



ON THE RIGHT TRACK



SEXUALITY INFORMATION AND EDUCATION COUNCIL OF THE UNITED STATES

MEMBERS OF THE ON THE RIGHT TRACK ADVISORY GROUP

Ann Ensinger
Mentoring Partnership of New York

Alison Glaser
Planned Parenthood of Central New Jersey

Erica Glass Gordon
Children's Aid Society, National Adolescent Sexuality Training Center

Cheri Hartman
Family Service of Roanoke Valley

Carmen J. Head
United Negro College Fund Special Programs Corporation

Heather Kiley
American Youth Foundation—Merrowvista

Jane Norman
Advocates for Youth

Stephen Russell
University of California, Davis

Adam Tenner
Metro Teen AIDS

Note: Institutional affiliations are listed for identification purposes only.

ON THE RIGHT TRACK

**SEXUALITY INFORMATION AND EDUCATION
COUNCIL OF THE UNITED STATES**

Copyright © 2004

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

130 West 42nd Street, Suite 350

New York, NY 10036-7802

Phone: 212-819-9770

Fax: 212-819-9776

1706 R Street, N.W.

Washington, DC 20009

Phone: 202-265-2405

Fax: 202-462-2340

E-mail: siecus@siecus.org

Web site: www.siecus.org

On the Right Track was supported by
a grant from the Ittelson Foundation

Copy editing by Peter Novobatzky and Beej Johnson

Design by Alan Barnett, Inc.

Printing by Darbert Printing

Table of Contents

Introduction	1
<i>Building Bridges Between Youth Development and Sexuality Education</i>	
Background	
<i>How Youth Development and Sexuality Education Fit Together</i>	3
The Guidelines	
<i>A Resource for Weaving Sexuality into Youth Development Programs</i>	13
Laying the Groundwork	
<i>Preparation for Addressing Sexuality</i>	19
Getting Started	
<i>Ideas for Addressing Sexuality</i>	27
Learning from Others	
<i>Program Highlights</i>	41
Resources	
<i>Finding More Information</i>	55

On the Right Track was made possible thanks to the vision, hard work, and generosity of many individuals. SIECUS is deeply grateful to the Ittleson Foundation for their generous support of *On the Right Track*, particularly Anthony Wood, Executive Director. May their forward thinking in recognizing the need for young people to receive comprehensive youth development programs that include information about sexuality continue to serve as an example to all of us who work with youth.

The Youth Development Advisory Group provided an amazing amount of feedback to us as we were developing this publication. These outstanding professionals generously gave of their time and energy in providing initial input and ongoing feedback on both the structure and content of this publication. Thank you Adam, Alison, Ann, Carmen, Cheri, Erica, Jane, Heather, and Stephen. Your input was instrumental in the development of this manual. Thanks to Wendy Ortiz from Alianza Dominicana who also provided us with input.

SIECUS would like to thank all of the people who provided recommendations for programs and those who so generously shared their materials during the review process. Not all of the programs are included in this publication due to space limitations. This is not a reflection of the quality of any programs. Special thanks to the individuals, projects, and organizations that support the programs included in this publication. Your generosity in sharing your approaches is greatly appreciated.

Special thanks to Tamara Kreinin, SIECUS president and CEO, for her passion, support, and vision in developing this new youth development initiative. Special thanks also to Joseph DiNorcio, Jr., SIECUS vice president and COO, Jason Osher, SIECUS director of development, and Ambika Panday, SIECUS education assistant, for their support of this project.

Kate McCarthy, *School Health Coordinator*
Martha Kempner, *Director of Public Information*
Monica Rodriguez, *Director of Information and Education*

Note: Although our advisory group was instrumental in the development of this manual, the final product is the sole responsibility of SIECUS. In addition, a program's inclusion in this manual is in no way an endorsement by SIECUS.



Introduction

Building Bridges Between Youth Development and Sexuality Education



Youth Development Clearly Related to Sexuality

“Hope is a powerful contraceptive. The way that you help young people avoid pregnancy is by providing them with real evidence that good things can happen in their lives.”

— Dr. Michael A. Carrera

Youth development programs have received a great deal of attention in recent years for helping young people realize their goals and potential. The strategy typically used by youth development programs is to meet the self-identified needs of young people, build on the assets and strengths they offer, and assist them in defining goals and planning their futures.

Youth development is defined as “a process which prepares young people to meet the challenges of adolescence and adulthood through a coordinated, progressive series of activities and experiences which help them to become socially, morally, emotionally, physically, and cognitively competent. Positive youth development addresses the broader developmental needs of youth, in contrast to deficit-based models which focus solely on youth problems.”¹

The Sexuality Information and Education Council of the United States (SIECUS) believes that youth development programs are in an exciting position to help young people understand their sexuality and avoid negative outcomes such as unintended pregnancy and disease. Recent research on sexuality education programs — those programs specifically designed to reduce sexual risk-taking — has found that some of the most successful programs are those that rely on aspects of youth development. Unfortunately, few youth development programs directly address issues related to sexuality. Lack of awareness, funding restrictions, and fear of controversy are just some of the reasons for these missed opportunities.

As a professional working with young people, you are in a position to help. *On the Right Track* is a guide for any youth-serving organization. It is designed to help professionals recognize the need to address sexuality with young people, understand how sexuality education and youth development can complement each other, and determine ways in which youth development programs can begin to incorporate this important topic.

This publication has been designed to accompany SIECUS' *Guidelines for Comprehensive Sexuality Education: K–12*, a framework for creating sexuality education programs, curricula, and materials. Throughout this publication, we have included ways in which the *Guidelines* can help you choose topics, select lessons, and determine age-appropriate messages.

In addition, we have included examples of other organizations across the country that are successfully weaving youth development and sexuality education into innovative programs and activities. It is our sincere hope that learning about these programs can give you the ideas and guidance you need to start addressing this important issue.

Finally, the resource section in the back of this manual will provide you with information about numerous curricula, Web sites, and organizations that can help you learn more about sexuality and answer questions as they arise.

Regardless of how you choose to address sexuality within your program and community, SIECUS is here to help. SIECUS staff is always available to provide you with additional resources, advice, and support.



Youth development and comprehensive sexuality education share numerous goals and are based on many of the same principles.

Youth development professionals sometimes describe their goals as three-fold; they wish to help youth become *problem-free, fully prepared, and fully engaged*.²

- **Problem-free** is defined as “free of serious avoidable problems such as early, unexpected pregnancy, substance abuse, delinquency, alienation and HIV/AIDS, that hamper young people’s present lives and often limit their futures.”³
- **Fully prepared** refers to helping young people be ready for “education, work, civic engagement and family life — because they have a strong sense of competence, confidence, connection and contribution, and character across all areas of development, from cognitive to physical to civic.”⁴
- **Fully engaged** seeks to help young people become “decision-makers, planners, implementers, critics, advocates, managers, workers, and change agents.”⁵

Similarly, comprehensive sexuality education is also looking to help youth become problem-free, fully prepared, and fully engaged. Comprehensive sexuality education seeks to help young people prevent unintended pregnancies and STDs, including HIV. At the same time it holds as its goal helping young people become sexually healthy. Such programs provide accurate information about sexuality, foster responsibility,

provide models for decision-making and communication skills, and help young people explore their own values and the values of their families and communities.

This section will provide more information on both comprehensive sexuality education and youth development in an attempt to illustrate the many ways that these programs overlap and can be mutually beneficial.

What is comprehensive sexuality education?

Comprehensive sexuality education is a lifelong process of acquiring information and forming attitudes, beliefs, and values about identity, relationships, and intimacy. It encompasses sexual development, reproductive health, interpersonal relationships, emotions, intimacy, body image, and gender roles. Sexuality education addresses the biological, socio-cultural, psychological, and spiritual dimensions of sexuality from the cognitive domain (information); the affective domain (feelings, values, and attitudes); and the behavioral domain (communication, decision-making, and other relevant personal skills).

Does comprehensive sexuality education just teach about sex?

Many people think of “sex education” as solely teaching about sexual behavior, but true comprehensive sexuality education is much more than that. It addresses feelings, values, attitudes, communication, decision-making, other personal skills, and information needed to help young people become responsible and informed sexually healthy adults.

SIECUS has developed the *Guidelines for Comprehensive Sexuality Education: K–12*, which organizations can use when developing sexuality education programs. For more information on the *Guidelines*, see page 13.

The *Guidelines* were designed to be a framework that local communities could use when designing new curricula or assessing existing programs. They have been used by communities to plan new programs, evaluate existing programs, train teachers, educate parents, conduct research, develop peer programs, and write new materials. They are being used by schools, community agencies, and faith-based organizations to educate young people about important sexuality topics. SIECUS believes youth-serving programs can benefit from using the *Guidelines*, as well.



Youth Development Programs Should Cover Everything

“Youth development means not segmenting issues for young people. When we leave out sexual health and sexuality, we’re doing less than comprehensive youth development, especially as these issues become more prominent approaching and during the teen years. While youth development professionals and organizations may still make a choice to omit sexuality education, they need to recognize that their approach simply is not as comprehensive as it could be.”

— Bernice Humphrey, *Girls Inc.*

What is youth development?

Youth development is an asset-building approach that is age-specific. It works to purposefully meet youth needs and build competencies to enable them to become successful adults. It strives to help young people develop inner resources and skills, both to prevent undesirable behaviors and to promote the abilities of youth so they become self-reliant, confident adults who are responsible members of society.

(For a formal definition, see page 1).

Youth-serving programs that employ aspects of this approach vary widely in setting and focus. They can take place in school or after school, at summer camps, community-based organizations, and faith-based institutions. They may focus on anything from arts and creative expression to sports and fitness, job training, mentoring, and entrepreneurship. They may have a specific prevention focus, such as HIV or substance abuse, or they may simply focus on the broader goal of improving the lives of young people.

Regardless of their focus or format, SIECUS believes that all youth-serving programs have the opportunity to help young people become sexually healthy adults.



STORIES FROM THE FIELD

Ropes Course Teaches So Much More

Staff at the American Youth Foundation's Camp Merrowvista in New Hampshire recognize that many camp activities can actually help students learn other life lessons. With this in mind they developed an activity on the high ropes course that can help spark a discussion about decision-making, trust, and healthy relationships.

On the course, the participants are divided into teams of three. Each team member rotates among three tasks: climbing, belaying (the anchor person holding the ropes), and back-up belaying. As they go through the course, participants are told to think about how this compares to other challenges or difficult decisions that they encounter in their day-to-day lives. Once they are finished on the course, participants and staff talk about what it was like, and what they needed to successfully meet the challenges of the course.

Discussions often center around the role of the belayer, or anchor. Campers frequently talk about how it was easier to push forward along the course knowing they had someone they trusted supporting them — that they could tell their belayer when they felt at risk and ask for the rope to be tighter and that if they fell, their belayer would be there to help them. They also talk about how the words of encouragement offered by the belayer helped.

Staff members use this as a jumping off point for further discussions. They ask campers to think about who the belayers are in their lives at home by looking at who they turn to for support and who influences the decisions they make. Campers then examine if there are certain belayers who they trust more, or others that actually put them at more risk.

This is an example of how an activity can help start a conversation about decision making and the healthy or unhealthy relationships in young people's lives.

How can youth development and sexuality development be integrated?

Simply put, sexuality is an integral part of a young person's health and well-being, and youth development programs are an effective strategy to meet the needs of young people. Young people's lives are complex. Therefore, strategies to improve them must be multifaceted. We know that youth development programs and activities are among the most important contexts for youth and their healthy development.

We also know that sexual development is one of the most important changes that takes place during adolescence. Young people often have many questions about sex and sexuality, but very little opportunity to talk with caring adults about these important issues. Allowing attention to sexuality within the context of youth development programs or activities will provide important opportunities to address this critical dimension of young people's lives and health. It also shows young people that we acknowledge and care about an issue that is very important to them. A youth development approach that includes access to critical sexual health information is an essential part of helping young people create a healthy future.

What does the research say?

Few youth development programs intentionally address sexuality. Therefore, there is very little research as to whether such an approach will reduce sexual risk-taking behaviors or unintended pregnancy and sexually transmitted disease (STD) rates. However, research on sexuality education programs — those programs specifically designed to reduce sexual risk-taking — has found that the most successful programs are those that rely on aspects of youth development.

Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy, written by Douglas Kirby, Ph.D., is a comprehensive review of research and evaluations of programs designed to prevent teen pregnancy. This review identifies effective pregnancy prevention initiatives and listed below are four types of programs that have shown signs of success with highlighted examples from each.⁶

1. Sex & HIV Education Programs

Research shows that programs that focus specifically on reducing sexual risk-taking behaviors and/or preventing HIV can be effective in helping young people delay involvement in sexual intercourse. Although some parents and educators fear that providing young people with information on sexuality may encourage sexual behavior, the research clearly shows that these programs do not lead to young people having sexual intercourse earlier, more frequently, or with more partners. To the contrary, many of these programs have been found to help young people delay sexual intercourse, reduce the frequency of sexual intercourse, or reduce the number of sexual partners they have.

Evaluated Sex & HIV Education Curricula

Safer Choices

The *Safer Choices* series is designed to prevent HIV and STD infection, as well as unintended pregnancy. The program focuses on four components: school organization; curriculum and staff development; peer resources and school environment; and school-community linkages.

Contact information: ETR Associates, P.O. Box 1830, Santa Cruz, CA 95061-1830.

Phone: 800/321.4407. Fax: 800/435.8433. Web site: www.etr.org Cost: \$179.00

Becoming a Responsible Teen

Becoming a Responsible Teen (B.A.R.T.) is an HIV/AIDS prevention curriculum that was originally designed for use in non-school settings with African-American adolescents, ages 14 to 18. However, the program is adaptable to all ages and ethnic groups. It equips students with the skills to define their own values regarding sexual activity and to make decisions that will help them avoid contracting HIV. *B.A.R.T.* also addresses ways to handle social pressures and communicate assertively, as well as the need to develop refusal, negotiation, and condom use skills.

Contact information: ETR Associates, P.O. Box 1830, Santa Cruz, CA 95061-1830.

Phone: 800/321.4407. Fax: 800/435.8433. Web site: www.etr.org Cost: \$49.95

Reducing the Risk

Reducing the Risk encourages teenagers to eliminate behaviors that increase the risk of unintended pregnancies and contracting an STD or HIV. It is designed to accompany a comprehensive family life or health education program and is particularly appropriate in communities where there are high rates of teen pregnancy, drug use, and STDs.

The 16 lessons and the student workbook incorporate three main themes: it is responsible to abstain from undesired sexual activity and to refuse unprotected sexual intercourse; it is necessary to receive correct information about pregnancy, protection, and HIV/STD transmission; and it is essential and effective to communicate about abstinence and refusal skills related to unprotected sexual intercourse.

Contact information: ETR Associates, P.O. Box 1830, Santa Cruz, CA 95061-1830.

Phone: 800/321.4407. Fax: 800/435.8433. Web site: www.etr.org Cost: \$42.95

Making a Difference & Making Proud Choices

Making a Difference: An Abstinence-based Approach to HIV/STDs and Teen Pregnancy Prevention is an eight-module curriculum that provides young adolescents with the knowledge, confidence, and skills necessary to reduce their risk of STDs, HIV, and pregnancy by abstaining from intercourse. It is based on cognitive-behavioral theories, focus groups, and the authors' extensive experience working with youth. ➤

Making Proud Choices: A Safer-Sex Approach to STDs, Teen Pregnancy and HIV Prevention is an eight-module curriculum that provides young adolescents with the knowledge, confidence, and skills necessary to reduce their risk of STDs, HIV, and pregnancy by abstaining from sex, or using condoms if they choose to have intercourse. It is also based on cognitive-behavioral theories, focus groups, and the authors' extensive experience working with youth.

Contact information: Select Media, Inc., P.O. Box 1084, Harriman, NY 10926.
Phone: 845/774.7335. Web site: www.selectmedia.org Cost: \$99.00/each

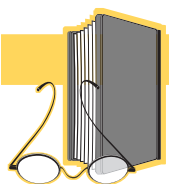
2. Programs at Family Planning Services

Due to numerous confounding factors, it is difficult to determine the long-term impact of the services provided by family-planning clinics (such as access to contraception devices) on sexual risk-taking and teen pregnancy in general. However, there is clearer evidence for the success of specific programs within family planning clinics. In these programs, young people are given information about abstinence and sexuality, receive one-on-one counseling regarding their sexual risk taking behavior, and learn about condom or contraceptive use. The results show an increased use of condoms and other forms of contraception without an increase in sexual activity.

3. Service-Learning Programs

Service-learning is defined as “a method of teaching and learning that connects meaningful community service with academic learning, personal growth and civic responsibility.”⁷

Although the origin of the term service-learning is unknown, it is predicated on the belief “that there is something uniquely powerful about the combination of service and learning, that there is something fundamentally more dynamic in the integration of the two than in either alone.”⁸



STORIES FROM THE FIELD

Volunteering Changes One Young Man's View

Michael,* a sixteen year old, was referred to the Teen Outreach Program (TOP) in Roanoke, VA because he struggled in school and was frequently truant. Michael was a tall basketball player and derived self-esteem from sports and being a “big man” with the girls. He began his service-learning work in the TOP class reluctantly, at best, and maybe with real resistance.

Michael's assignment was to be the buddy of Ellie, a very shy kindergartner who was having trouble adjusting to school. Michael visited Ellie every week and truly won her over. She went from not ever talking to not wanting to stop talking to her buddy.

Michael reported in his journal and to his mentor about helping Ellie get adjusted to school, feel better about herself, and become more confident. He said that helping her made him feel more grown up than “hitting on girls” or doing drugs.

TOP staff considers this outcome the epitome of positive youth development.

**Names have been changed.*

Among all types of interventions, service-learning programs have seen some of the strongest evidence that they actually reduce teen pregnancy rates during program participation. However, it is not yet clear why these programs have such successful results.

Researchers and educators speculate that the positive outcomes might come from the relationships that participants develop with program facilitators, the sense of autonomy they gain, the new-found competence in relationships with peers and adults, or the empowerment that comes along with knowing that they can make a difference in the lives of others. While any combination of these factors may be responsible for the success of service-learning programs, it is also possible that these programs simply reduce the opportunities teens have to engage in risky behaviors.⁹

Evaluated Service-Learning Programs

The Teen Outreach Program (TOP)

TOP works with young people ages 12 to 17. It is based on the principles of youth development, an approach that seeks to prevent problem behaviors by providing the support adolescents need to develop into healthy adults. TOP has been successfully used around the nation for more than 20 years. Currently, more than 13,000 young people in more than 176 sites participate in the program. TOP has proven effective in increasing academic success and preventing teen pregnancy among program participants.

TOP involves young people in structured, supervised volunteer service designed to improve their communities. This volunteer work is closely linked to curriculum-guided group discussions of topics directly related to students' service work as well as a wide variety of other topics, ranging from managing conflict to human development. The TOP curriculum, *Changing Scenes*, and its Spanish version, *Cambios*, provides opportunities for group discussions and experiential exercises facilitated by trained adults.

TOP helps young people develop positive self-image, learn valuable life skills, and establish future goals. The TOP strategy is flexible and can be implemented in a variety of settings where teens routinely meet.

Contact information: Cornerstone Consulting Group, One Greenway Plaza, Suite 550, Houston, Texas 77046. Phone: 713/627.2322.

Web site: www.cornerstone.to/top/top.html



Reach for Health Community Youth Service (RFH-CYS) Program

RFH-CYS is a school-based, service learning intervention that combines community field placements with classroom health instruction. It is designed to help middle school students develop the knowledge, attitudes, and skills that will keep them safe and healthy. Through field placements in health and social service settings, students have the opportunity to experience the sense of empowerment and accomplishment that comes from being asked to do something meaningful, and doing it well. They are provided with lessons that reinforce their community service experiences and provide information and skills on reducing risks related to early sexual initiation as well as other health-compromising behaviors.

Through RFH-CYS, youth become engaged in their communities. This involvement helps provide adolescents with a simple but important message: *Your contributions are valuable to the community, and the community cares about your future.*

Contact information: Lydia O'Donnell, Education Development Center, 55 Chapel Street, Newton, MA 02459. Phone: 617/969.7100. E-mail: lodonnell@edc.org

4. Comprehensive Programs

The final type of program that was found to be effective is a model that intentionally combines aspects of sexuality education with youth development. Although few studies have been done on these comprehensive programs, the research is very encouraging. Evaluations have shown that some of these programs have helped participants delay sexual intercourse, decrease the frequency of sexual intercourse, increase condom and other contraception use, and/or reduce pregnancy and birth rates.

Evaluated Comprehensive Program

Children's Aid Society—Carrera (CAS—Carrera) Program

CAS—Carrera is a long-term, intensive program that includes family life and sexuality education; educational activities including individual academic assessment, tutoring, help with homework, preparation for standardized exams, and assistance with college admissions; work-related activities including job club, stipends, individual bank accounts, employment, and career awareness; self expression through the arts; sports activities; and comprehensive health care, including mental health, reproductive health services, and contraception.

Multiple sites conducting this program were recently subjected to a rigorous scientific evaluation that included random assignment and large sample size. The study found that, among girls, the program significantly delayed the onset of sexual intercourse, increased the use of condoms and other effective methods of contraception, and reduced pregnancy and birth rates. These positive results among girls lasted as long as three years. The program was not shown to reduce sexual risk-taking behaviors among boys.¹⁰

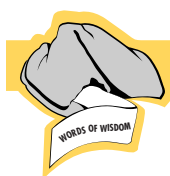
Contact information: The Children's Aid Society National Training Center,
350 East 88th Street, 3rd Floor, New York, NY 10128. Phone: 212/876.9716.
Web site: www.stopteenpregnancy.com

What Do Effective Programs Have in Common?

Although the types of programs that have been found to be effective vary, the research in *Emerging Answers* identifies 10 characteristics that these programs have in common¹¹:

Effective programs:

1. Focus on reducing one or more sexual behaviors that lead to unintended pregnancy or HIV/STD infection.
2. Are based on theoretical approaches that have been demonstrated to influence other health-related behavior and identify specific important sexual antecedents to be targeted.
3. Deliver and consistently reinforce a clear message about abstaining from sexual activity and/or using condoms or other forms of contraception. This appears to be one of the most important characteristics that distinguish effective from ineffective programs.
4. Provide basic, accurate information about the risks of teen sexual activity and about ways to avoid intercourse or use methods of protection against pregnancy and STDs.
5. Include activities that address social pressures that influence sexual behavior.
6. Provide examples of and practice with communication, negotiation, and refusal skills.
7. Employ teaching methods designed to involve participants and have them personalize the information.
8. Incorporate behavioral goals, teaching methods, and materials that are appropriate to the age, sexual experience, and culture of the students.
9. Last a sufficient length of time (i.e., more than a few hours).
10. Select teachers or peer leaders who believe in the program, and provide them with adequate training.



Training Helps Show How Broad “Sex Ed” Really Is

“One of the biggest surprises of the weekend training was that sexuality education isn’t just about sex. Sexuality education is about helping people understand and be able to practice healthy relationships — friendship and romantic — and that healthy relationships begin with a positive sense of self.”

— Heather Kiley, American Youth Foundation

Why should youth development programs address sexuality?

Given the recent success of programs that combine sexuality education with youth development components, it seems clear that youth development programs are in a unique position to help young people become sexually healthy adults. While young people's lives can be complex, it is evident that youth development programs and sexuality education share the common goals of helping youth become socially, morally, emotionally, physically, and cognitively competent. Young people can only benefit from such a comprehensive approach.



STORIES FROM THE FIELD

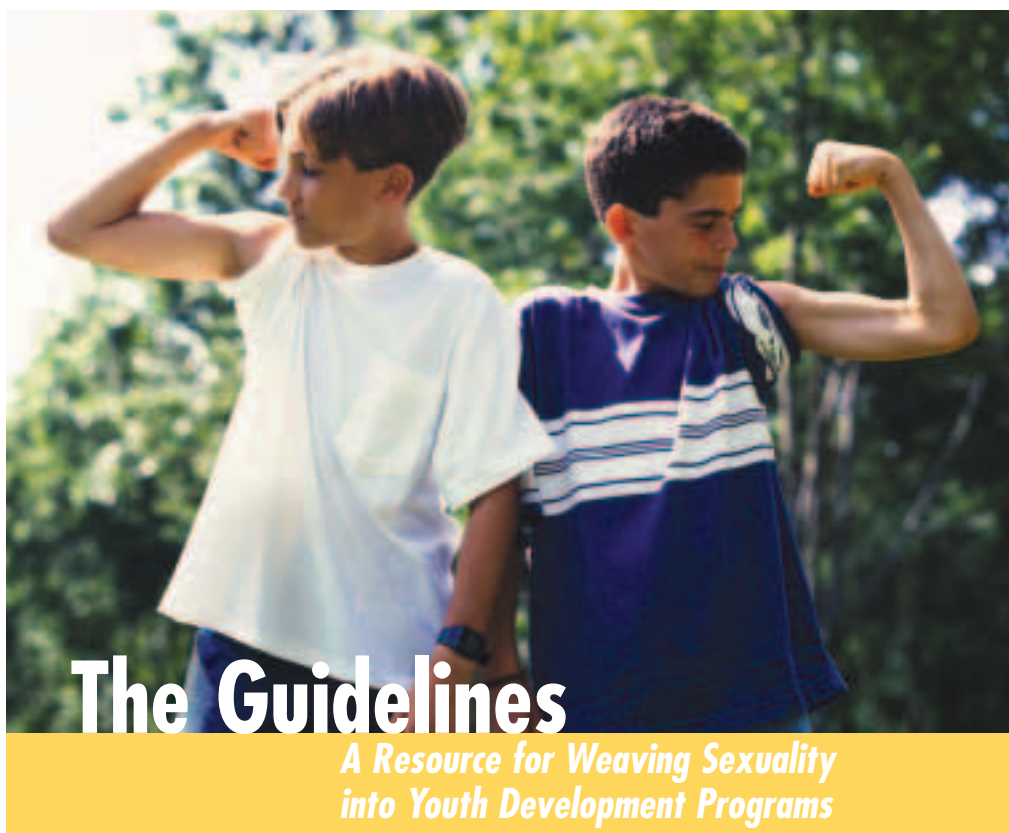
Body Image Butcher Block Activity

Staff members at the American Youth Foundation's Camp Merrowvista in New Hampshire developed an activity that helps campers of all ages (eight to 17) look at body image.

For this activity, campers are separated into two groups by gender. One person from each group lies down on a large sheet of newsprint (the "butcher block") and has his/her body traced with a marker. The groups then cut out pictures from popular magazines and paste them on the butcher block. Campers are asked to paste pictures that represent the way "you feel about your body" inside the traced outline of a body. They then paste those pictures that represent what "society says your body should look like or how society wants you to feel about your body" outside the traced outline. Once all the pasting is finished, the groups come back together and share their final product.

This activity has proven to be a very powerful tool for discussing body image and self-esteem. By breaking campers into same-gender groups and then coming back together as a larger group for discussion, participants are able to hear about the pressure the opposite gender feels when it comes to body images issues. It also provides an excellent opportunity to discuss what individuals could do at camp to feel strong and healthy, the importance of healthy eating, and how their interactions with other campers (male and female) impact their sense of self. To build on the discussions that this activity provoked, staff members pulled together additional resources on the topic to take on camping trips and discuss while hiking.

This activity is very adaptable. It can be used to address other sexuality-related issues such as society and culture, personal skills, and relationships. If space or materials are an issue, a hand or head could be traced instead of the whole body.



What are the *Guidelines for Comprehensive Sexuality Education: Grades K–12*?

The *Guidelines for Comprehensive Sexuality Education: Grades K–12* are a framework designed to help educators and community members develop and analyze sexuality-education programs, curricula, and textbooks. The *Guidelines* are a valuable resource for youth-serving professionals who want to begin to integrate sexuality education into their programs.

The *Guidelines* were developed by the National Guidelines Task Force, which consisted of 20 professionals in the fields of medicine, education, sexuality, and youth services who came from such prestigious organizations as the American Medical Association, the American Social Health Association, the March of Dimes Birth Defects Foundation, the National Education Association, the National School Boards Association, Planned Parenthood Federation of America, and the U.S. Centers for Disease Control and Prevention. SIECUS convened these experts in 1990 to begin the process of outlining a framework for sexuality education.

This task force determined the six key concepts and 36 topics that make up a comprehensive sexuality-education program. For each topic, the task force then

developed age-appropriate messages for children and young people ages five to eight; nine to 12; 12 to 15; and 15 to 18. The *Guidelines* were first published in 1991 and have since been revised.

What are the goals of comprehensive sexuality education?

According to the *Guidelines*, the primary goal of sexuality education is to promote sexual health. It assists young people in developing a positive view of sexuality, provides them with information and skills for taking care of their sexual health, and helps them acquire skills to make decisions now and in the future. The *Guidelines* define four primary goals of sexuality education:

- *Information*

To provide accurate information about human sexuality, including growth and development, human reproduction, anatomy, physiology, masturbation, family life, pregnancy, childbirth, parenthood, sexual response, sexual orientation, contraception, abortion, sexual abuse, HIV/AIDS and other sexually transmitted diseases.

- *Attitudes, Values, and Insights*

To provide an opportunity for young people to question, explore, and assess their sexual attitudes. To understand their family's values, develop their own values, increase self-esteem, develop insights concerning relationships with family and members of both genders, and understand their obligations and responsibilities to their families and others.

- *Relationships and Interpersonal Skills*

To help young people develop interpersonal skills, including communication, decision-making, assertiveness, and peer refusal skills, as well as the ability to create satisfying relationships. Sexuality education programs should prepare students to understand sexuality effectively and creatively in adult roles. This would include helping young people develop the capacity for caring, supportive, non-coercive, and mutually pleasurable intimate and sexual relationships.

- *Responsibility*

To help young people exercise responsibility regarding sexual relationships, by addressing such issues as abstinence, how to resist pressures to become prematurely involved in sexual intercourse, and the use of contraception and other sexual health measures.

What are the key concepts, topics, and messages?

The *Guidelines* are organized into six key concepts that represent the most general knowledge about human sexuality and family living. They are: human development, relationships, personal skills, sexual behavior, sexual health, and society and culture. Each of the six concepts is broken down into a number of topics.

Key Concepts and Topics

Human Development

Reproductive Anatomy & Physiology
Reproduction
Puberty
Body Image
Sexual Identity & Orientation

Relationships

Families
Friendship
Love
Dating
Marriage & Lifetime Commitment
Raising Children

Personal Skills

Values
Decision-making
Communication
Assertiveness
Negotiation
Looking for Help

Sexual Behavior

Sexuality Throughout Life
Masturbation
Shared Sexual Behavior
Abstinence
Human Sexual Response
Fantasy
Sexual Dysfunction

Sexual Health

Contraception
Abortion
STDs, including HIV
Sexual Abuse
Reproductive Health

Society and Culture

Sexuality & Society
Gender Roles
Sexuality & the Law
Sexuality & Religion
Diversity
Sexuality & the Arts
Sexuality & the Media

These topics then include numerous age-appropriate messages. For example, under the topic of puberty, messages for young people ages nine to 12 include: “Everyone’s body changes at its own pace”; “Girls often begin pubertal changes before boys.”; and “During puberty, emotional changes occur.” In total, the *Guidelines* include 36 topics and over 700 messages.



IDEAS YOU CAN USE

Activity Looks at Key Concept #2: Relationships

Staff members at the American Youth Foundation’s Camp Merrowvista in New Hampshire have adopted an already existing and widely used sexuality education activity that addresses relationships, one of the key concepts set forth in the *Guidelines*.

Facilitators post two signs on the wall — one says “Healthy” and the other says “Unhealthy.” Campers are then split into groups and each group is given one to three index cards that explain different behaviors or feelings that might occur in a relationship. Facilitators carefully choose aspects of relationships that are relevant to the camp experience. For example, one card might say “2 people sit together at every meal.” The groups then have to decide whether this behavior or feeling is healthy or unhealthy and post the card under the corresponding label.

Camp leaders say that this activity helps campers identify specific behaviors that support healthy relationships and allows them to discuss exclusiveness and healthy romantic relationships at camp. This activity also helps campers examine their relationships outside of camp and learn how to transfer the healthy behaviors to home.

How are the *Guidelines* used?

The *Guidelines* were designed to be a framework that local communities could use in designing new curricula or assessing existing programs. They have been used by communities to plan new programs, evaluate existing programs, train teachers, educate parents, conduct research, develop peer programs, and write new materials. They are being used by schools, community agencies, and faith-based organizations to educate young people about important sexuality topics. SIECUS believes youth-serving programs can benefit from using the *Guidelines* as well.



Guidelines Provide Foundation

“The *Guidelines* add credibility and prestige to our program. We’re not just pulling these age-appropriate behaviors from a hat; they’re actually based on findings from a task force of leading health, education, and sexuality professionals.”

— Kathleen Baldwin, Director of Education, Planned Parenthood of Greater Indiana

How can the *Guidelines* help me in my youth development program?

The *Guidelines* can help you in any number of ways as you work to be responsive to the important developmental needs of the young people in your community. The *Guidelines* could be used to help you:

1. Gather information about topics you know are of interest among the young people in your program, topics they have raised either with you or among themselves
2. Identify topics that you want to address with young people
3. Identify age-appropriate messages for the young people you work with
4. Train your staff to be more comfortable addressing sexuality issues as they arise
5. Create or incorporate existing sexuality-related curricula, programming, or activities into your organization



Program Addresses Key Concept #6: Sexuality & Society Developmental Message: “Media usually do not portray sexuality realistically”

STORIES FROM THE FIELD

The Cincinnati Children’s Hospital’s *Postponing Sexual Involvement* (PSI) program recruits, trains, and supervises 75 high school students each year. The “PSI Teen Leaders” teach a five lesson educational series that reaches 3,000 young teens annually.

In addition, each year PSI sponsors “Unreleased Young Artists Live in Concert,” a professional city-wide teen talent concert. The goal is to showcase the positive assets of teens and help teens dispel the many negative images about themselves and sexuality that they are constantly receiving from the media and the music industry in particular.



Teen Outreach Program Curriculum *Changing Scenes*, Level III, Lesson #19 *What Is Sexuality?* Addresses Key Concept #6: *Sexuality & Society*

Age Appropriateness: 15–16 years old

What You'll Need:

- Current issues of popular magazines
- Newsprint and markers
- Glue sticks or tape and scissors

Start!

- Tell students that they are going to begin looking at sexuality and the changes that take place in sexuality and sexual behavior during the teen years. Point out that this is a particularly important area in their development, since sexual and reproductive maturity is reached during this stage of their lives.
- Ask students to think about what sexuality is. Tell them to recall scenes they have seen recently on television or in the movies, or lyrics from popular music hits, that relate to sexuality. Ask them to share with the group examples of such scenes or lyrics. Encourage students to think of sexuality broadly — as involving more than “having sex” and other behaviors leading up to sexual intercourse.
- Record students’ responses on newsprint and continue probing for examples until you have 8-10. Ask the group to look at the list. Comment on the nature of the responses, whether they reflect a somewhat narrow, genital definition of sexuality (e.g., having intercourse, making out, nudity, etc.) or whether they reflect a broader definition of sexuality (e.g., gender roles, intimacy, body images, parenting, etc.).
- Write the word “sexuality” on the board and circle the letters that spell “s-e-x.” Emphasize that having sex is only one aspect of a person’s sexuality. Engage the students in a brief discussion on the other elements that make up sexuality. Write their responses on the board and add any of the following that are omitted:
 - Feelings about being a man or woman
 - Body image and feelings about the body
 - Showing affection and caring
 - Pregnancy, birth, and parenting
 - Dating and love relationships
 - Families
 - Preventing pregnancy, STDs, and HIV/AIDS

Tell students that you want them to work individually, as a team, or in small groups to create presentations that illustrate the broad definition of sexuality you have been talking about. ➤

Go Over the Instructions:

- Select one of the elements of sexuality from the newsprint list and decide where and how you have seen this element acted out.
- Develop a 2–3-minute creative presentation for the class that expresses this element of sexuality. Prepare 1 or 2 discussion questions to engage the class in reacting to your presentation.
- Your presentation can be oral, visual, musical, or involve a physical activity or a dramatic or comic role play; you may choose one or a combination of several techniques, or create your own unique presentation format.

Bringing It Full Circle:

Allow 15 minutes for students to work, then ask volunteers to make their presentation to the class. Allow time for students to process each presentation through the discussion questions that the presenters come up with and/or by using the following guided questions:

- How does your sexuality — who you are as a young man or woman — come through at home or school in the things you do or say? (Encourage teens to think of ways unrelated to dating, such as dressing a certain way, keeping one's body fit and healthy or doing certain things because of being male or female.)
- Are there differences in the ways males and females express their sexuality? In the ways members of various cultural and ethnic groups express their sexuality? What are they? Give examples. Are these differences the results of stereotyping (e.g., that certain behavior is “masculine” or “feminine” or that members of certain ethnic or racial groups are “sexy” or “uptight”)?
- Ask if any students would like to share an example of something they've heard from their families or in their communities about any aspect of sexuality that has been discussed.

Adapted for use from the Teen Outreach Program (TOP) *Changing Scenes*, with permission from Cornerstone Consulting Group, Inc., Houston, TX. Phone: 713/627.2322. Web site: <http://www.cornerstone.to/top/top.html>



Laying the Groundwork

Preparation for Addressing Sexuality



Becoming a Resource on Sexuality & Relationships

“Because I had spent time thinking about sexuality and how I could help campers and staff be more intentional with relationships, I was a more effective resource to the leaders during the summer. I had new suggestions to help campers begin to discover who they are and how important that is to developing solid relationships with one another. And that, of course, fit right into the motto!!” (My own self, At my very best, All the time).

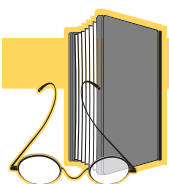
— Jen Hampton, Pioneer Program Coordinator, American Youth Foundation

How a youth-serving program deals with sexuality-related topics depends on a number of factors including time, resources, the needs of the young people involved, and community support.

There are many options for addressing sexuality in your program, ranging from conducting formal lessons or training to simply being prepared to answer questions or address young people’s comments and concerns as they arise. The following are just three examples:

- **Becoming A Resource:** You can start by becoming more comfortable with topics related to sexuality so that when issues or questions arise, you and other staff members are able to be a resource to the young people you work with. You also may want to create a support system for yourself, or a formal referral system for issues that may require a level of intervention that is beyond your comfort level or experience.
- **Incorporating Activities:** You may decide that you want to look at certain sexuality-related topics in more depth, in which case you can incorporate lessons, activities, and resources on these topics into your program. The *Guidelines* can help you select age-appropriate topics, develop your own activities, or evaluate lessons that have already been developed. You may also want to contact a local sexual health organization. Many of these organizations are willing to facilitate short workshops on sexuality to help educate your staff, board, or community.
- **Implementing a Program:** Finally, you may wish to implement a broader sexuality education program that covers a number of topics and issues. If you choose to do this, there are many options available to you. You can use the *Guidelines* to develop your own program complete with activities, you can use an already existing curriculum, or you can contact a local sexual health organization that may help you implement a series of lessons into your programming. You may even want to consider hiring an educator trained in sexuality education to help support your new program.

Regardless of how you choose to address sexuality, SIECUS is here to help. The rest of this section is designed to provide more in-depth guidance on how you might go about weaving sexuality into your program, as well as to provide examples from programs that are already working on these issues. We have included contact information for all of these programs and for SIECUS staff so that we may assist you.



STORIES FROM THE FIELD

Learning Occurs Outside the Classroom

An educator at the Teen Pregnancy Coalition of San Mateo County recently had a student come to her after a class discussion about STDs. He thought he might have scabies but wasn't sure how he got it and was afraid to tell his parents. The educator was able to answer his questions, give him information about being tested, and allay some of his fears. The educator shared that some of the most important discussions take place outside of the group setting and it's important to recognize that when the class period is up, the learning often still occurs.



IDEAS YOU CAN USE

Our Whole Lives

Our Whole Lives (OWL) is a comprehensive lifespan sexuality education series that helps participants make informed and responsible decisions about their sexual health and behavior. The following activity was adapted from the *OWL* curriculum, grades 7–9. This is an example of an activity that can be done anonymously with the young people you work with to help determine what topics within sexuality education they may need more information about.

Personal Concerns About Sexuality Checklist (Female)

Put a checkmark next to any topics that interest or concern you. Circle any words or phrases that you do not understand.

- ☐ Feelings of embarrassment during conversations about sexuality
- ☐ The size of my breasts, because they are too small or too large
- ☐ The way my vulva looks or smells
- ☐ Discharge or secretions from my vagina
- ☐ Dealing with my period or PMS
- ☐ The frequency or method of my masturbation
- ☐ Getting someone I like to like me
- ☐ Wondering if I will know how to have sex
- ☐ Some of the dreams or fantasies I've had and whether or not they are normal
- ☐ Wondering if I am as feminine as I should be
- ☐ Wondering when it is right for me to start having sex
- ☐ The effects of looking at sexy pictures, books, or movies
- ☐ Feeling uncomfortable talking to my parents about sexuality
- ☐ The desire to see the nude body of a male
- ☐ The desire to see the nude body of a female
- ☐ Wondering whether females enjoy sex as much as males
- ☐ How you can tell if a person really loves you or if he/she is just leading you on
- ☐ Getting pregnant or becoming a teen mother
- ☐ Getting a sexually transmitted disease like AIDS
- ☐ Where to get contraception (like condoms)
- ☐ Other:



Personal Concerns About Sexuality Checklist (Male)

Put a checkmark next to any topics that interest or concern you. Circle any words or phrases that you do not understand.

- ☐ Feelings of embarrassment during conversations about sexuality
- ☐ The size of my penis, because it is too small or too large
- ☐ The size or shape of my breasts
- ☐ The way my sex organs look or smell
- ☐ The shape of my penis when it is erect
- ☐ The frequency or method of my masturbation
- ☐ Having sex on my mind too much
- ☐ Getting someone I like to like me
- ☐ Wondering if I will know how to have sex
- ☐ Some of the dreams or fantasies I've had and whether or not they are normal
- ☐ Wondering if I am as masculine as I should be
- ☐ Wondering when it is right for me to start having sex
- ☐ The effects of looking at sexy pictures, books, or movies
- ☐ Feeling uncomfortable talking to my parents about sexuality
- ☐ The desire to see the nude body of a female
- ☐ The desire to see the nude body of a male
- ☐ Being approached sexually by a female
- ☐ Being approached sexually by a male
- ☐ Becoming a teen father
- ☐ Getting a sexually transmitted disease like AIDS
- ☐ Where to get contraception (like condoms)
- ☐ Other:

This activity was adapted with permission from *Our Whole Lives* (OWL), grades 7–9, Unitarian Universalist Association, UUA Bookstore, 25 Beacon Street, Boston, MA 02108. Phone: 800/215.9076. Fax: 617/723.4805.

Web site: <http://www.uua.org>

How do I begin?

The first thing you need to do is decide the best method to address sexuality in your program. The ideal method is different for every program and depends on a wide variety of factors. First and foremost are the needs of the young people you serve. Some programs conduct formal or informal needs assessments with young people to determine if they are learning about sexuality in other settings, the messages they are

receiving, and the knowledge and skills they still need. Other programs respond to an observed need, such as inappropriate sexual language use by youth in the program, or high teen pregnancy or STD rates in their community.

After assessing the needs of the young people in your program, you will also need to consider the resources available to you including funding, time, and staff. In addition, you will have to take into account the format or structure of your program. An after-school program in which a group of young people meet every day will most likely handle sexuality topics differently than a tutoring program in which staff works one on one with a young person. You know your program best. If you work in a program where many of the young people come and go frequently, it is best to have each lesson be self-contained so that if a young person attends the program only once it is an effective and complete message.

Finally, you will want to assess support for taking on this new topic among your organization and staff, your community, the young people you work with, and their parents/caregivers. Numerous surveys have shown that parents and other adults support giving young people honest and accurate information about sexuality¹². In addition, surveys of young people themselves suggest that they continue to want more information¹³. Still, some individuals and organizations may be initially uncomfortable with sexuality and it may take time and energy to build support.

MTV/Time Magazine Sexuality Education Poll¹⁴

In a recent MTV/Time Magazine Poll of over 1,000 13–18 year olds, young people overwhelmingly supported a comprehensive approach to sexuality education.

- 84% believe young people should be taught sex education
 - 63% say they need more information about sex education than they have already received
 - 65% believe STDs, including HIV/AIDS, are the most important issue for young people today
-



STORIES FROM THE FIELD

Organization Supports Staff Awareness

The Boys and Girls Club/Girls Inc. of Pueblo County & Lower Arkansas River Valley wanted to strengthen and expand its implementation of the Girls Incorporated program *Preventing Adolescent Pregnancy*. Realizing how critical the issues covered in this program are to the lives of the girls they work with, the executive director decided it was important for the entire staff be trained about the topics it covered, not just those staff members who would be implementing the program. Staff for sports, science, and substance-use prevention programs ➤

as well as administrative and maintenance staff received training to help them understand sexuality issues for girls. Although they each interact with girls in different capacities, this training helped all staff support girls on these issues. It also helped staff be able to articulate to community members the importance of having this kind of sexuality education program at their organization.

How do I build support within my organization?

Some organizations may be excited about the prospect of incorporating sexuality topics into their programs right away, while others may be more cautious. Board members, administrators, and staff may have concerns about available resources and community reaction. Others may simply be uncomfortable with these topics and new issues that might arise from discussing sexuality with young people.

You should be prepared to explain why it is important to address sexuality and how you think this will positively impact the young people you work with. Explaining the needs you have identified among the young people in your community, including any local statistics you can gather on teen pregnancy or STDs, may also be helpful. Consider bringing in an outside expert to discuss sexuality with board and staff members, as this may help make them more comfortable with the topics you hope to address.

While your organization may be eager to take on broad-based sexuality education as soon as possible, you may need to approach this topic incrementally. Many organizations start by educating their staff and board. This can lay the foundation for sexuality education programming in the future.



STORIES FROM THE FIELD

SIECUS and AYF Develop Long and Evolving Partnership

The American Youth Foundation (AYF) is a national youth development organization whose goal is to inspire young people to realize their personal best and make a positive difference in their communities and the world. Their programs include year-round school programs, summer camps, week-long leadership conferences, and a leadership program working in six metropolitan school districts.

A few years ago, AYF approached SIECUS to ask for help in understanding issues of adolescent sexuality and delivering positive messages within their various programs. SIECUS began by working with the board of directors and key management staff to raise their awareness of the sexuality issues that young people confront and identify areas where they could make a difference.

During the first year of the partnership, SIECUS also provided speeches on adolescent sexuality to all program staff and worked closely with staff from Camp Merrowista to identify specific ways that they could address sexuality issues with campers during the upcoming summer. After the summer, SIECUS met with camp staff again to assess the past summer's efforts and develop additional activities for future seasons.

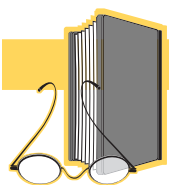
AYF decided to continue its focus on issues related to sexuality. AYF and SIECUS worked together to plan curriculum retreats during which staff developed additional age-appropriate and user-friendly curriculum modules for use in all AYF programs. SIECUS also provided training to year-round and seasonal program leaders to equip them to facilitate these modules. In addition, SIECUS assisted AYF in planning pilot programs for school groups served by their two educational centers. SIECUS and AYF plan to continue this evolving partnership.

Do we need a formal policy?

Some organizations have adopted formal policies that outline their commitment to addressing sexuality issues within their programs. Such policies may help justify the time and energy staff spends on this topic and provide them with an additional level of comfort when working with youth. They are not necessary, however.

In addition, it is important for staff to keep abreast of national, state, and local public policies that may affect your programs. The National Youth Development Information Center (NYDIC) Web site has a set of links to sources of public policy information that may be of interest to youth development professionals.

(<http://www.nydic.org/nydic/polinks.html>)



STORIES FROM THE FIELD

One Program Chooses to Write Policy

The *Hollywood Teen Community Project* (HTCP) is working closely with five community-based organizations to help them address sexuality education in their programming. HTCP trains the staff of these organizations so they are able to provide accurate information, demonstrate healthy boundaries, take advantage of “teachable moments,” and tap into local community resources.

For one of these organizations, an after-school program, the training by HTCP raised a lot of questions. Staff wanted to know what the organization’s boundaries were when answering questions or discussing sexuality.

The organization decided to formally address these concerns. Using the *Guidelines* and SIECUS’ definition of a sexually healthy adolescent, HTCP helped this organization develop protocols outlining which topics are appropriate and which staff members can most effectively address them. Once the policy was in place, HTCP worked with the organization to train staff members and present the new policy to the community and the parents of the young people they work with.

How do I build support within my community?

In order to successfully address sexuality within your program, it may be helpful to get the support of people outside of your organization including parents, educators,

and other community members. Many of these people may be immediately supportive of introducing this new topic. However, others may have concerns.



STORIES FROM THE FIELD

Holistic Program Incorporates Sexuality Education

Planned Parenthood of Greater Indiana is implementing two replication sites of the Children's Aid Society-Carrera model (see page 10) for adolescent pregnancy prevention. Sexuality education is just one of many components of this program, which also includes medical care, academic assistance, job training, sports, and arts. Program administrators make it clear to community members and parents that, while sexuality education is just one part of this comprehensive model, it is essential.

Again, you should be prepared to explain why it is important to address sexuality in your program and how you think this will positively impact the young people you work with. Explaining the needs you have identified among the young people in your community, including any local statistics you can gather on teen pregnancy or STDs, including HIV, may also be helpful. Many people use statistics from the U.S. Centers for Disease Control's *Youth Risk Behavior Survey (YRBS)* to demonstrate sexual risk-taking behaviors for the young people in their areas.

(<http://www.cdc.gov/nccdphp/dash/yrbs/2001/youth01online.htm>)

In addition, some concerns that community members may have are often based on misinformation or misconceptions about sexuality education. For example, some people may think that sexuality education is limited to teaching about sexual behavior, while others may fear that it will lead to an increase in sexual activity among young people. The information in this guide can help you address these erroneous beliefs.

Building support to address sexuality in your program may take time and effort. You can start the process by engaging staff, parents, and community members in a variety of forums where open discussions can take place.



STORIES FROM THE FIELD

Don't Forget the Parents

An educator from the Teen Pregnancy Coalition of San Mateo County recently spoke with a mother at a community health fair. The mother thanked the educator for providing sexuality education to her eighth-grader, and was especially grateful for the take-home activity her son had to do with a parent. She said that activity "opened doors of communication" and that she never would have taken the initiative to talk to her son without that homework. She now feels much more confident in having conversations with him about "sensitive" topics.



Regardless of how your program ultimately decides to address sexuality, it is important that all staff have some comfort with the issues that can and do arise when working with young people. Many people grew up in environments where discussions about sexuality were taboo, so it can be challenging for them to address these issues.



HELP ALONG THE WAY

There Are No “Average Adolescents”

Developmental psychologists and health professionals have categorized adolescence into three developmental stages: early, middle, and late. These stages are key to understanding adolescents’ behavioral decisions and adolescent sexuality.

It’s important to remember that there is no such thing as an “average adolescent.” Individuals vary widely in the pace of their development. For example, in any group of 13-year-olds, some might act more like nine-year-olds, and some like 16-year-olds. There is also a high degree of variation within each adolescent: for example, a physically mature 15-year-old might function emotionally as a 12-year-old in dealing with his parents, and yet cognitively as a late adolescent in dealing with math problems. Also, it is important to be aware of home and community influences that can affect young people.

Becoming comfortable discussing sexuality is an ongoing process of listening, learning, and practicing.

Listening: Young people receive messages about sexuality every day from music, movies, television, and advertising, as well as from their friends and families. Listen to the young people you work with, ask questions, find out what they are reading, watching, and listening to. Being aware of these messages will go a long way toward helping you become more comfortable with youth culture.

Learning: As adults, we often avoid topics that we know little about out of fear that we will be unable to answer a question. A little knowledge goes a long way. The resource section at the end of this manual includes many books, curricula, Web sites, and organizations that can provide you with basic information on important topics such as puberty, contraception, HIV/AIDS, other STDs, and reproduction. It also includes resources that can help you gain a better understanding of adolescent sexual development, behavior, and relationships.

In addition to these resources, many local and national organizations publish resources and sponsor workshops, training programs, and conferences on sexuality-related topics. You might want to attend these events or invite an expert to speak to you and other staff members. These can be great opportunities for experiential learning.

Practicing: Comfort with sexuality-related issues is based largely on practice. The first time you facilitate an activity on puberty or answer a question about contraception will undoubtedly be the hardest. You may want to plan opportunities for you and other staff members to practice facilitating activities or responding to questions before working with the youth.



HELP ALONG THE WAY

Answering Difficult Questions

Answering questions about sexuality is not always easy. Even simple fact-seeking questions may seem overwhelming — you may not be familiar with the language a young person is using, you may not be comfortable with a topic that has been brought up, or you simply may not know the answer. Other questions may include obscene language, ask about your personal sexual experience, or ask for your opinion on controversial topics.

Don't panic. The first step is to try and decipher the meaning behind the question. Is the asker genuinely seeking information, trying to shock or test you, or simply trying to figure out whether he or she is "normal?"

Regardless of the question, the most important thing is that you keep the lines of communication open. You do not have to answer every question, but you want to make sure young people understand you are available to help them get information. If you don't know the answer, simply explain that you will find out and let them know or that you will help them find the answer on the Internet or at the local library. If you don't feel comfortable answering a question, refer them to somebody

else such as a parent/caregiver or a physician who might be in a better position to help.

One tool that sexuality educators often use is an anonymous question box. By having young people put inquiries on index cards into a box before or after a session, you give them the opportunity to submit questions they might be uncomfortable asking in front of peers. This also gives you a chance to screen questions ahead of time so that you won't be caught off guard, and allows you to do research if necessary.

Resource: The Seattle and King County, Washington Department of Public Health has an extensive Web site designed to help educators answer tough questions about sexuality. The Web site includes advice and ideas as well as sample answers to many common questions. (<http://www.metrokc.gov/health/famplan/educators/diffques.htm>)

How do I choose what topics to address?

Once you have decided to address sexuality in your program, you might feel overwhelmed by the sheer volume of information and ideas that fall under this broad subject area. Choosing topics that you want to cover will depend on the amount of time you can devote, and the needs of the young people you work with. The most effective lessons often come from things you hear or see while working with young people. For example, you may observe the young people you work with lacking the information they need or hear them use misinformation or inappropriate language. Turn these moments into opportunities for learning.

The *Guidelines* can help. Use the six key concepts and 36 topics suggested as a jumping off point. You can then work with staff, parents, and/or the young people themselves to narrow down and prioritize this list.



IDEAS YOU CAN USE

"NAME IT, CLAIM IT, STOP IT" TECHNIQUE

In group settings, young people often use words or phrases that are derogatory and disrespectful. This simple technique can help create an environment where young people feel comfortable challenging such language. Once you model the *Name It, Claim It, Stop It* technique, open it up to the young people in your group and allow them to use it whenever they hear something that makes them uncomfortable.

Name it: "I heard you call him a fag."

Claim it: "I don't like that because it offends me — I am gay/ I have a gay brother/ there is nothing wrong with being gay and it makes it sound like there is."

Stop it: "Please don't say that again."

Adapted with permission from the Gay, Lesbian, Straight Education Network (GLSEN), 121 West 27th Street, Suite 804, New York, NY 10001-6207. Phone: 212/727.0135. Fax: 212/727.0254. Web site: www.glsen.org



HELP ALONG THE WAY

Prioritizing Topics Activity

This simple activity is designed to be conducted in a group setting — with board members, administrators, staff, parents, or even young people. It can help an organization choose topics and determine priorities.

- On a sheet of paper, the facilitator should list all 36 topics suggested in the *Guidelines*, with a blank space in front of each for a score. Make one copy of this sheet for each participant and save one sheet to tally the final scores at the end of the activity. Also recreate this list on a large piece of newsprint so the whole group can view the final results.
- Give each person a sheet with the 36 topics and explain that each individual has 15 points that they can assign to the topics listed. They can assign the points anyway they want — i.e., they can give one topic 15 points, 15 topics one point each, or three topics five points each — however, they can not exceed 15 points total. Explain that ultimately the topics that get the most points will be considered the top priorities.
- After giving each person 5–7 minutes to decide on their totals, have them share their score sheets with the whole group. Ask each person to explain why they distributed their points the way they did. As each person presents, the facilitator should keep a tally of how the points are distributed and note the similarities and differences in the scores given.
- After all the participants have shared their individual scores and the results have been tallied, note which topics received the highest scores. These are the ones the whole group has decided are most important. Allow the group an opportunity to negotiate and reprioritize based on the discussion.

How do I choose a lesson?

Once you have decided upon the topics you will cover, the next step is to choose lessons or activities. There is no need to reinvent the wheel. Educators have already created activities on every sexuality-related topic you can think of and these lessons can be easily modified and adapted to fit your group. There are curricula listed in the resource section of this guide that can get you started.

Throughout this publication we have included stories from youth-serving programs around the country. Some of these examples explain lessons and activities that they have used to address topics such as body-image, relationships, contraception, and STDs. These lessons can be replicated or adapted for the youth you work with. In addition, the resource section in the back of this guide includes curricula and collections of lessons plans that provide step-by-step instructions for facilitating a variety of innovative activities.



HELP ALONG THE WAY

Evaluating Lessons Plans and Curricula

There are hundreds of available lessons that you can use to cover a variety of sexuality-related topics. Choosing a lesson involves picking the topics to address, determining the amount of time you spend on each topic, and deciding on the format that works best in your program. These simple questions can help you evaluate the lesson plans you come across and ultimately find those that best meet the needs of the young people you are working with.

Reviewing Topics and Messages

The *Guidelines* can help you evaluate lesson plans by giving you a framework of suggested concept topics and messages.

- Which of the six key concepts does this lesson address?
- Which topics suggested for this key concept are included?
- Which topics suggested for this key concept are not included?
- Are the messages included in the lesson similar to those suggested by the *Guidelines*?
- Are the messages included in the lesson age-appropriate according to the *Guidelines*?
- Are there important messages suggested in the *Guidelines* that have been left out?

Ensuring Skills are Addressed

In addition to providing information, the best lessons on sexuality provide young people with opportunities to learn and practice a number of important skills.

- Does the lesson help young people build self-esteem?
- Does the lesson help young people identify other sources of information/help?
- Does the lesson help young people learn critical analysis skills?
- Does the lesson help young people identify risk factors?
- Does the lesson help young people practice decision-making and negotiation skills?
- Does the lesson help young people practice communication skills?

Checking Accuracy and Appropriateness

In addition to looking at the topics and skills addressed, it is important to make sure that the information included in the lesson is accurate, up-to-date, and appropriate for your students.

- Is the information in the lesson scientifically and medically accurate?
- Is the information up-to-date?
- Is the information presented in a way that is appealing to young people?
- Is the lesson, including graphics, materials, and examples, culturally appropriate for the age, race/ethnicity, and sexual orientation of all the young people you work with?



Weeding out Fear and Shame

Some sexuality education curricula and lessons rely on messages of fear and shame to try to control young people's sexual behavior. There is no evidence that using fear will help young people delay sexual activity and some of these messages may negatively affect their views of sexuality. These questions can help you identify and avoid fear-based lessons.

- Does the lesson indicate that pre-marital sexual behavior inevitably leads to pregnancy, STDs, guilt, bad relationships, or other negative consequences?
 - Does the lesson portray students who have engaged in sexual behavior as troubled or less worthy of respect?
 - Does the lesson portray sexuality/sexual behaviors as a force that young people cannot control?
 - Does the lesson assert that STDs and unintended pregnancy are never an issue for married couples?
-



IDEAS YOU CAN USE

Things You Can Do to Help Get Started

1. Educate your community on the importance of addressing the whole young person, not just segmented pieces.
2. Research the needs of the young people in your community.
3. Become a resource.
4. Train your staff to help them become comfortable discussing sexuality.
5. Practice talking about sexuality before potentially uncomfortable situations occur.
6. Start a program that incorporates sexuality education into your organization.
7. Hire an outside expert to help you address unfamiliar topics.
8. Develop an organizational policy on sexuality.
9. Bring in outside speakers.
10. Incorporate activities that address different components of sexuality education.



IDEAS YOU CAN USE

Lesson Proves a Few Minutes Can Make a Big Difference

One of the biggest obstacles when choosing topics and lessons is time. If you find yourself overwhelmed by the number of things you want to cover in a short amount of time, you're not alone. The following lesson is an excellent example of how numerous topics can be addressed in one session. This lesson covers STIs, HIV, and contraception and can be completed in as little as 40 minutes.

ALL TOGETHER NOW: A ONE-SHOT, 40-MINUTE LESSON¹

OBJECTIVES

Participants will:

1. Examine their personal feelings about the relative risks of unplanned pregnancy, sexually transmitted infections (STIs), and HIV.
2. Compare the effectiveness of the major methods for preventing pregnancy and STI/HIV.
3. Discuss integrating prevention of unplanned pregnancy with preventing STI/HIV.

RATIONALE

Unfortunately, educators sometimes have only a single session in which to talk with students about contraception and safer sex. Although one session is completely inadequate, research indicates that even a one-shot lesson can have a positive effect on participant knowledge regarding specific contraceptive methods and their comfort in accessing reproductive health care.² We find that the precious 40 minutes are best spent raising participants' consciousness and helping them assess their own risk, rather than in detailing facts about each method of contraception. This lesson emphasizes the importance of preventing both unplanned pregnancy and STI/HIV.

MATERIALS

- *Worksheet: All Together Now: Preventing Unplanned Pregnancy and STI/HIV*
- *Contraceptive Options Chart* from the manual *Positive Images: Teaching Abstinence, Contraception, and Sexual Health, Third Edition* or pamphlets describing contraceptive choices.
- A set of large signs with the following:
 - Very Effective Protection (No/Very Low Risk)
 - Some Protection (Some Risk)
 - No Protection (High Risk)
 - Pregnancy
 - STI/HIV



- Two sets of signs; each set a different color, with the following labels:

Abstinence	Female Condom	Outercourse
Condom and Spermicide	Implant	Spermicide Alone
Contraceptive Patch	Lunelle®	The Pill
Depo-Provera®	Male Condom	Vaginal Ring
Diaphragm	No Method	Withdrawal

PROCEDURE

(Before the lesson begins, put the large signs on the wall or board in the format shown on the Worksheet.)

1. Put the following words on the board or newsprint and ask participants to rank them:

- Pregnancy
 - Sexually Transmitted Infection
 - HIV
- a. the most difficult for you to deal with at this time in your life
 - b. the second most difficult
 - c. the least difficult

Discussion Questions

- a. What are the reasons for your ranking?
 - b. Among the people you know, are they more likely to be at risk for an unplanned pregnancy, an STI, or HIV?
 - c. How much do people you know think about ways they can avoid all three risks? Explain.
2. Distribute:
 - a. *Worksheet: All Together Now: Preventing Unplanned Pregnancy and STI/HIV*
 - b. The *Contraceptive Options Chart* or pamphlets describing contraceptive choices
 - c. The 30 smaller signs; if too few participants, some can take two or more; if too many participants, some can work in pairs
 3. Show participants the large signs on the wall that mark a continuum of protection from unplanned pregnancy, from “Very Effective Protection” (very low or no risk) to “No Protection” (high risk).
 4. Ask participants with *one* color of signs (e.g., blue) to use the *Contraceptive Options Chart* or pamphlets to determine where on the “Pregnancy Prevention” section of the continuum their method belongs. When they have decided, they should tape their sign in the correct place showing *how effective that method is in preventing pregnancy*.

Discussion Questions

- a. Does anyone disagree with the location of any of the methods? If you disagree, why? Where should the method be on the continuum? (If the group agrees with the change, move the sign.)
 - b. Are there any other methods we should include?
 - c. What can increase or decrease the effectiveness of a method? (Forgetting to take a pill, certain drugs decrease effectiveness of pill, using oil-based lubricant on a condom.)
5. Ask participants with the other color signs (e.g., yellow) to come forward and tape their method on the bottom part of the chart at the appropriate place, showing *how effective that method is in preventing STI/HIV*.

Discussion Questions

- a. Does anyone disagree with the location of any of these methods?
- b. Looking at the “Pregnancy” (top) part and the “STI/HIV” (bottom) part of the chart, what conclusions do you draw? What questions do you have? (Emphasize that some methods that are most effective for preventing pregnancy do *not* protect against STI/HIV.)

Note: Spermicidal methods are *NOT* recommended for protecting against STIs. Rather, they sometimes act as a skin irritant, resulting in lesions that could actually facilitate the transmission of STIs.

6. Ask participants to quickly fill in the tops of their *Worksheets* and then answer the questions on the bottom. Emphasize that the *Worksheets* are confidential and will not be collected.

Discussion Questions

- a. How can teens protect themselves from *both* pregnancy and STI/HIV?
- b. Do you think that people who participate in this lesson will be more likely to protect themselves from unplanned pregnancy and STI/HIV? Explain.



1. Adapted from Brick, P. and Taverner, B. *Positive Images: Teaching Abstinence, Contraception, and Sexual Health, Third Edition*, Morristown, NJ: Planned Parenthood of Greater Northern New Jersey, 2001. For more information about *Positive Images*, please contact PPGNNJ (973/539.9580, ext. 120) or send an e-mail message to Bill.Taverner@ppfa.org.

2. Research done with Pearla Brickner Namerow, Ph.D., Columbia University, Center for Population and Family Health.

© Copyright by Planned Parenthood of Greater Northern New Jersey, 973/539.9850. All rights reserved.

Reprinted with permission from Brick, P. and Taverner, B. (2001). *Positive Images: Teaching Abstinence, Contraception, and Sexual Health, Second Edition*. © Copyright by Planned Parenthood of Greater Northern New Jersey, 973/539.9850. All rights reserved.

Worksheet: All Together Now: Preventing Unplanned Pregnancy and STI/HIV

1. Place each method on the chart twice, creating one continuum for the protection it gives in preventing pregnancy and once for the protection it gives in preventing STI/HIV:

Abstinence	Female Condom	Outercourse
Condom and Spermicide	Implant	Spermicide Alone
Contraceptive Patch	Lunelle®	The Pill
Depo-Provera®	Male Condom	Vaginal Ring
Diaphragm	No Method	Withdrawal

P
R
E
G
N
A
N
C
Y

Very Effective Protection (No/Very Low Risk)	Some Protection (Some Risk)	No Protection (High Risk)
--	---------------------------------------	-------------------------------------

S
T
I
/
H
I
V

- Considering your own behavior now, where on the continuum of risk do you place yourself for an unplanned pregnancy? ☐ No/Very Low ☐ Some ☐ High
for a sexually transmitted infection? ☐ No/Very Low ☐ Some ☐ High
- Do you want to change your location on the continuum? ☐ Yes ☐ No
- If yes, one thing you could do is: _____

THE CONTRACEPTIVE OPTIONS CHART

METHOD	KEY ADVANTAGES	SOME POSSIBLE PROBLEMS	EFFECTIVENESS*
Abstinence	No physical side effects Nothing to purchase Excellent protection against sexually transmitted infections (STI)	Requires commitment and self-control by both partners Social pressure to engage in intercourse Many people fail to use protection when abstinence ends	100% if used consistently
Birth Control Pill	Continuous protection against pregnancy Nothing to apply or insert at time of intercourse More regular, shorter periods Ability to become pregnant returns quickly when use is stopped	Must remember to take daily Possible side effects: nausea, breast tenderness, weight gain or loss Rare, but serious health risks (blood clots, heart attack, and stroke — these risks are higher for women over 35 who smoke) No protection against STI	92% to 99+% if used correctly and consistently
Implant*	Continuous protection against pregnancy for 5 years (Norplant) or 3 years (Implanon) Nothing to apply or insert at time of intercourse	Minor surgical procedure Irregular menstrual bleeding Possible weight gain or loss Visible — can be seen under skin No protection against STI	99+%
Injection	Continuous protection against pregnancy for 3 months Nothing to remember Menstruation ceases for over 50% of women Confidential	Visit to clinician every 3 months Non-reversible until effects wear off Return to fertility may take several months No protection against STI Possible weight gain	97% to 99+% if used consistently
Contraceptive Patch	Continuous protection against pregnancy for 1 month Nothing to apply or insert at time of intercourse Other physiological advantages the same as those of the pill	Must remember to replace patch weekly Visible — worn on the skin Not available in all skin tones No protection against STI Not recommended for women over 198 pounds	99+% if used correctly and consistently

THE CONTRACEPTIVE OPTIONS CHART

METHOD	KEY ADVANTAGES	SOME POSSIBLE PROBLEMS	EFFECTIVENESS*
Vaginal Ring	<p>Continuous protection against pregnancy for one month</p> <p>No precise placement necessary</p> <p>Nothing to apply or insert at time of intercourse</p> <p>Other physiological advantages the same as those of the pill</p>	<p>Must remember to remove during week of menstruation, and then insert new ring for next 3 weeks</p> <p>Requires high level of comfort with one's body</p> <p>No protection against STI</p>	99+% if used correctly and consistently
Intrauterine Device (IUD)	<p>Two types — one offers continuous protection against pregnancy for 5 years, the other for 10 years</p> <p>Nothing to apply or insert at time of intercourse</p> <p>IUDs with hormones may reduce menstrual cramps and bleeding</p> <p>Non-hormonal IUDs are an alternative for women who cannot use hormonal methods</p>	<p>Must be inserted and removed by clinician</p> <p>Heavier periods</p> <p>Rare, but serious health risks (uterine expulsion or perforation, pelvic inflammatory disease)</p> <p>No protection against STI</p> <p>Not typically recommended for adolescents</p>	98%
Male Condom	<p>Excellent protection against STI</p> <p>May help delay ejaculation</p> <p>Male involvement</p> <p>Inexpensive, available over the counter</p>	<p>May leak or break if used incorrectly</p> <p>May interfere with spontaneity</p>	85% to 98% if used correctly and consistently
Female Condom	<p>Available over the counter</p> <p>Alternative for people with latex allergies</p> <p>Good protection against STI</p>	<p>Requires high level of comfort with one's body</p> <p>May be difficult to insert</p> <p>May become dislodged during intercourse</p> <p>May interfere with spontaneity</p>	71% to 85% if used correctly and consistently
Diaphragm or Cervical Cap	<p>Can be inserted before in advance of intercourse</p> <p>Can remain in place for multiple acts of intercourse (diaphragm — 24 hours; cervical cap — 48 hours)</p>	<p>Requires high level of comfort with one's body</p> <p>Requires fitting by clinician</p> <p>May be difficult to insert</p> <p>Limited STI protection, but also possibility of irritation (by spermicide) that could facilitate STI transmission</p>	84% to 91% (cap) or 94% (diaphragm) if used correctly and consistently

THE CONTRACEPTIVE OPTIONS CHART

METHOD	KEY ADVANTAGES	SOME POSSIBLE PROBLEMS	EFFECTIVENESS*
Spermicides	Available over the counter in a variety of forms (creams, films, foams, gels, suppositories) Nothing to purchase Available as a last resort	Timing: must insert close to each intercourse May cause allergic reaction Possibility of irritation that could facilitate STI transmission	71% to 85% if used correctly and consistently
Withdrawal	Nothing to purchase Available as a last resort	Dependent on male partner Requires great control May affect pleasure No protection against STI	Effectiveness varies: failure rate increases if the male doesn't predict and control ejaculation correctly
Fertility Awareness Method	Nothing to purchase Permitted by some religious groups that prohibit the use of other methods	Requires commitment No intercourse for much of the menstrual cycle No protection against STI	75% to 99% if used correctly and consistently; combined use of calendar, basal temperature, and cervical mucous methods
No Method	Nothing to purchase	No protection against pregnancy No protection against STI	15%
Vasectomy and Tubal Ligation	Permanent protection against pregnancy Nothing to apply or insert at time of intercourse	Requires surgery Reversal has relatively low success rate No protection against STI	99+%
Emergency Contraception	Can be used up to 120 hours after unprotected intercourse Good for emergency situations	May cause nausea and vomiting Not for regular use No protection against STI	Effectiveness depends on timing. The sooner e.c. is taken after unprotected intercourse, the higher the success rate. Used within 24 hours — reduces risk of pregnancy by up to 95%; used within 72 hours — reduces risk of pregnancy by 75% to 89%

Note:

* If a method is 99% effective, 99 women in 100 having sexual intercourse regularly for one year are expected **not** to become pregnant. If a method is 15% effective, 15 women out of 100 would be expected **not** to become pregnant. (Lower percentages indicate “typical user” rates; higher percentages indicate “perfect user” rates.)

Sources: Hatcher, R. et al, *A Pocket Guide to Managing Contraception*, 2002–2003, 2002.

Hatcher, R. et al, *Contraceptive Technology*, 17th Edition, 1998.

Planned Parenthood Federation of America, *Your Contraceptive Choices*, 2002.

To be used with *Positive Images: Teaching Abstinence, Contraception, and Sexual Health*, Third Edition.

Brick and Taverner, Planned Parenthood of Greater Northern New Jersey, 2001, revised 2003.



Learning from Others

Program Highlights

In preparing this guide, SIECUS put out a call to professionals around the country to learn about strategies, programs, and approaches used to weave components of sexuality education and youth development into innovative programs for young people. By sharing these diverse programs, SIECUS hopes to provide you with exciting ideas and the encouragement you need to begin to address sexuality education within your program.

Adelante Amigos

***Organization: Planned Parenthood of Santa Barbara,
Ventura & San Luis Obispo Counties***

Type of Program: Six-year comprehensive program for Latino adolescents

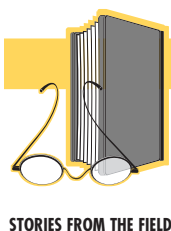
The *Adelante Amigos* (Move Forward Friends) program was developed by Planned Parenthood of Santa Barbara, Ventura & San Luis Obispo Counties in 1996 based on its *Amigo a Amigo* (Friend to Friend) peer outreach program and the Children's Aid Society youth development model. *Adelante Amigos* targets lower-income, high-risk Latino youth beginning in late junior or early senior high school and continuing

through two years post high school. The program integrates family life and sexual health education with academic support, college and career planning, employment opportunities, small group mentoring, counseling, case management, recreation, health care access, peer outreach, and community service.

Participants meet as a group with the program coordinator for two hours every week. Participants report on school progress and family or other issues, eat a meal together, and discuss a selected topic, such as college enrollment procedures, job application skills, or contraception. The coordinator also communicates with each participant once a week by telephone, and is available 24 hours a day to assist with school, family, and other personal problems. Each month, the group takes weekend field trips to educational, community-service, or recreational sites, such as local community colleges, family-planning clinics, or professional basketball games. Twice a year, the group also takes multi-day overnight trips to metropolitan cities or wilderness areas.

Each participant is expected to share reproductive health, family planning, and referral information with a minimum of 30 friends, family members, or others each year. Participants are paid a stipend of a few hundred dollars per year for completion of peer outreach and program participation. In some cases, the stipend has been divided into weekly payments for satisfactory school performance. A scholarship fund is available to help cover college, trade school, and related expenses. The program costs \$3,000–5,000 per participant per year, depending on the amount spent on activities, stipends, and food. Recent data shows that nearly 90% of the participants continue on to college after this program.

Contact information: Dr. Scott McCann, Planned Parenthood of Santa Barbara, Ventura & San Luis Obispo Counties. 518 Garden St., Santa Barbara, CA 93101. Phone: 805/963-2445, extension 22. E-mail: scott.mccann@ppfa.org
Web site: www.ppsbvslo.org



STORIES FROM THE FIELD

Program Inspires One At-risk Youth to Become School Counselor

George has been with the Santa Paula *Adelante Amigos* youth group since 1996. When George joined the group, he never thought about going to college because he always thought he would follow his father's footsteps and work in the fields after high school. In addition, many of George's friends were in gangs and not going to school, so school didn't look too attractive to him at the time. However, George gave *Adelante Amigos* a chance and attended the weekly meetings. He listened to his educator and began to discuss issues related to teen pregnancy, substance abuse, gangs, relationships, and academic achievement. Over time, George began to understand the value of education and his desire to attend college magnified. By the time George was a senior in high school, he had a firm plan in place. George graduated in 2000 and entered California's

state college system. George is now a junior at California State Northridge and is looking forward to graduating with a Bachelor's Degree in Psychology in 2004. George says that he wants to go on to graduate school because he wants to work as a high school counselor. George attributes his success and desire for higher education to the time he spent in *Adelante Amigos* and says that he wants to be able to give kids the same kind of information and inspiration he received.

Adolescent Communication and Education

Organization: Institute of Women and Ethnic Studies, New Orleans, LA

Type of Program: Teen Led Sexual Health Education

The Adolescent Communication and Education Program (ACE) empowers inner-city youth in New Orleans, LA with its successful programs: *Teen Expression*, a teen talk show on cable television; *Pillow Talk*, peer-led slumber parties and group meetings; and the New Orleans *¡Ahora! Project*, an education and community mobilization project.

Teen Expression, a talk show for and by teens, was designed to get adolescents to talk positively about social and health issues and to begin to change high-risk behaviors. A core group of local teens coordinate all aspects of the show, including hosting, reporting, editing, and directing. During the show, teens discuss such topics as HIV/AIDS, STDs, drug use and abuse, dating and relationships, teen pregnancy, and violence.

Pillow Talk group meetings and slumber parties are designed for African-American females, ages 13 to 24, to provide an opportunity to discuss sexual health. *Pillow Talk* sessions are held at a variety of sites including college women's centers, bed and breakfasts, and private homes. They are led by students from local universities and colleges who have participated in a two-day peer training and HIV risk-reduction program utilizing the *Power Moves* curriculum.

The New Orleans *¡Ahora! Project* utilizes a youth-driven approach to address the stigma of HIV/AIDS and sexuality in the Latino community. The project's Youth Advisory Team, which consists of local Latino youth between the ages of 16 and 23, conducts small group sessions, collaborates in community activities, and participates in media events to raise awareness, activism, and unity. The project is currently working on a documentary on parental community involvement regarding sexual health issues.

Overall, the ACE Program has increased young people's awareness and positive attitudes about healthy sexual behaviors by: engaging them in critical thinking and organizing, which increases their ownership of social and health issues; giving them a broader audience for their ideas, questions, and opinions; enhancing their self-esteem through skill building; supporting their ideas with resources and positive feedback; and broadening their perspectives on options and information relating to social issues and behaviors that influence sexual health outcomes.

Successful strategies employed by ACE include: combining youth development and health education through media production; supporting young people in designing and implementing their own youth-driven initiatives and projects; and creating audience-centered and culturally specific project approaches.

Contact information: Euna August, Executive Director, Institute of Women and Ethnic Studies. 1600 Canal Street, Suite 706, New Orleans, LA 70112. Phone: 504/539.9350. E-mail: august@iwes.org Web site: <http://www.iwes.org>

BRIGHT Families Mentor Project

Organization: Collaboration of 11 local organizations, San Diego, CA

Type of Program: Mentoring Program

The San Diego *BRIGHT Families* Project is a mentoring program that helps youth negotiate their turbulent teen years. A primary goal of the program is to provide youth with the knowledge and strength to avoid teen pregnancy. In addition, the program focuses on teaching teens how to have positive relationships, fostering a caring environment to help build self-esteem, and exposing teens to different opportunities for careers and education.

Mentors spend six months with their teens, for at least five hours per month. They talk with teens about reproductive health, teach them how to set and achieve goals, help with homework, and form positive relationships. *BRIGHT Families* trains mentors on the reproductive health curriculum and also shows them how to effectively work with their mentees. In addition, the project provides mentor support and holds fun and educational group activities every month.

Contact information: Dana Goodrow, Director, University of California at San Diego, Department of Reproductive Medicine, Division of Community Service. 7071 Convoy Court, Suite 101, San Diego, CA 92111. Phone: 858/514.7549. E-mail: dmgardner@ucsd.edu Web site: <http://www.bright-families.org>

Bright Passages; Checkpoint; Reflections; Youth AHEAD

Organization: Planned Parenthood of Western Washington

Type of Program: Youth Development and Sexuality Education

Planned Parenthood of Western Washington offers four youth development programs that target potentially “at-risk” youth who range in age from 12 to 19. *Bright Passages*, *Reflections*, and *Checkpoint* are school-based programs, while *Youth AHEAD* works primarily with street youth. Two of the programs are based in rural areas and work with girls only while the other two are in urban areas and work with boys and girls.

Program participants are chosen based on risk factors for teen pregnancy and parenting. Each program stresses the importance of communication and decision-making skills for their youth through weekly educational support groups.

Management, tutoring, recreation/art activities or field trips, and parent outreach are also a part of the programs.

Contact information: Planned Parenthood of Western Washington. 2001 East Madison Street, Seattle, Washington 98122. Phone: 360/570.7441. Web site: www.ppww.org

Children's Aid Society—Carrera Program

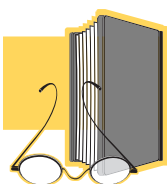
Organization: *Children's Aid Society, New York, NY*

Type of Program: *Holistic teen pregnancy prevention program*

In 1984, Dr. Michael Carrera and The Children's Aid Society developed a teen pregnancy prevention model that is holistic and long-term. The program centers on all of the forces and factors affecting the life of a teen at this time in their development and discusses sexual issues within the context of an adolescent's whole life.

The program incorporates a separate parent participation section and comprises seven components: educational support; career awareness and job club; lifetime sports; creative expression; comprehensive medical and dental services; mental health services; and family life and sexuality education. The overall philosophy of this approach is based on the belief that young people are not "at risk" but rather "at promise." Children's Aid Society works with young people's goodness, gifts, and possibilities. Currently, there are 21 replications and 30 other programs in 20 states throughout the country.

Contact information: The Children's Aid Society National Training Center. 350 East 88th Street, 3rd Floor, New York, NY 10128. Phone: 212/876.9716. Web site: www.stopteenpregnancy.com



STORIES FROM THE FIELD

From Community Center to Martin Luther King Jr.'s *Fulfilling the Dream Award*

leasha Jones was awarded the Martin Luther King Jr.'s *Fulfilling the Dream Award* in February 2003. The award is granted to people or organizations that are making a difference in their community.

leasha Jones enrolled in the Children's Aid Society—Carrera Program (CAS—Carrera) in Club Real Deal at the Minisink Town House in New York while in junior high school. Although faced with many challenges at home and in school, leasha continued to participate in the program throughout junior and senior high school.

Since her graduation from high school and experience in the CAS—Carrera program, leasha developed a strong desire to help other teens and enrich her community. She exercises these values by tutoring young teens after school and heading a cheerleading team, both at the community center she grew up in. ➤

In the words of one of leasha's mentors, she has "demonstrated self-direction and leadership in her studies and life choices. She has an unyielding capacity to express empathy, generosity, and caring."

leasha credits much of her success to the CAS—Carrera program and says the center is "like a second family." She is in her 3rd year at Long Island University studying sociology and political science and plans on attending law school after graduation.

Circulo de Salud

Organization: Planned Parenthood Los Angeles, Los Angeles, CA

Type of Program: Peer-led health and wellness program for young Latino men

The *Circulo de Salud* program was born out of a collaborative effort between Planned Parenthood Los Angeles and Bienvenidos Family Services. It is designed for young men, ages 12 to 24, who would like to join other young men involved in a positive movement to improve their health, their family's health, and their community's health. The program addresses adolescent health and sexual responsibility using *El Joven Noble*, a curriculum that promotes responsibility through cultural values. *El Joven Noble* is a 10-part program that emphasizes self-reflection, mutual support, and personal development as the way to reinforce existing traditional values.

The peer educators are extensively trained to facilitate these sessions and are able to relate to the youth of the community through their own experiences. The program also offers tutoring, mentoring, and advocacy help for community and educational issues.

Contact information: Circulo de Salud, The National Latino Fatherhood and Family Institute. 560 S. St. Louis Street, Los Angeles, CA 90033. Phone: 323/262.4775. Web site: <http://www.pplosangeles.org>

Dads Make a Difference

Organization: Maryland Cooperative Extension

Type of Program: Peer-led fatherhood program

Dads Make a Difference is a paternity-education program that uses a cross-age teaching model in which older teens, both boys and girls ages 16 to 18, teach middle school-age youth. The *Dads Make a Difference* curriculum consists of four lessons, an eighteen-minute video, and eight supplemental activities. Lessons address risk and risky behavior; the legal issues of fatherhood; how families can differ from one another; ways in which fathers and mothers provide support for their children; developing a vision for the future; how risks can alter one's future; and how people are responsible for their choices.

Teens prepare to teach the curriculum by attending an intensive one-day training with their adult advisors. This “training of trainers” is lead by a pair of adult trainers (one male and one female) as well as a pair of already experienced peer-educators (also one male and one female). Teens and adults at the training discuss risks, families, parental responsibilities, and decision-making. They observe teen and adult trainers as they model the teaching of the lessons, acquire skills for effective teaching of middle school students, and practice teaching the curriculum.

Contact information: Sandra M. Mason, Project Director, Dads Make A Difference. Maryland 4-H Center, 8020 Greenmead Drive, College Park, MD 20740. Phone: 301/314.7831. E-mail: sm11@umail.umd.edu

girltime

Organization: Community Wellness Center, Taos, New Mexico

Type of Program: Holistic after-school program for adolescent females

Girltime, in existence since 1999, is an after-school and summer youth development program that provides age-appropriate reproductive health education to 30 females ages 9–14 in Taos County. *Girltime* meets three days per week during the school year for a total of eight or more hours, addressing such issues as being from a single-parent family, having siblings or mothers that are/were teen parents; and the presence of alcoholism or drug abuse in the family.

Participants are offered various methods and media for self-expression, including arts/craft activities, writing exercises, check-ins prior to group interaction, and physical exercise and recreation. The girls learn problem resolution and assertiveness through the use of role-play and dramatization, self-defense training, dance, cooking, information and education regarding media literacy, and nutrition. Participants are also exposed to choices for a lifetime of individual fitness such as horseback riding, swimming, and hiking.

Girltime also provides case management services, parent conferences, and other special programs for parents, such as the *Can We Talk?* series, which promotes parent/child communication about puberty and reproductive health.

Contact information: Community Wellness Center, *girltime*. 203 Kitcarson Rd., Taos, NM 87571. Phone: 505/758.9343



STORIES FROM THE FIELD

Program Teaches Girls about Womanhood and Culture

During the celebration of Hispanic Culture Month, *girltime* participants are exposed to various aspects of culture that might not otherwise be readily available to them.

For one such event, the program brings in an *abuela* (Spanish for grandmother). The *abuela* teaches the girls to crochet and each girl is responsible for creating one square of a handmade blanket. As they work, the *abuela* teaches them Spanish-language folk songs and talks to the girls about what it means to be a woman in the Hispanic community. When the blanket is finished, it is donated to the “Linus Project,” a national organization that provides hand-crafted blankets or quilts to children in hospitals around the country.

Program Developer Tammy Moon believes this activity helps the girls feel connected to their culture and more complete as young women. This in turn helps to increase their self-confidence.

Hollywood Teen Community Project

**Organization: Division of Adolescent Medicine,
Children’s Hospital, Los Angeles, CA**

Type of Program: Support for youth development organizations addressing sexual health

The *Hollywood Teen Community Project* (HTCP) is funded by the California Wellness Foundation as part of its 10-year initiative to reduce teen pregnancy in California. HTCP targets residents and organizations in the Hollywood 90028 zip code area. Although primarily a community mobilization project, HTCP’s work focuses heavily on youth development to generate youth expertise and leadership around healthy adolescent sexuality. HTCP is working with the Hollywood LA Bridges Youth Violence Prevention Program, Hollywood Boys and Girls Club, Hollywood Police Activities League, LA Parks & Recreation, and the LACER after-school program to help them integrate healthy adolescent sexuality and teen pregnancy prevention into their programming. Strategies include:

- *Staff Development:* Training for all the staff who have contact with youth about healthy adolescent sexuality, boundaries, teachable moments, and community resources/referrals.
- *Policy Development:* Helping organizations develop policies and protocols regarding sexuality education and counseling.
- *Youth Activities:* Facilitating youth discussion groups about sexuality.
- *Parent Activities:* Training adults as *promotoras* (health promoters) to educate other adults in the community on a variety of topics related to healthy sexuality and positive family communication. This program is conducted in Spanish.

- *Media and Materials:* Providing sexuality and teen pregnancy prevention-related posters, fliers, brochures, stickers, books, and other health education materials to partnering youth development agencies. The *HTCP* Youth Leadership Board also produces a quarterly magazine (*UNITY*), by and for youth, about sexuality topics and other important issues to teens.

Contact information: Jena Bauman, MPH, Director, Hollywood Teen Community Project, Children's Hospital Los Angeles. P.O. Box 54700, MS #2, Los Angeles, CA 90054. Phone: 323/669.2503. Fax: 323/913.3614.

Web site: www.letsgetreal.org/caps_hollywood.htm

Lawrence Teen Coalition

Organization: Greater Lawrence Community Action Council, Inc., Lawrence, MA

Type of Program: Community-based organizations integrating adolescent pregnancy prevention

The *Lawrence Teen Coalition* runs a health education and outreach program that integrates an adolescent pregnancy prevention program with the work of existing community-based organizations. Trained health educators work with participating organizations to design programs at least eight weeks long. These programs utilize best practices and effective curricula to meet the interests, needs, and age of the group. The programs work with court-involved youth, after-school programs in youth centers, and with youth employment and training programs.

They reach parents and children who otherwise might not have the opportunity to receive accurate information and skill-building opportunities to help prevent pregnancy. Also, since the young people are part of another program, they receive other supports, such as help with homework and recreational/sports activities. At the same time, *Lawrence Teen Coalition* staff can discuss many topics that the workers from these community-based organizations feel ill prepared to discuss. *Lawrence Teen Coalition* reports that teens prefer to talk about sexuality issues with the trained staff members, who are more comfortable with the topics, than other adults such as their teachers.

These programs complement and reinforce what the youth learn in public schools. For example, while the public schools do have a comprehensive health education program, they do not provide a lot of sexuality education.

Contact information: Lawrence Teen Coalition. 15 Union Street, Suite 403, Lawrence, MA 01840. Phone: 978/681.4978. Fax: 978/681.4979. Web site: www.glcac.org
E-mail: cparadiso@glcac.org

Metro Council for Teen Potential

Organization: *Baden Street Settlement of Rochester, Inc., Rochester, NY*

Type of Program: *Youth development and teen pregnancy prevention*

The *Metro Council for Teen Potential* (MCTP) was organized in 1986 to coordinate and expand teen pregnancy prevention and youth development and health efforts in Rochester, NY. *MCTP* is an unincorporated membership association. Its members represent human service agencies, government bodies, schools, church and religious groups, hospitals and health clinics, and neighborhood associations, as well as parents and teens. *MCTP* coordinates the following programs:

- CONECTS sponsors clubs for teens that incorporate the Teen Outreach Program. CONECTS is a state-funded program that also offers case management for teen parents.
- *MCTP* provides staff training and staff coaching for local replications of the Teen Outreach Program in other after-school settings. This curriculum has been evaluated on a national basis, and has been found to increase academic success and reduce the rates of teen pregnancy.
- *MCTP* collaborates with the Family Resource Centers of Rochester to present a parent-child communication program called *Parents as Primary Sexuality Educators*. This four-part workshop series has been evaluated by the University of Rochester. It was found to increase parents' feelings of competence and confidence, and to increase communication between parents and their children regarding relationships and sexuality.
- *MCTP* promotes youth leadership opportunities, including *Youth Voice One Vision*, a program that engages youth leadership clubs from city recreation centers and other *MCTP* member agencies to work with the Rochester 2010 planning and civic improvement process. Young people undertake community service projects and regularly meet with top government officials to convey youth concerns and youth perspectives on local issues.
- *What's Next*, a skills-based health communications curriculum that was developed with the Rochester City School District for use in classrooms, after-school programs, and to air on public access TV. Three original dramatic video stories address the issues young people face: relationships, sexuality, teen pregnancy, substance abuse, problems with parents, HIV/STDs, etc. Each video story is accompanied by a teacher's guide.
- Access to health care. *MCTP* is a member of the In Control collaborative, with Planned Parenthood of the Rochester/Syracuse Region as the lead agency. In Control provides outreach, reproductive health care, and health education to young people in the City of Rochester.

- A community-planning process to improve HIV prevention efforts for young people of color. *MCTP* recently issued a report called *Youth and HIV Prevention, the Rochester Report*, that outlines extensive recommendations to prevent HIV infections.
- The Metro Teen Hotline (1-888-YOUTH-CAL) and other media messages to connect youth to services.

Contact information: Metro Council for Teen Potential. 585 Joseph Avenue, Rochester, NY 14605. Phone: 585/325.8123. Fax: 585/546.1491. Web site: www.metrocouncil.us

Now For The Future

Organization: *Planned Parenthood of Greater Indiana, Indianapolis, IN*

Type of Program: *Holistic teen pregnancy prevention program*

Now For the Future is a comprehensive program designed to prevent adolescent pregnancy in Marion County, IN. It is modeled after the nationally acclaimed CAS–Carrera program. Based on the philosophy that each young person must be given opportunities to achieve his or her fullest potential, *Now For The Future* focuses on eight principles: positive influence; healthy environment; opportunities to succeed; consistent reinforcement; self-esteem; understanding about sexual behavior; excellent academics; and appropriate role models.

Contact information: Kathleen Baldwin, Planned Parenthood of Greater Indiana. 3209 N. Meridian St., Indianapolis, IN 46208. Phone: 317/927.3644, ext. 151. Web site: www.ppin.org E-mail: kathleen@ppcsi.org



STORIES FROM THE FIELD

The Road from Gangs to Assistant Manager

When the *Adelante Amigos* youth program started in 1998, Emmanuel Cruz was an impoverished “Goleta 13” gang member who was failing the eighth grade. No doubt his rough neighborhood, negative peer pressure, and the lack of positive male role models had steered Emmanuel toward a path of criminal activity. However, at the recommendation of his junior high school counselor, Emmanuel decided to join the *Adelante Amigos* program that met at his school.

As a member of the group, Emmanuel attended weekly meetings and discussed issues related to male responsibility, human sexuality, substance abuse, gangs, and academic success. Emmanuel enjoyed his time with the group and in a short while noticed that his grades had improved. Emmanuel passed the eighth grade and decided to stick with the group throughout high school. High school proved to be a challenge for Emmanuel, both academically (it was discovered that Emmanuel had some learning disabilities) and socially (constant negative peer pressure from his



gang-related friends). But Emmanuel worked hard and eventually conquered these issues. A short time before graduation, Emmanuel decided to shun the gang lifestyle and focus on his future.

In June of 2002, Emanuel graduated from high school and began working at Radio Shack as a salesperson. After a few months in this position, Emmanuel was promoted to Assistant Manager and began supervising other employees. Emmanuel's income rose, and with the help of his parents he moved out of his impoverished, gang-ridden neighborhood. Today, Emmanuel is still working at Radio Shack as an Assistant Manager. He is looked upon as a role model by his peers. When asked, Emmanuel attributes his success to a lot of hard work and his interactions with the *Adelante Amigos* program. Emmanuel feels that he never would have passed high school if it were not for his contact with this group.

Preventing Adolescent Pregnancy

Organization: Girls, Inc., Indianapolis, IN

Type of Program: Holistic program for young women

Preventing Adolescent Pregnancy is a four-component program developed by Girls Incorporated to increase young women's skills, motivation, and resources for avoiding pregnancy during the teen years. Many of the young women who participate in the program face some of the highest risks for HIV and other health problems, such as belonging to a racial/ethnic minority, living in poverty, and experiencing at-risk situations. The curriculum gives participants opportunities to consider their behavior and their risks for STDs and HIV, and to develop the skills, motivation, and resources for reducing those risks.

Contact information: Bernice Humphrey, Director, Healthy Girls Initiative, Girls Incorporated, 441 W. Michigan Street, Indianapolis, IN 46202. Phone: 317/634.7546, extension 124. Web site: www.girlsinc.org. E-mail: bhumphrey@girls-inc.org

Sisters Together Acting Responsibly (STAR) & Males Acting Responsibly for Community and Health (MARCH) Programs

Organization: Planned Parenthood of San Diego and Riverside Counties, San Diego, CA

Type of Program: After-school programs

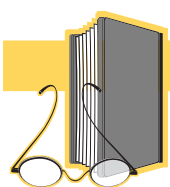
STAR (Sisters Together Acting Responsibly) and *MARCH (Males Acting Responsibly for Community and Health)* are two after-school programs offered to fifth and sixth graders. The *STAR* and *MARCH* programs emphasize a whole-person experience and focus on building self-esteem, strengthening community involvement, and assisting participants in developing skills that will help them set and achieve their goals. The goal of the program is to give boys and girls the skills they need to make healthy decisions now and in their future.

STAR and *MARCH* are 11-week programs that meet once a week for 90 minutes. The classroom lessons include discussions of puberty, the media's impact, decision-making, relationships, and goal setting. Participants also have the opportunity to take part in outings for community service such as planting trees, feeding the homeless, and removing graffiti, as well as fun outings including picnics, harbor cruises, and trips to the zoo.

Contact information: Planned Parenthood of San Diego and Riverside Counties.

1075 Camino del Rio South, San Diego, CA 92108. Phone: 619/881.4671.

Fax: 619/542.0486. Web site: <http://www.planned.org>



STORIES FROM THE FIELD

STAR Program Helps Start the Conversation at Home

Sara, a *STAR* participant, asked her mom about her period but her mom did not know how to explain it to her. The following week, after making a menstruation bracelet at *STAR*, Sara went home and showed it to her mom, explaining what each bead represented. This led to a long talk about puberty. Sara said it was the first time she had ever talked to her mom about those things. She was surprised about all the things her mom knew. The next week Sara's mom called and thanked the *STAR* educators for doing a great job. She explained that Sara was the oldest and she just didn't know how to initiate the conversation. She was happy that the *STAR* program helped begin the dialogue around sexuality and opened a door for them to continue this conversation together.

Teen Advocates Sharing Knowledge (TASK)

Organization: Malden YWCA, Malden, MA

Type of Program: Peer education program stressing communication skills

Teen Advocates Sharing Knowledge (TASK) is a peer education program developed and sponsored by the Malden YWCA in Malden, MA, to encourage young people to communicate among themselves and with their parents and teachers about pressing issues ranging from self-image and trust to pregnancy and STDs.

TASK workshops cover a variety of subjects such as leadership training, media literacy/advocacy, sexual assault/harassment, healthy decision-making, healthy relationships, self-image, racism, sexism, homophobia, HIV/STDs, teen pregnancy, teen dating violence, eating disorders, drugs and alcohol, and teamwork/trust-building.

In collaboration with the Malden Health Education Department, *TASK* advocates also host interactive health tables each month at Malden High School. Students are encouraged to answer questions related to sexual decision-making and win prizes. *TASK* also sponsors "Ladies Rap," a monthly program where female teens come together to discuss their opinions on a wide variety of subjects in a safe space.

Contact information: Peg Crowe, Director of Teen Services of the Malden YWCA.
54 Washington Street, Malden, MA 02148. Phone: 781/322.3760. Fax: 781/324.3444.
Web site: www.maldenywca.org E-mail: pcrowe@maldenywca.org

Teen Docent Program

Organization: Brockton Alliance for Youth, Brockton, MA

Type of Program: Art program designed to prevent teen pregnancy

The Brockton Alliance for Youth (BAY) trains adolescent girls ages 14–18, who are deemed “at risk” to be docents at the Fuller Museum of Arts (FMA). They employ them as museum interpreters for fourth- and fifth-grade girls, and mounting an exhibition on the theme of healthy self-esteem. It is the belief of FMA and BAY staff that the best after-school program to help combat teen pregnancy would be one that would not only interest teens, but would also provide them a source of income.

Since 1996, BAY has brought together *Teen Docent Program* participants with a professional artist during the school year to explore issues such as the perception of women, sexuality, multiculturalism, domestic violence, discrimination, and self-esteem. These discussions fuel ideas behind the teens’ own artwork. Teens interact with many of the artists who exhibit at the Fuller Museum of Arts. The teens utilize these experiences to plan activities and discussions for the fourth/fifth grade girls they mentor one day per week for 10 consecutive weeks. The *Teen Docent Program* also has a parent component that encourages parents to directly address issues of healthy choices with their daughters.

Contact information: Fuller Museum of Art. 455 Oak Street, Brockton, MA 02301.
Phone: 508/588.6000. Web site: www.fullermuseum.org

Teen Outreach Program (TOP)

Organization: Cornerstone Consulting, Houston, TX

Type of Program: Youth development through service-learning

The *Teen Outreach Program* (TOP) is a program for young people ages 12 to 17 that combines three interrelated elements: involving young people in structured, supervised volunteer service designed to improve their communities; linking volunteer work to curriculum-guided group discussions of topics directly related to students’ service work; and involving participants in curriculum-guided group discussions and activities on a wide variety of topics related to adolescent development, ranging from managing conflict to human development issues. The Teen Outreach curriculum, *Changing Scenes*, is the centerpiece of group discussions and experiential exercises facilitated by trained adults.

Contact information: Cornerstone Consulting, One Greenway Plaza, Suite 550,
Houston, TX 77046. Phone: 713/627.2322.
Web site: <http://www.cornerstone.to/top/top.html>



This section includes selective resources. These resources will get you started as you explore the vast world of youth development. This list is in no way exhaustive, but only a starting point that will lead you to other resources as you need them.

Sexuality Education Resources

Curricula

Becoming a Responsible Teen: An HIV Risk Reduction Intervention Program for Adolescents (B.A.R.T.)

Janet S. St. Lawrence, Ph.D.

Originally designed for African-American adolescents in non-school settings, this curriculum provides information about HIV/AIDS. It involves teen participants in building the skills they need to clarify their own values about sexual activity and learn how to avoid the risk of becoming infected with HIV. This curriculum is for adolescents in grades nine through 12, and consists of eight sessions. Students are separated by gender to focus on skill development.

\$49.95. ISBN 1560715723. ETR Associates, 4 Carbonero Way, Scottsvalley, CA 95066-4200. Phone: 800/321.4407. Fax: 800/435.8433. Web site: www.etr.org

Changing Scenes: Youth Development Through Service & Learning

Teen Outreach Program (TOP)

The TOP curriculum *Changing Scenes* is a step-by-step guide for adults who facilitate the group discussion component of the Teen Outreach Program. Through the use of age-appropriate content, current educational best practices, and activities and materials that encourage hands-on learning, *Changing Scenes* helps young people navigate the difficult and sometimes threatening journey from adolescence to young adulthood. *Cambios* is the Spanish language version of TOP.

\$295. Cornerstone Consulting Group, Inc., One Greenway Plaza, Suite 550, Houston, TX 77046-0103. Phone: 713/627.2322. Fax: 713/627.3006.

Web site: www.cornerstone.to.top/curricula.html

¿Conversamos?

Helping Families Talk About Self-Esteem, Sex, and Peer Pressure

National Education Association (NEA)

This Spanish-language program helps parents of children in grades four through eight enhance their role as sexuality educators of their children. It is a four-part workshop series on self-esteem, puberty, sexuality, mixed messages, and peer pressure. Each class contains information for a one-hour interactive discussion, home activities between parents and children, and videos that focus on communication. The set includes a planning and training manual, a family activity book, and a video. An English version, *Can We Talk?*, is also available.

\$75. NEA Professional Library, P.O. Box 2035, Annapolis Junction, MD 20701. Phone: 800/229.4200. Fax: 301/206.9789. Web site: www.nea.org/books/list.cfm?groupid=21

Filling the Gaps: Hard-to-Teach Topics in Sexuality Education

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

This teacher's manual covers eight topics — abstinence; condom use; diversity; pregnancy options; safer sex; sexual behavior; sexual identity and orientation; and sexuality and society — that are often inadequately addressed in sexuality education programs. It provides background for teachers, rationale for teaching each topic, teaching activities, and resources. It is designed to supplement an existing curriculum.

Free. SIECUS, 130 West 42nd Street, Suite 350, New York, NY 10036. Phone: 212/819.9770. Out of print, available at www.siecus.org/pubs/filling_the_gaps.pdf

Focus on Kids: Adolescent HIV Risk Prevention

University of Maryland Department of Pediatrics

Originally developed for urban African-American youth, this program provides information to help reduce the risk of HIV infection among young people ages nine to 15 through various interactive activities including games, role plays, discussions,

and community projects. It also uses “friendship groups” to strengthen peer support. Topics covered in this curriculum include HIV and other STDs, condom use, abstinence, and sex and drug pressures that youth face. It also offers practice in decision-making, communication, and refusal and advocacy skills.

\$29.95. ISBN 156071591X, ETR Associates, 4 Carbonero Way, Scottsvalley, CA 95066-4200. Phone: 800/321.4407. Fax: 800/435.8433. Web site: www.etr.org

The GLSEN Lunchbox:

A Comprehensive Training Program for Ending Anti-Gay Bias in Schools *Gay, Lesbian, and Straight Education Network (GLSEN)*

This training program is designed for Kindergarten through 12th grade teachers as well as guidance staff and administrators involved in ending anti-gay bias in schools. It can also be used by other professionals, families, or community members. The program includes exercises and activities to help individuals gain knowledge and skills to build awareness of lesbian, gay, bisexual, and transgender issues and develop a more inclusive school environment. The training kit contains 25 training exercise cards, a binder with 90 pages of handouts/resources, GLSEN’s Public Service Announcement with Judy Shepard, an *I Just Want to Say* video, 140 GLSEN Safe Zone stickers, and GLSEN pencils and bookmarks.

\$79.95/individual, \$129.95/institution. GLSEN, 121 West 27th Street, Suite 804, New York, NY 10001. Phone: 212/727.0135. Fax: 212/727.0254. Web site: www.glsen.org

Growing Together, Second Edition:

A Sexuality Education Program for Girls Ages 9-11 and Their Parents *Girls Incorporated*

This is a component of the Girls Incorporated *Preventing Adolescent Pregnancy* program. This updated version includes five interactive one-and-a-half to two-hour sessions, and addresses puberty, sexual health, HIV/AIDS, myths and facts about sexuality, communication, and values. The workshops are designed to help parents and their daughters learn new information and develop the skills they need to talk about sexuality issues. A Spanish version is also available.

Available to affiliated organizations and to licensees. Non-member organizations should call for more information: Girls Incorporated National Resource Center, 441 West Michigan Street, Indianapolis, IN 46202-3287. Phone: 317/634.7546. Fax: 317/634.3024. Web site: www.girlsinc.org

Life Planning Education: A Youth Development Program

Advocates for Youth

This skills-based curriculum combines sexuality education and career education in an effort to motivate adolescents to delay parenthood until they achieve their educational and vocational goals. The material can be used with teens in grades seven through 12.

This curriculum consists of 142 activities on such topics as values, communication, goals, decision-making, health, sexuality, sexual risks, contraception, STD prevention, and employment.

\$60. *Advocates for Youth*, 2000 M Street, N.W., Suite 750, Washington, DC 20036. Phone: 202/419.3420. Fax: 202/419.1448. Web site: www.advocatesforyouth.org

Our Whole Lives (OWL): A Lifespan Sexuality Education Series

Unitarian Universalist Association and the United Church Board for Homeland Ministries

This comprehensive lifespan sexuality education series was developed jointly by the Unitarian Universalist Association and the United Church Board for Homeland Ministries. The series includes: *OWL: Sexuality Education for K–1*; *OWL: Sexuality Education for Grades 4–6*; *OWL: Sexuality Education for Grades 7–9*; *OWL: Sexuality Education for Grades 10–12*; *OWL: Sexuality Education for Adults*; *The Parent Guide to OWL: Grades K–1 and 4–6*; and *The Advocacy Manual for Sexuality Education, Health and Justice: Resources for Communities of Faith*. Each curriculum in the series covers the six concepts outlined by SIECUS' *Guidelines for Comprehensive Sexuality Education, K–12*: human development, relationships, personal skills, sexual behavior, sexual health, and society and culture.

Grades K–1, \$40. *Grades 4–6*, \$40. *Grades 7–9*, \$75. *Grades 10–12*, \$60. *Sexuality Education for Adults*, \$60. *The Parent Guide to OWL: Grades K–1 and 4–6*, \$15. *The Advocacy Manual for Sexuality Education, Health and Justice: Resources for Communities of Faith*, \$12. Unitarian Universalist Association, UUA Bookstore, 25 Beacon Street, Boston, MA 02108. Phone: 800/215.9076. Fax: 617/723.4805. Web site: www.uua.org/bookstore

Streetwise to Sex-wise: Sexuality Education for High-Risk Youth, Second Edition

Steve Brown and Bill Taverner

This skills-based manual is intended for use with high-risk teens. It consists of 11 lessons for young people ages nine to 13. Lessons address male and female sexual and reproductive anatomy; puberty; decision-making; birth control; communication skills; HIV/AIDS; safer sex; child sexual abuse; sexual orientation; and dating skills. The manual also consists of 14 lessons for older teens (ages 14 to 19). Topics address male and female sexual and reproductive anatomy; teen pregnancy; birth control; safer sex; HIV/AIDS; date rape and assertiveness skills; child sexual abuse; sexual orientation; dating skills; and relationships.

\$30. *Planned Parenthood of Greater Northern New Jersey, Education Department*, 196 Speedwell Avenue, Morristown, NJ 07960. Phone: 973/539.9580, ext. 120. Fax: 973/539.3828. Web site: www.ppgnnj.org

Organizations

Academy for Educational Development

Committed to solving social health problems in the United States and throughout the world through education, training, social marketing, policy analysis, and innovative program design.

1255 23rd Street N.W.
Washington, DC 20037
Phone: 202/884.8700
Fax: 202/884.8701
Web site: www.aed.org

Advocates for Youth

Dedicated to promoting policies which help young people make informed and responsible decisions about their sexual health.

2000 M Street, N.W., Suite 750
Washington, DC 20036
Phone: 202/419.3420
Fax: 202/419.1448
Web site: www.advocatesforyouth.org

The Alan Guttmacher Institute

Working to provide research data and policy analysis on reproductive health issues, both domestic and international.

120 Wall Street, 21st Floor
New York, NY 10005
Phone: 212/248.1111
Fax: 212/248.1951
Web site: www.agi-usa.org

American School Health Association

Dedicated to protecting and promoting the health of children and youth by supporting coordinated school health programs as a foundation for school success.

P.O. Box 708
Kent, Ohio 44240
Phone: 330/678.1601
Fax: 330/678.4526
Web site: www.ashaweb.org

Blacks Educating Blacks About Sexual Health Issues

Committed to combating the sexual health concerns of communities of color through community outreach education.

1217 Spring Garden, 1st Floor

Philadelphia, PA 19123

Phone: 215/769.3561

Fax: 215/769.3860

Web site: www.bebashi.org

Centers for Disease Control and Prevention (CDC)

Promoting health and quality of life by preventing and controlling disease, injury, and disability.

Public Inquiries/MASO F07

1600 Clifton Road

Atlanta, GA 30333

Phone: 800/311.3435

Fax: 404/639.3880

Web site: www.cdc.gov

Children's Aid Society–Carrera Program

Ensuring the physical and emotional well being of children and families, and providing each child with the support and opportunities needed to become a happy, healthy, and productive adult.

105 East 22nd Street

New York, NY 10010

Phone: 212/949.4800

Fax: 212/460.5941

Web site: www.stopteenpregnancy.org

Child Welfare League of America

Developing policies that promote the well-being of children, youth, and their families, and protecting every child from harm.

440 First Street, N.W., Third Floor

Washington, DC 20001-2085

Phone: 202/638.2952

Fax: 202/638.4004

Web site: www.cwla.org

Child Trends

Dedicated to improving the lives of children by conducting research and providing science-based information to improve the decisions, programs, and policies that affect children.

4301 Connecticut Avenue, N.W., Suite 100

Washington, DC 20008

Phone: 202/362.5580

Fax: 202/362.5533

Web site: www.childtrends.org

Children's Defense Fund

Ensuring every child a healthy start, a head start, a fair start, a safe start, and a moral start in life and successful passage to adulthood with the help of caring families and communities.

25 E Street, N.W.

Washington, DC 20001

Phone: 202/628.8787

Fax: 202/662.3510

Web site: www.childrensdefense.org

ETR Associates

Dedicated to enhancing the well-being of individuals, families, and communities by providing leadership, educational resources, training, and research in health promotion with an emphasis on sexuality and health education.

P.O. Box 1830

Santa Cruz, CA 95061-1830

Phone: 831/438.4060 or 800/321.4407

Fax: 831/438.4284 or 800/435.8433

Web site: www.etr.org

Gay, Lesbian & Straight Education Network

Working to ensure that each member of every school community is valued and respected regardless of sexual orientation or gender identity/expression.

121 West 27th Street, Suite 804

New York, NY 10001

Phone: 212/727.0135

Fax: 212/727.0254

Web site: www.glsen.org

Girls Incorporated

Dedicated to inspiring all girls to be strong, smart, and bold by providing educational programs to American girls, particularly those in high-risk, underserved areas.

120 Wall Street, 3rd Floor

New York, NY 10001

Phone: 212/509.2000

Fax: 212/509.8708

Web site: www.girlsinc.org

The Henry J. Kaiser Family Foundation

An independent philanthropic organization focusing on the major health issues facing the nation.

2400 Sand Hill Road

Menlo Park, CA 94025

Phone: 800/656.4533

Fax: 650/854.4800

Web site: www.kff.org

The National Campaign to Prevent Teen Pregnancy

Working to improve the life prospects of this generation and the next by influencing cultural values and building a more effective grassroots movement.

2100 M Street, N.W., Suite 300

Washington, DC 20037

Phone: 202/261.5655

Fax: 202/331.7735

Web site: www.teenpregnancy.org

National Information Center for Children and Youth with Disabilities

Dedicated to providing information on disabilities and disability-related issues.

P.O. Box 1492

Washington, DC 20013

Phone: 800/695.0285

Fax: 202/884.8441

Web site: www.nichcy.org

National Network for Youth

Dedicated to ensuring that young people, particularly those with less opportunity to become contributing members of their communities, can be safe and lead healthy and productive lives.

1319 F Street, N.W., Suite 401

Washington, DC 20004

Phone: 202/783.7949

Fax: 202/783.7955

Web site: www.nn4youth.org

National Organization on Adolescent Pregnancy, Parenting and Prevention

Dedicated to providing general leadership, education, training, information, advocacy, resources, and support to individuals and organizations in the field of adolescent pregnancy, parenting, and prevention.

1319 F Street, N.W., Suite 400

Washington, DC 20004

Phone: 202/783.5770

Fax: 202/783.5775

Web site: www.noapppp.org

Network for Family Life Education

Dedicated to providing young people with honest, medically accurate, and balanced information about sexuality in schools, homes, and communities.

Rutgers University

Center for Applied Research

41 Gordon Road, Suite A

Piscataway, NJ 08854

Phone: 732/445.7929

Fax: 732/445.7970

Web site: www.sexetc.org

Parents, Families and Friends of Lesbians and Gays

Promoting the health and well-being of gay, lesbian, bisexual, and transgendered persons, and their families and friends through support, education, and advocacy.

1101 14th Street, N.W., Suite 1030

Washington, DC 20005

Phone: 202/638.4200

Fax: 202/638.0243

Web site: www.pflag.org

Planned Parenthood Federation of America

Dedicated to the principles that every individual has a fundamental right to decide when or whether to have a child and that every child should be wanted and loved.

443 West 33rd Street

New York, NY 10001-2601

Phone: 212/541.7800 or 800/829.PPFA

Fax: 212/245.1845

Web site: www.plannedparenthood.org

Sexuality Information and Education Council of the United States

Promoting comprehensive education about sexuality and advocating the right of individuals to make responsible sexual choices.

130 West 42nd Street, Suite 350

New York, NY 10036

Phone: 212/819.9770

Fax: 212/819.9776

Web site: www.siecus.org

Web Sites

<http://www.birdsandbees.org>

Information on birth control, pregnancy, STDs, and links to other sites

<http://www.cfoc.org>

Campaign for Our Children

Information for both parents and teens on talking about sexuality

<http://www.positive.org>

Coalition for Positive Sexuality

Information for teens who are sexually active or who are thinking about becoming sexually active

<http://www.goaskalice.columbia.edu>

Go Ask Alice!

Q&A site including information on relationships, sexuality, and sexual health

<http://www.gurl.com>

gURL

Information on issues that affect the lives of girls 13 years of age and older

<http://www.itsyoursexlife.com>

It's Your (Sex) Life

Information for older teenagers about pregnancy, contraception, and STDs

<http://www.outproud.org>

Outproud

Information for gay, lesbian, bisexual, and transgendered youth

<http://www.sexetc.org>

SEX, ETC.

Information, advice, and resources by teens for teens

<http://www.teenwire.com>

Teenwire

Sexuality and sexual health information for teens hosted by Planned Parenthood

The following is a list of SIECUS bibliographies and fact sheets that are available online and in pdf format. You can access this information through SIECUS' Web site at: <http://www.siecus.org/pubs/pubs0004.html>

SIECUS' Annotated Bibliographies

Adolescent Sexuality (2000)

<http://www.siecus.org/pubs/biblio/bibs0001.html>

Sexual Abuse (2000)

<http://www.siecus.org/pubs/biblio/bibs0002.html>

Culturally Competent Sexuality Education Resources (2002)

<http://www.siecus.org/pubs/biblio/bibs0003.html>

Current Books on Sexuality for Adult Readers (1996)

<http://www.siecus.org/pubs/biblio/bibs0004.html>

Facts on Sexuality-Related Issues for Young People (2003)

<http://www.siecus.org/pubs/biblio/bibs0024.html>

Fuentes de la Sexualidad en Todo el Mundo (1997)

<http://www.siecus.org/pubs/biblio/bibs0017.html>

Gender Identity (1997)

<http://www.siecus.org/pubs/biblio/bibs0006.html>

HIV/AIDS Prevention Resources (1999)

<http://www.siecus.org/pubs/biblio/bibs0021.html>

Lesbian, Gay, Bisexual, and Transgender Sexuality and Related Issues (2001)

<http://www.siecus.org/pubs/biblio/bibs0005.html>

Ouvrages Sur la Sexualite d'Autour du Monde (1997)

<http://www.siecus.org/pubs/biblio/bibs0016.html>

Preventing STDs, HIV and Teen Pregnancy (2003)

<http://www.siecus.org/pubs/biblio/bibs0023.html>

Religion, Spirituality, and Sexuality (2000)

<http://www.siecus.org/pubs/biblio/bibs0008.html>

Resources for Professionals (2000)

<http://www.siecus.org/pubs/biblio/bibs0014.html>

Sexual Harassment and Sexual Violence (2000)

<http://www.siecus.org/pubs/biblio/bibs0022.html>

Sexuality and Disability (2001)

<http://www.siecus.org/pubs/biblio/bibs0009.html>

Sexuality and Health (1999)

<http://www.siecus.org/pubs/biblio/bibs0019.html>

Sexuality Education Curricula (1998)

<http://www.siecus.org/pubs/biblio/bibs0010.html>

Sexuality Education in the Home (2001)

<http://www.siecus.org/pubs/biblio/bibs0011.html>

Sexuality in Middle and Later Life (2002)

<http://www.siecus.org/pubs/biblio/bibs0012.html>

Sexuality Issues in Popular Culture and the Media (1996)

<http://www.siecus.org/pubs/biblio/bibs0013.html>

Sexuality Resources from Around the World/English (1998)

<http://www.siecus.org/pubs/biblio/bibs0015.html>

35 Books That Have Influenced Our Understanding of Sexuality (1999)

<http://www.siecus.org/pubs/biblio/bibs0020.html>

Fact Sheets

Adolescents and Abstinence (1997)

<http://www.siecus.org/pubs/fact/fact0001.html>

Lesbian, Gay, Bisexual and Transgender Youth Issues (2001)

<http://www.siecus.org/pubs/fact/fact0013.html>

Guidelines for Comprehensive Sexuality Education: K-12 (1997)

<http://www.siecus.org/pubs/fact/fact0003.html>

HIV/AIDS and People of Color (1999)

<http://www.siecus.org/pubs/fact/fact0015.html>

Issues and Answers: Fact Sheet on Sexuality Education (2001)

<http://www.siecus.org/pubs/fact/fact0007.html>

Media Recommendations for More Realistic, Accurate Images Concerning Sexuality (1996)

<http://www.siecus.org/pubs/fact/fact0004.html>

The National Coalition to Support Sexuality Education (1999)

<http://www.siecus.org/pubs/fact/fact0005.html>

Opponents of Comprehensive Sexuality Education (1999)

<http://www.siecus.org/pubs/fact/fact0016.html>

Public Support for Sexuality Education (2000)

<http://www.siecus.org/pubs/fact/fact0017.html>

Sexuality and Underserved Youth in Communities of Color (2001)

<http://www.siecus.org/pubs/fact/fact0012.html>

Sexuality in Middle and Later Life (2002)

<http://www.siecus.org/pubs/fact/fact0018.html>

SIECUS Position Statements (1998)

<http://www.siecus.org/pubs/fact/fact0001.html>

Strategies to Build Support for HIV — Prevention and Sexuality Education Programs (1997)

<http://www.siecus.org/pubs/fact/fact0009.html>

Teenage Pregnancy, Birth and Abortion (2002)

<http://www.siecus.org/pubs/fact/fact0010.html>

The Truth About Adolescent Sexuality (2003)

<http://www.siecus.org/pubs/fact/fact0020.html>

The Truth About Condoms (2002)

<http://www.siecus.org/pubs/fact/fact0011.html>

The Truth About STDs (2003)

<http://www.siecus.org/pubs/fact/fact0019.html>

Worldwide Antidiscrimination Laws and Policies Based on Sexual Orientation (1999)

<http://www.siecus.org/pubs/fact/fact0014.html>

Youth Development Resources Organizations

America's Promise

America's Promise is a collaborative network that builds upon the collective power of communities and partners to help fulfill the Five Promises for every young person in America.

The Alliance for Youth

909 N. Washington Street, Suite 400

Alexandria, VA 22314-1556

Phone: 703/684.4500

Web site: <http://www.americaspromise.org>

Forum for Youth Investment

The Forum for Youth Investment is dedicated to increasing the quality and quantity of youth investment and youth involvement by promoting a big picture approach to planning, research, advocacy, and policy development among the broad range of organizations that help constituents and communities invest in children, youth and families. To do this, the Forum is committed to building connections, increasing capacity, and tackling persistent challenges across the allied youth fields.

The Cady-Lee House

7064 Eastern Avenue, N.W.

Washington, DC 20012

Phone: 202/207.3333

Fax: 202/207.3329

Web site: www.forumforyouthinvestment.org

International Youth Foundation

The International Youth Foundation (IYF) works with hundreds of companies, foundations, and civil organizations to strengthen and scale up existing programs that are making a positive and lasting difference in young lives. Over the last decade, IYF and its in-country partners have helped more than 26 million young people

gain access to the life skills, education, job training, and opportunities critical to their success.

32 South Street, Suite 500

Baltimore, MD, 21202

Phone: 410/951.1500

Fax: 410/347.1188.

E-mail: youth@iyfnet.org

Web site: <http://www.iyfnet.org>

National Resource Center for Youth Development

The National Resource Center for Youth Development, through a cooperative agreement with the Department of Health and Human Services (DHHS) Children's Bureau, provides training and technical assistance to publicly administered and supported child welfare agencies.

The University of Oklahoma

College of Continuing Education

4502 E. 41st St, Bldg. 4W

Tulsa, OK 74135-2512

Phone: 918/660.3700

Fax: 918/660.3737

Web site: <http://www.nrcys.ou.edu>

The Search Institute

The Search Institute, known for its 40 "developmental assets" (critical factors for young people's growth and development), is dedicated to providing leadership, knowledge, and resources to promote healthy children, youth, and communities.

The Banks Building

615 First Avenue, NE, Suite 125

Minneapolis, MN 55413

Phone: 612/376.8955 or 800/888.7828

Fax: 612/376.8956

Web site: <http://www.search-institute.org>

Books

Kirby, D., et al. *Preventing Teen Pregnancy: Youth Development and After-School Programs*. ISBN 1-56071-616-9. ETR Associates, 4 Carbonero Way, Scotts Valley, CA 95066-4200. Phone: 800/321.4407. Fax: 800/435.8433. Web site: www.etr.org

Villarruel, F., et al., Eds. *Community Youth Development: Programs, Policies, and Practices*. ISBN 0-7619-2786-7. Sage Publications, Inc., Thousand Oaks, CA 91320. Phone: 800/818.7243. Web site: www.sagepub.com E-mail: orders@sagepub.com

Eccles, J., and Gootman, J., Eds. *Community Programs to Promote Youth Development*. ISBN 0-309-07275-1. National Academy Press, 2101 Constitution Avenue, NW, Box 285, Washington, DC 20055. Phone: 800/624.6242. Report also available online: www.nap.edu

Web Sites

Building Partnerships for Youth

<http://www.bpy.n4h.org>

This Web site provides youth development information about programs to help youth ages nine–13 in their communities make healthy choices and valuable resources to make implementing these programs easier.

National Youth Development Information Center

<http://www.nydic.org>

This Web site has information on various topics concerning youth development including evaluation, research, program development, career development, directories, and other sites that lead to more youth development information. The NYDIC Web site is the centerpiece of the Information Center, providing 24-hour access to NYDICs resources. A telephone information specialist is also available toll-free (1-877-NYDIC-4-U) to respond to questions.

End Notes

1. National Collaboration for Youth Members, March 1998. (www.nydic.org/nydic/devdef.html)
2. The Forum for Youth Investment, *Our Ideas*, www.forumforyouthinvestment.org/ideas.htm
3. Ibid.
4. Ibid.
5. Ibid.
6. D. Kirby, *Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy*. (Washington, DC: National Campaign to Prevent Teen Pregnancy, 2001.)
7. J. Kendall, and Associates. *Combining Service and Learning: A Resource Book for Community and Public Service*. (Raleigh, NC: National Society and Internships and Experiential Education, 1990.)
8. Ibid.
9. D. Kirby, *Emerging Answers*.
10. Philiber, S. et al. "Preventing and Improving Health Care Access Among Teenagers: An Evaluation of the Children's Aid Society-Carrera Program," *Perspectives on Sexual and Reproductive Health*, vol. 34, no. 5. September/October 2002, pp. 244–51.
11. D. Kirby, *Emerging Answers*.
12. *SIECUS/Advocates for Youth Survey of Americans' Views on Sexuality Education* (Washington: Sexuality Information and Education Council of the United States and Advocates for Youth, 1999).
13. J. Morse, "An RX for Teen Sex." *Time Magazine*. October 7, 2002, pp. 64–65.
14. Ibid.

