expectations of sexuality education even though each had different developmental messages and cultural and societal norms. All agreed that sexually healthy adults:

- appreciate their own body.
- seek more information about reproduction as needed.
- affirm that human development includes sexual development that may or may not include reproduction or genital sexual experience.
- interact with both genders in respectful and appropriate ways.
- affirm their own sexual orientation and respect the sexual orientation of others.
- express love and intimacy in appropriate ways.
- develop and maintain meaningful relationships.
- avoid exploitative or manipulative relationships.
- make informed choices about family options and lifestyles.
- exhibit skills that enhance personal relationships.
- identify their values and live according to them.
- take responsibility for their own behavior.

- practice effective decision-making.
- communicate effectively with family, peers, and partners.
- enjoy and express their sexuality throughout life.
- express their sexuality in ways congruent with their values.
- discriminate between life-enhancing sexual behaviors and those that are harmful to self and/or others.
- express their sexuality while respecting the rights of others.
- seek new information to enhance their sexuality.
- use contraception effectively to avoid unintended pregnancy.
- prevent sexual abuse.
- seek early prenatal care.
- avoid contracting or transmitting STDs, including HIV.
- practice health-promoting behaviors, such as regular check-ups, breast and testicular self-exams, and early identification of potential problems.
- demonstrate tolerance for people with different sexual values and lifestyles.
- exercise democratic responsibility to influence legislation dealing with sexual issues.
- assess the impact of family, cultural, religious, media, and societal messages on their thoughts, feelings, values, and behaviors related to sexuality.
- promote the rights of all people to accurate sexuality information.
- avoid behaviors that exhibit prejudice and bigotry.
- reject stereotypes about the sexuality of diverse populations.

## **Case Study: Nigeria**

### **'Nike Esiet**

### **Director Action Health Incorporated Lagos, Nigeria**

In 1992, I met with Debra Haffner, president of the *Sexuality Information and Education Council of the United States (SIECUS)* at the *Communicating Sexuality Education Forum* in Mexico City sponsored by the John D. and Catherine T. MacArthur Foundation.

At the time, Action Health Incorporation (AHI) was helping to raise awareness on the consequences of unprotected sexual activity in Nigeria with emphasis on the Lagos area. This effort had highlighted the need to address the issue of the enhancement of the sexuality of Nigerian adolescents to improve their sexual health.

This effort was mindful of the peculiarities of the Nigerian situation that included:

- the lack of discussion of sexuality in the public domain.
- the religious perceptions about sexual activity among unmarried adolescents.
- the weakening of traditional norms, especially that of chastity before.
- marriage, due to the influence of rapid urbanization and technological advancement.

Forming a collaborative effort was the first challenge in ensuring mutual trust and respect while maintaining a focus on the objective of getting like-minded organizations and persons to work to bring comprehensive sexuality education to the public.

An AHI delegation reached out to meet and bring together key players within the sexual and reproductive health sectors of the NGO movement in Nigeria. A National Advisory Committee was set up, consisting of the following organizations: AHI; the Association for Reproductive and Family Health; the National Association of Nigerian Nurses and Midwives; the Nigerian Medical Association; the Planned Parenthood Federation of Nigeria; the Society for Women and AIDS in Africa, Nigeria Chapter; and the World Health Organization, Nigeria Office.

The committee's mandate was to develop the format of a document outlining the *Guidelines for Comprehensive Sexuality Education in Nigeria*, using the U.S. *Guidelines* as a model. The outcome was a document that incorporated Nigerian cultural insights in terms of values, attitudes, knowledge, and behaviors.

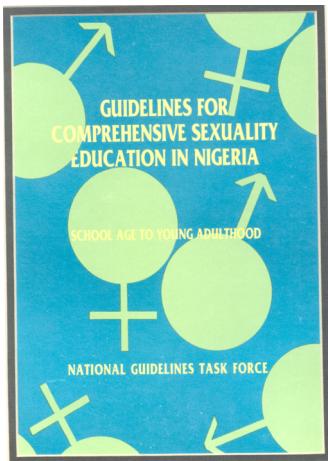
Next, the National Task Force—consisting of 29 persons and organizations—was formed. It reflected the diversity of Nigeria in terms of regions, religions, and socio-cultural groups. It also included government agencies. The resulting product of two guidelines reviews was circulated to over 100 national organizations for their endorsement. The *Nigerian Guidelines* were then printed and released to the public.

The *Nigerian Guidelines* are a landmark document. Existing programs as well as new programs have used the *Nigerian Guidelines* in diverse ways that include:

- reviewing existing programs.
- training educators and providers.
- developing curricula.

The National Council of Education, Nigeria's highest policymaking body on education, has subsequently approved a provision for the integration of comprehensive sexuality education into public school curricula using the *Nigerian Guidelines* framework.

As a result of the NGO collaboration and advocacy efforts, national Nigerian policymakers are convinced that comprehensive sexuality education leads to positive behavior change, especially necessary now that Nigeria needs to address the HIV/AIDS epidemic in a more proactive manner.



## **The Purpose of Guidelines**

Sexuality education guidelines serve many purposes. Specifically, they will:

- provide a framework for comprehensive sexuality education programs, curricula, and policies.
- help evaluate existing or new programs, curricula, or policies on comprehensive sexuality education.
- contribute toward assuring greater quality and uniformity of comprehensive sexuality education programs for all young people;
- unify and build upon different efforts, experiences, and perspectives of many organizations and professionals working on comprehensive sexuality education.
- utilize the expertise, experiences, and research of experts and educators to develop positive, scientific, medically accurate programs.
- enhance and strengthen the credibility of programs through broad-based consensus on comprehensive sexuality education.
- foster collaboration among colleagues, experts, and professionals in sharing information, experiences, insight, research, and resources on comprehensive sexuality education.
- develop a collective, broad-based voice to advocate for sound comprehensive sexuality education programs and policies or change existing ones.
- build national, provincial, or local coalitions to promote and support comprehensive sexuality education.
- educate communities, the public, the media, and policymakers on comprehensive sexuality education.

# The Usefulness of Guidelines

Guidelines are useful in a variety of ways, they include:

- **Development and Evaluation**

They will help people develop or evaluate new or enhance existing:

- curricula.
- programs.
- services.
- publications.
- policies.
- guidelines.

- **Education, Training, and Advocacy**

They will help people educate, train, discuss, and promote comprehensive sexuality education with:

- communities.
- parents.
- teachers.
- policymakers.
- media.
- partner nongovernmental organizations (NGOs).
- religious and community leaders.
- medical and health providers.
- government agencies, leaders, and ministries.
- service providers.
- youth service and advocacy organizations.
- general public.
- founders and foundations.
- school administrators and principals.
- local community and district government councils.

- **Research**

They will help researchers plan and conduct studies and evaluations of programs in different sectors including:

- public health.
- education.
- government.
- health and medical services.
- social marketing and media.

## **COMPREHENSIVE SEXUALITY EDUCATION**

Those interested in developing sexuality education guidelines must have a clear concept and definition of comprehensive sexuality education. SIECUS defines such education as the lifelong process of acquiring information and forming attitudes, beliefs, and values about identity, relationships, and intimacy.

It includes the biological, socio-cultural, psychological, and spiritual dimensions of sexuality. It addresses sexual development, reproductive health, interpersonal relationships, affection, intimacy, body image, and gender roles.

The four primary goals of comprehensive sexuality education are:

- ***to provide information about human sexuality***, including human development, relationships, personal skills, sexual behavior, sexual health, and society and culture.
- ***to provide an opportunity to question, explore, and assess sexual attitudes*** in order to develop values, increase self-esteem, create insights concerning relationships with members of both genders, and understand obligations and responsibilities to others.
- ***to help develop interpersonal skills—including communication, decision-making, assertiveness, and peer refusal skills—and help to create satisfying relationships.***
- ***to help create responsibility regarding sexual relationships***, including addressing abstinence, resisting pressure to become prematurely involved in sexual intercourse, and encouraging the use of contraception and other sexual health measures.

## THE STRUCTURE AND COMPONENTS OF GUIDELINES

The starting point for the development of guidelines is the awareness that the primary goal of comprehensive sexuality education is the promotion of sexual health for young people.

Guidelines provide an organizational framework of human sexuality and family living within age-appropriate developmental levels. This framework includes:

- **Key Concepts** that represent the most general knowledge about human sexuality and family living. They encompass the components of the broad definition of sexuality. Examples of key concepts are human development; relationships; personal skills; sexual behavior; sexual health; and society and culture.
- **Life Behaviors** that are the desired actions that represent outcomes of instruction. They are needed for each key concept. They reflect actions of students either following instruction or during adulthood.
- **Subconcepts** that are listed under the key concepts related to each specific topic.
- **Topics** that relate to each key concept. A topical outline for a comprehensive sexuality education program is usually generated by listing the key concepts with their associated topics.
- **Developmental Messages** under each subconcept that are appropriate for each age group. These messages are defined at the level where they are first discussed. (The guidelines assume that all developmental messages are reinforced at subsequent levels through classroom activities.)

# The U.S. Guidelines

The key concepts and topics recommended in the *Guidelines for Comprehensive Sexuality Education* in the United States are:

## Key Concept 1: Human Development

### Topics

- Reproductive anatomy and physiology.
- Reproduction.
- Puberty.
- Body image.
- Sexual identity and orientation.

## Key Concept 2: Relationships

### Topics

- Families.
- Friendship.
- Love.
- Dating.
- Marriage and lifetime commitments.
- Raising children.

## Key Concept 3: Personal Skills

### Topics

- Values.
- Decision-making.
- Communication.
- Assertiveness.
- Negotiation.
- Looking for help.

## Key Concept 4: Sexual Behavior

### Topics

- Sexuality throughout life.
- Masturbation.
- Shared sexual behavior.
- Abstinence.
- Human sexual response.
- Fantasy.
- Sexual dysfunction.

## Key Concept 5: Sexual Health

### Topics

- Contraception.
- Abortion.
- STDs, including HIV infection.
- Sexual abuse.
- Reproductive health.

## Key Concept 6: Society and Culture

### Topics

- Sexuality and society.
- Gender roles.
- Sexuality and the law.
- Sexuality and religion.

- Diversity.
- Sexuality and the arts.
- Sexuality and the media.

# **DEVELOPING GUIDELINES FOR COMPREHENSIVE SEXUALITY EDUCATION**

This 14-step approach to developing country-specific guidelines for comprehensive sexuality education is based on SIECUS's work in the U.S. and internationally.

## **STEP 1**

### **Select Key Players**

Careful planning is central to the success of guidelines projects. Such planning should involve these key players:

#### **The Lead Agency**

A strong, central agency should coordinate guidelines efforts. This agency will strengthen the process by securing the support and participation of other organizations and individuals in the country. A lead agency should:

- have national recognition, expertise, and credibility in the field of sexuality education and sexual health.
- have the respect and trust to bring other NGOs, individuals, and professionals into a collaborative project.
- have the organizational capacity and infrastructure to coordinate meetings.
- provide staff support; communicate with others; and provide logistics.

#### **The Coordinating Committee**

A coordinating committee will assist the lead agency in bringing other organizations and individuals into the guidelines development process.

The lead agency is responsible for bringing together this committee consisting of three to four NGOs (or experts) that are leaders in such fields as sexuality, reproductive health, family planning, HIV/ AIDS prevention, education, or youth services.

Important qualities of NGOs selected to serve on the coordinating committee are:

- strong leadership in the NGO sector.
- knowledge of sexuality issues in the respective country.
- strong commitment to sexuality issues and education.
- trust and credibility within the NGO community to bring other NGOs into a larger collaborative effort.

The primary responsibility of the committee is to identify and select other NGOs and individuals for the Task Force that will ultimately develop the guidelines.

#### **The Task Force**

The Task Force is the broad-based group of NGOs, individuals, and experts that will develop the guidelines; formulate the concepts, subconcepts, and topics of sexuality education; establish the values that should underlie sexuality education; generate the life behaviors and developmental messages for each concept; review, edit, and approve the final document; and identify and solicit endorsements from other NGOs, institutions, and individuals. This Task Force (also referred to as coalition, working group, or forum) should include national, state/provincial, and local leaders and experts from such fields as:

- adolescent health.
- child development.
- development.
- family planning.
- government ministries.
- HIV/AIDS.
- law.
- medicine.

- mental health.
- public health.
- research.
- religion.
- sexuality.
- sexuality education.
- universities.
- women's health.

The Task Force members can include individuals from such groups as national and family planning associations; national doctors, nurses, and midwives associations; social, medical, scientific institutions; universities; ministries of health and education; and teacher, parent, and education associations.

#### **Endorsers**

Endorsers are well-known and respected organizations, institutions, associations, and individuals in fields that will lend their names to support the final guidelines document to give it credibility, impact, and acceptance throughout the country.

They are usually identified, solicited, and secured by the Task Force after the development of the final version of the guidelines.

Advance funding is recommended for guidelines projects. The total budget will vary depending on the lead agency expenses as well as on other expenses such as travel, communication, administration, and publishing. It takes approximately 18 months to complete a guidelines project - from the scheduling of the first Task Force meeting to the publication and release of the guidelines themselves.

## **STEP 2**

### **Hold a Coordinating Committee Meeting**

The coordinating committee should first meet to develop the objectives and goals of the guidelines project, to determine specific roles and responsibilities for everyone involved, and to create a 20 to 30 member Task Force. It is important to have a Task Force to collaborate on the guidelines project because such a joint effort will:

- ensure that the sexual health and well-being of young people is in everyone's and every sector's interest.
- bring together many perspectives and experiences that are important to developing well-rounded guidelines.
- draw on each other's resources and networks.
- build support for each other's individual efforts in promoting comprehensive sexuality education.
- bring together diverse organizations and people that might otherwise not have worked together.
- enhance the ability to promote comprehensive sexuality education nationally.
- guarantee greater acceptance and support for the final published guidelines
- lay the foundation for future collaboration
- help develop a consensus and a collective vision on comprehensive sexuality education.

Either the lead agency or the coordinating committee should invite all Task Force members and explain the guidelines project, including its goals, process, and expectations.

## **STEP 3**

### **Hold a Task Force Meeting**

During the first Task Force meeting, members should:

- develop a unified vision of comprehensive sexuality education.
- generate and build a consensus on the guidelines components.

- identify areas of work relating to research, programs, and policies.
- identify potential challenges to the guidelines process, consensus, and development create solutions to these challenges.
- share resources, strategies, and experiences from different fields.
- lay a foundation for future collaborative efforts.

This first Task Force meeting should last two to three days at a retreat center in an area convenient to all members. If this is not possible, the Task Force should hold a series of meetings over several months at a convenient location. Because a well-attended meeting is essential to the success of the guidelines project, the lead organization should provide Task Force members with funds for transportation, lodging, and incidental expenses. Such costs are often a problem for many organizations and individuals.

At a minimum, the Task Force meeting agenda should answer these questions:

- What is comprehensive sexuality education?
- What are the primary goals of comprehensive sexuality education?
- What are the desired outcomes of comprehensive sexuality education?
- What are the values that should underlie comprehensive sexuality education?
- What are the key concepts of comprehensive sexuality education?
- What are the broad topics in comprehensive sexuality education programs?

By the conclusion of the first Task Force meeting, members should have developed a consensus on the life behaviors, values, key concepts, and topics of comprehensive sexuality education.

Task Force members may benefit from receiving copies of the SIECUS, Brazilian, or Nigerian *Guidelines* prior to the meeting. These published frameworks can serve as a template or springboard for discussion. Members should understand, however, that their goal is to develop a national, culturally appropriate framework, not copy guidelines from another country.

After the first Task Force meeting, the lead agency should summarize the discussion and the major decisions in a cohesive document and circulate it for comment to each member.

## **Sample Agenda Task Force Meeting Introductions**

1. Welcome and Overview of Guidelines Project
2. Introductions
3. Goals of Guidelines Process
4. Expectations of the Task Force Members
5. Process for Developing Guidelines
6. Definition, Structure, and Components of Comprehensive Sexuality Education and Guidelines
7. Values That Underlie Comprehensive Sexuality Education Programs
8. Life Behaviors of a Sexually Healthy Adult

*Group breakout sessions.* Groups of four to five individuals generate lists of desired life behaviors.  
*Large group discussion.* Large group develops consensus on a final list.

9. Goals of Comprehensive Sexuality Education
10. Key Concepts of Comprehensive Sexuality Education

*Group breakout sessions.* Groups of four to five individuals generate lists of desired key concepts.  
*Large group discussion.* Large group develops consensus on a final list.

11. Topics of Comprehensive Sexuality Education

*Large group discussion.* Large group develops consensus on topics

12. Conclusion

Review timeline to draft, edit, publish, and distribute guidelines. Review of future expectations of members.

## **Task Force Meeting Tips**

- Hold it at an easily accessible retreat, convenient for people to attend.
- Schedule it at a time when there are no other major conferences, meetings, or holidays.
- Consider seasonal issues like rain or difficult or dangerous to travel.
- Provide at least four months advance reminder cards.
- If possible, arrange for a meeting coordinate the logistics and travel arrangements.

## **STEP 4**

### **Develop and Draft Guidelines**

The lead agency—preferably with the help of a core group of education experts or curriculum specialists—should draft the developmental messages for comprehensive sexuality education based upon the consensus on the life behaviors, key concepts, values, and topics developed by the Task Force.

#### **Examples of: U.S. and Nigerian *Guidelines* Age Levels**

The U.S. and Nigerian *Guidelines* use the following age levels:

##### **Level 1**

*Nigeria*: childhood, ages 6 through 8

*United States*: middle childhood, ages 5 through 8; early elementary school

##### **Level 2**

*Nigeria*: preadolescence, ages 9 through 12

*United States*: preadolescence, ages 9 through 12; upper elementary school

##### **Level 3**

*Nigeria*: adolescence, ages 13 through 17

*United States*: early adolescence, ages 12 through 15; middle school/ junior school

##### **Level 4**

*Nigeria*: young adult, ages 18 through 24

*United States*: adolescence, ages 15 through 18; high school

## **Examples of Nigerian *Guidelines* Developmental Messages**

These developmental messages on the human body are excerpted from the *Nigerian Guidelines*:

### **Key Concept: Human Development**

#### **Topic**

Reproductive Anatomy and Physiology

#### **Subconcept**

The human body has the capability to reproduce as well as to give and receive sexual pleasure.

### **Developmental Messages**

#### **Level 1**

- Each body part has a correct name and specific function.
- A person's genitals, reproductive organs, and genes determine whether the person is male or female.
- Boys and men have a penis, scrotum, and testicles.
- Girls and women have a vulva, clitoris, vagina, uterus, ovaries, and breasts. Girls and boys have body parts, which, when touched, make them feel good

#### **Level 2**

- The maturation of external and internal reproductive organs occurs during puberty.
- At puberty, boys begin to ejaculate and girls begin to menstruate.

#### **Level 3**

- The sexual response system differs from the reproductive system.
- Some of the reproductive organs provide pleasure as well as reproductive capability.
- Sexual differentiation occurs early in prenatal development.
- Chromosomes determine whether a developing fetus will be male or female
- For both sexes, chromosomes influence growth and development as well as sexual and reproductive function.

#### **Level 4**

- A woman's ability to menstruate and reproduce ceases at menopause; a man can usually reproduce throughout his life.
- Both men and women can experience sexual pleasure throughout their life
- Most people enjoy giving and receiving sexual pleasure.

## **STEP 5**

### **Solicit Task Force Comments**

The lead agency should send a draft of the guidelines' developmental messages to the Task Force for comments, additions, and deletions.

## **Step 6**

### **Incorporate Revisions**

The lead agency should incorporate the comments, additions, and deletions into a second draft. If the changes are substantive or raise questions that are difficult to resolve, the lead agency may want to schedule another meeting of the Task Force to develop consensus.

## **Step 7**

### **Complete Guidelines Draft**

The lead agency should revise the draft and circulate a final version to the Task Force.

The guidelines process may involve several drafts and revisions, especially when many perspectives are involved. Strong, comprehensive guidelines may reflect many changes, revisions, and recommendations.

## **STEP 8**

### **Add New Guidelines Sections**

The lead agency, the coordinating committee, or the Task Force may wish to develop additional guidelines sections. They may include:

- Statistics and status of sexuality education in the local or national setting.
- Bibliography of country-specific resources.
- Task Force member list.
- Guidelines introduction.
- Usage Suggestions.
- Outline of guidelines development process.
- Glossary of terms.
- Helpful organizations.

## **STEP 9**

### **Seek Final Guidelines Approval**

The lead agency should send the final version of the guidelines to the Task Force for approval. Members should sign the attached approval form and agree to have their names published in the guidelines.

## Sample Approval Form

Dear Task Force Member:

We are pleased to send you the final version of the *Guidelines for Comprehensive Sexuality Education*. They reflect the input of the National Guidelines Task Force and are ready for publication.

Please review this final version, sign the attached form, and return it to (name of lead agency) by (date).

By signing this form, you give your approval to be listed as a Task Force member in the final publication.

Thank you.

Sincerely,

Director  
Guidelines Lead Agency

As a member of the Guidelines Task Force,

Name of Organization/Individual

approves the final version of the guidelines and agrees to being listed as a National Guidelines Task Force member in the final document.

Signature

Date

Title

Organization

## **STEP 10**

### **Secure Endorsements from National Organizations**

After publication of the guidelines, the lead agency should send copies to organizations to solicit their support and endorsement. This is critical to a broad acceptance of the guidelines as well as sexuality education itself.

Ideally, the Task Force and coordinating committee will generate a list of at least 100 experts, professional organizations, and government leaders who might endorse the guidelines.

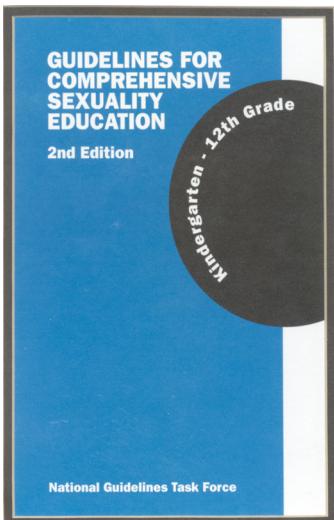
Such endorsements have the potential to enhance subsequent advocacy efforts relating to comprehensive sexuality education programs. The *Nigerian Guidelines* endorsers included the African AIDS Research Network, the Family Health Organization, the Federation of Female Nurses and Midwives of Nigeria, the Pediatric Association of Nigeria, the Society of Obstetricians and Gynecologists of Nigeria, and the Women, Law and Development Center.

It is also important to find an expert from the field or a high-level policymaker to write a foreword that will lend credibility to both the guidelines and to comprehensive sexuality education programs. For example, a former Nigerian Minister of Health wrote a positive, affirming foreword to the *Nigerian Guidelines*.

## STEP 11

### Publish Guidelines

Once endorsers are secured, the lead agency should begin the publication process, including hiring a graphics designer and printer. It should order enough copies for distribution to a wide audience, including NGOs, policymakers, government institutions, community leaders, educators, and the media. Over 20,000 copies of *Guidelines* were distributed in the United States and over 14,000 copies were distributed in Brazil.



## Step 12

### Distribute and Promote Guidelines

Once the guidelines are published, the lead agency should develop both a broad distribution and publicity plan. This should include providing complimentary copies to the Task Force; local, provincial/state, and national education and health departments; and leading NGOs in such fields as sexuality, health, youth development, and reproductive health. Some specific promotion suggestions include:

- **A public launching ceremony or event**  
The lead agency should hold a public launching ceremony or event to officially release the guidelines. This is a good way to generate interest in and publicity about both the guidelines and sexuality education. Nigerian organizations staged such an event. Guests should include the media, government officials, political leaders, community leaders, and colleague organizations.
- **A press conference**  
The lead agency may want to write a news release and hold a news conference for leading print and broadcast journalists. News releases were distributed in Brazil, Nigeria, and the United States announcing the publication of those *Guidelines*. The media plays an important role in shaping people's views of sexuality. Key spokespeople should participate in the news conference to answer questions from the media and the public about the guidelines and sexuality education.
- **A media training workshop**  
The media often lacks the background to write about sexuality education. The lead agency can help by providing a training workshop for media representatives. Nigerian organizations held such a workshop when they released the *Nigerian Guidelines*. It helped the media write more effectively about sexuality education.
- **A colleague training workshop/roundtable**  
Colleagues, partner NGOs, and providers will also need information about both the guidelines and sexuality education. The lead agency can help by providing a roundtable discussion or a training workshop for them.

## **STEP 13**

### **Prepare for Opposition to Guidelines**

Sexuality education for youth is often a controversial issue in many communities and countries. It is very likely that some organizations and individuals will oppose the release of guidelines. The best way to counter such opposition and negative publicity is to prepare an opposition strategy, including:

- working with coalitions and individuals to create a strong, unified voice against opposition.
- educating the media, policymakers, and the community on comprehensive sexuality education.
- holding a public forum or meeting on comprehensive sexuality education.
- engaging prominent community members, policymakers, and parents to speak in support of comprehensive sexuality education.
- holding a debate with opponents of comprehensive sexuality education.
- publishing fact sheets, educational materials, and resources to educate the public about comprehensive sexuality education.

## **Tips For Developing Guidelines**

As they develop guidelines, individuals and organizations will want to consider these three important tips:

### **Communicate regularly.**

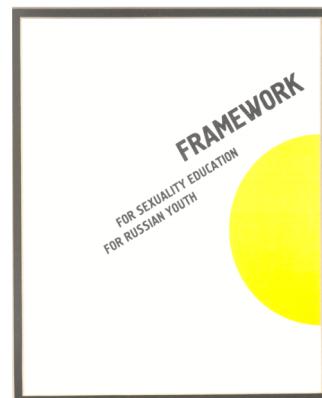
Regular and open communication among members of the lead agency, the coordinating committee, and the Task Force is critical to the success of guidelines projects. This will minimize confusion and misunderstandings.

### **Respect differences.**

Those organizations and professionals that participate in the development of the guidelines will likely have differences of opinion. It is important that everyone learn to respect those differences. Learn ways to negotiate differences and to develop consensus.

### **Develop a decision-making process**

Individuals and organizations will have to make many decisions as they develop and publish the guidelines. It is important that they establish a clear and efficient structure for making those decisions in order to reduce chances for problems, misunderstandings, and confusion.



## STEP 14

### Build a Coalition to Support Comprehensive Sexuality Education

The process of developing guidelines is often just as important as the publication of the guidelines themselves. Such collaborative work often leads to the creation of a coalition to support comprehensive sexuality education to advocate for education programs and policies. For example, the *Nigerian Guidelines* development process led to the creation of a coalition that ultimately influenced policymakers to adopt a national sexuality education policy in Nigeria.

- **What will a coalition do?**
  - Provide strength in numbers.
  - Provide an ongoing power and advocacy base.
  - Bring together diverse groups.
  - Provide information about other NGOs programs, strategies, and resources.
  - Broaden and increase existing networks.
  - Challenge opposition.
  - Increase the impact of individual NGO efforts.
  - Increase the pool of resources.
  - Organize other provincial and local coalitions.
  - Promote proactive policy on sexuality.
  - Educate communities, media, and school committees about sexuality education.
  - Challenge opposition to sexuality education through legislation, media, and community action.
  - Channel different resources and energies to focus on sexuality education.
  - Develop consensus on policies, programs, and strategies to support and
  - Implement sexuality education.

- **Who should be part of a coalition?**

A coalition should include:

- **Community members**
  - Parents.
  - Youth.
  - Religious leaders.
  - Civic leaders and clubs.
  - Prominent community elders and leaders.
- **NGOs**
  - Reproductive health and family planning.
  - HIV/AIDS.
  - Women's health.
  - Adolescent health.
  - Development.
  - Environment.
- **School and education sector**
  - Teachers.
  - Principals.
  - School administrators.
  - Curriculum developers.
  - Students and student associations.
- **Government ministries and policymaking agencies**
  - Health.

- Education.
  - Youth development.
  - Social welfare.
  - Environment.
  - Finance.
  - Development.
  - Science and technology.
- **Medical and Health Providers**
    - Doctors.
    - Nurses.
    - Traditional health practitioners.
    - Researchers.
    - Public health planners and advocates .
    - Professional medical associations.

## **SIECUS**

This handbook will help individuals and organizations develop their own guidelines. SIECUS can provide technical assistance, training, and resources to help partner NGOs and colleagues develop their own country guidelines and advocacy efforts.

For more information, contact:

SIECUS  
International Department  
130 W. 42<sup>nd</sup> Street, Suite 350  
New York, NY 10036  
U.S.A.

Phone: 212/819-9770 Fax: 212/819-9776  
Email: [intl@siecus.org](mailto:intl@siecus.org)  
<http://www.siecus.org>

## **Additional Information on Comprehensive Sexuality Education**

These publications and organizations will provide additional information on either guidelines for comprehensive sexuality education or on sexuality and reproductive health issues.

### **Publications**

#### ***Guidelines for Comprehensive Sexuality Education: Kindergarten -12<sup>th</sup> Grade***

*Second Edition*

*SIECUS*

The *Guidelines* are a framework to assist local communities in developing new curricula or assessing existing programs. They are organized into six concepts that represent the most basic knowledge about human sexuality and family living. The *Guidelines* contain 36 topics with developmental messages at age-appropriate levels.

*1996; 59 pp.; \$7.95 each*

Available in hard copy through SIECUS or downloadable from the SIECUS Web site:

<http://www.siecus.org/pubs/guidelines/guideintl.pdf> using Adobe Acrobat Reader.

The *Guidelines* are also available in a Hispanic/Latino adaptation.

#### ***School Health Education to Prevent AIDS and STDs***

*World Health Organization (WHO)*

This publication includes a “Handbook for Curriculum Planners,” a “Teacher’s Guide,” and a “Student Activities Booklet.” It establishes background for the development and adoption of worldwide sexuality education programs for youth between the ages of 12 and 16. It includes information for instructors of HIV/AIDS-prevention education and students who care for patients.

*1994. 88pp., no charge.*

WHO/GPA Production Center  
49 Sheridan Avenue, Albany, NY 12210.  
*Phone:* 518/436-9686  
*Fax:* 518 436-7433

#### ***The Sexual and Reproductive Health of Adolescents: A Review of UNFPA Programme Experience***

*United Nations Population Fund (UNFPA)*

This report reviews adolescent reproductive and sexual health programs supported by the United Nations Population Fund (UNFPA). It reviews the sexual and reproductive health needs of adolescents as well as the services and information available to them. It covers programs from Africa, Asia, the Pacific, the Arab States, Europe, Latin America, and the Caribbean.

*1998; 83 pp.; no charge.*

United Nations Population Fund (UNFPA), Technical and Policy Division  
220 East 42nd Street New York, NY 10017  
*Phone:* 212/297-5023  
*Fax:* 212/557-6416  
*E-mail:* [unfpa@unfpa.org](mailto:unfpa@unfpa.org)  
*Web site:* <http://www.unfpa.org>

#### ***UNAIDS Review: Sexual Health Education Leads to Safer Sexual Behaviour***

*United Nations Joint Program on AIDS (UNAIDS)*

This report provides data on the impact of sexuality education and sexual activity among young people throughout the world and includes recommendations for program development. This review focuses on research studies from Africa, Asia, and Europe.

*1997; 34 pp.; no charge.*

UNAIDS, 20 Avenue Appiach

CH-1211

Geneva 27

Switzerland

*Phone:* 41-22/791-3666

*Fax:* 41-22/791-4187

*E-mail:* unaids@unaids.org

*Web site:* <http://www.unaids.org>

## **Organizations**

### **Asian Federation for Sexology (AFS)**

Department of Psychiatry University of Hong Kong  
Queen Mary Hospital  
Pokfulam Road  
Hong Kong  
*Phone:* 852/855-4486  
*Fax:* 852/855-1345  
*E-mail:* HRMCNML@hkucc.hku.hk

### **European Federation of Sexology (EFS)**

Universitaire Maurice Clalumeau  
55 Boulevard de la Cluse, CH-1205  
Geneva, Switzerland  
*Phone:* 41-22/347-3031  
*Fax:* 41-22/320-9286

### **International Planned Parenthood Federation (IPPF)**

Regents College Inner Circle  
Regents Park  
London, NW1 4NS, United Kingdom  
*Phone:* 071/486-0741  
*Fax:* 071/487-7950  
*E-mail:* info@ippf.org  
*Web site:* <http://www.ippf.org>

### **International Planned Parenthood Federation (IPPF)-Africa Region**

P. O. Box 30234  
Nairobi, Kenya  
*Phone:* 254-2/720280  
*Fax:* 254-2/726596

### **International Planned Parenthood Federation- Western Hemisphere Region (IPPF /WHR)**

120 Wall Street  
New York, NY 10005, U.S.A.  
*Phone:* 212/995-8800  
*Fax:* 212/995-8853  
*E-mail:* info@ippf.org  
*Web site:* <http://www.ippf.org>

### **Pan American Health Organization (PAHO)**

525 23<sup>rd</sup> Street, N.W.  
Washington, DC 20037, U.S.A.  
*Phone:* 202/974-3000  
*Fax:* 202/995-8853  
*E-mail:* info@paho.org  
*Web site:* <http://www.paho.org>

### **Sexuality Information and Education Council of the United States (SIECUS)**

130 W. 42<sup>nd</sup> Street, Suite 350  
New York, NY 10036, U.S.A.  
*Phone:* 212/819-9770  
*Fax:* 212/819-9776  
*E-mail:* intl@siecus.org

*Web site:* <http://www.siecus.org>

**United Nations Joint Programme on AIDS (UNAIDS)**

20 Avenue Appia 1211

Geneva 27, Switzerland

*Phone:* 41-22/791-3666

*Fax:* 41-22/791-4187

*E-mail:* [unaids@unaids.org](mailto:unaids@unaids.org)

*Web site:* <http://www.unaids.org>

**United Nations Population Fund (UNFPA)**

220 East 42<sup>nd</sup> Street

New York, NY 10017, U.S.A.

*Phone:* 212/297-5236

*Fax:* 212/297-4915

*E-mail:* [unfpa@unfpa.org](mailto:unfpa@unfpa.org)

*Web site:* <http://www.unfpa.org>

**World Association of Sexology (WAS)**

University of Minnesota Medical School Program in Human Sexuality

1300 South Second Street, Suite 180

Minneapolis, MN 55454, U.S.A.

*Phone:* 612/625-1500

*Fax:* 612/626-8311

**World Health Organization (WHO)**

20 Avenue Appia

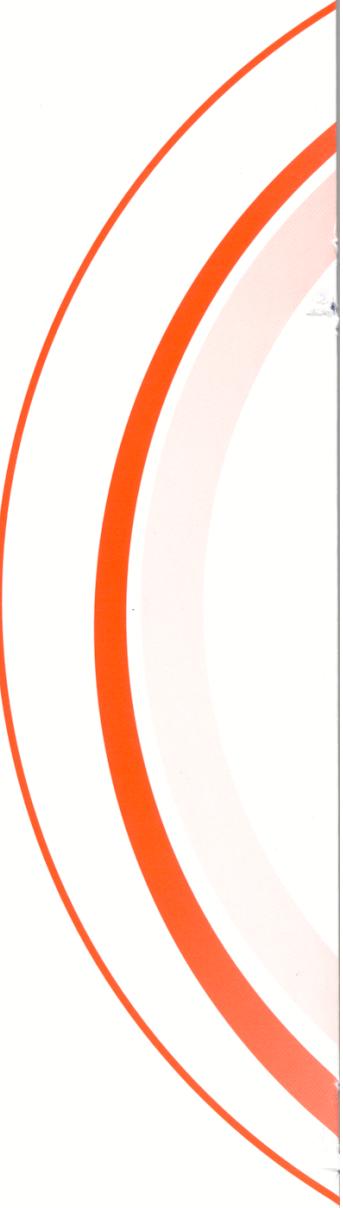
1211 Geneva 27, Switzerland

*Phone:* 41-22/791-2111

*Fax:* 41-22/791-0746

*E-mail:* [info@who.ch](mailto:info@who.ch)

*Web site:* <http://www.who.ch>



**1964**  
**35 YEARS**  
**1999**

SIECUS  
Sexuality Information and Education Council of the United States

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*Web site:* [www.siecus.org](http://www.siecus.org)