

What is Comprehensive Sexuality Education? Going WAAAAAY Beyond Abstinence and Condoms

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In this article, the author expands our definition of “comprehensive sexuality education,” broadening the discourse to something more ideal than what current rhetoric seems to suggest, and in the process presents the rationale for real comprehensive sexuality education.

Current definitions of comprehensive sexuality education focus on prevention of teen pregnancy and transmission of STDs and HIV, as well as protection from abuse and information about puberty. We talk about education “that works,” referring to those programs that have been proven by research, while knowing that research has focused only on prevention programs. Nobody has “proven” a broader, more comprehensive, positive sexuality education through peer-reviewed research. Yet we do know, from research about how people learn, from research on youth development programs, from all the wisdom of all the counselors and therapists and educators who have worked with youth, what really works.

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We talk about comprehensive sexuality education that will prevent teen pregnancy and transmission of STDs and HIV, as well as protect our youth

Editor’s Note: Joan Helmich, who was a member of the editorial advisory board for the *American Journal of Sexuality Education* wrote this article before she passed away. Her commentary serves as a vision to lead us on.

As Training Director for the Center for Health Training in Seattle, Joan Helmich founded the Northwest Institute for Community Health Educators (NICHE), a model for training sexuality educators in the US. She was co-author with Evonne Hedgepeth of *Teaching about Sexuality and HIV: Principles and Methods for Effective Education*, New York University Press, 1996. She was on the board of SIECUS, the Sexuality Information and Education Council of the US. Joan had a Master’s degree in Applied Behavioral Sciences and provided sexuality education and trained sexuality, HIV and family life educators for the last 35 years.

from abuse and give them some tools for getting through puberty. We talk about education that is accurate and factual in content. We talk about education “that works,” referring to those programs that have been proven by research, while knowing that research has focused only on prevention programs. Nobody has “proven” a broader, more comprehensive, *positive* sexuality education through peer-reviewed research. Yet we do know, from research about how people learn, from research on youth development programs, from all the wisdom of all the counselors and therapists and educators who have worked with youth, what really works. Let’s go beyond a focus on prevention of negative outcomes of sexual behavior; let’s go beyond the focus on “sex”; let’s go beyond the focus on the content and the curricula and look at the *who*—the youth who are our audiences and our partners in this endeavor.

I would like to expand our definitions of “comprehensive sexuality education,” to broaden the discourse to something more ideal than what current rhetoric seems to suggest, and in the process present the rationale for *real* comprehensive sexuality education.

I want to go far beyond the current usage, because I think we need to come to some agreement on what we are talking about. I present here a set of nine principles for comprehensive sexuality education, which ideally is:

1. Client-Centered
2. Broad
3. Skills Based
4. Values Based
5. Research & Theory Based
6. Long Term
7. Integrated
8. Collaborative
9. Positive

First, in order to be effective, we who teach about sexuality and who train sexuality educators need to be **client-centered**. People, including young people, learn best the messages that speak to them and relate to their real lives. Client-centered means starting with who the youth are, with what they know, with the experiences they have had, what they are doing, what has been done to them.

We need to look at our learners and at the data. We must do comprehensive needs assessments, looking at population data as well as specific community data. In general, we know a great deal about youth in US society. We know that a significant portion of young people are questioning their sexual orientation; many have been or are being sexually abused; many are sexually active; and too high a percentage have been pregnant.

Furthermore, we know that youth are exposed to lots of sexual information, sexualizing and titillating media, and pornography. They've received a myriad of mixed, conflicting and unclear messages about sexuality. And they talk about sex among themselves and with older peers, and the information they get from each other may not be very accurate, reasonable, or responsible.

We know that youth have lots of questions and concerns. We know that they typically do not get very good information from parents, nor do they engage in reasonable discourse about sexuality with other responsible adults in their lives.

Yet knowing such general information about youth is not enough. Most importantly, being client-centered means involving youth as individuals and *listening to them*:

- We need to assess the particular youth we are working with: what do they want to know, talk about, and learn? What questions do they have? What data specific to our particular learners and our communities can we discover?
- We need to involve youth in policy development, and listen to youth while we are developing policy and curricula. We can do this, for example, by having youth on advisory boards.
- We must involve youth in curriculum development and lesson planning. Whenever we plan our lessons, we need to ask them what they want to know, who they want to hear from, and what topics they want to cover.
- We must involve youth in the teaching of sexuality education.
- Finally, we must include youth in the evaluation of programs, getting their feedback about curricula and assessing what they have learned.

Listening to our learners and involving them in all aspects of their learning is a radical concept: it is ultimately democratic—of the young people, by the young people, and for the young people.

Second, comprehensive sexuality education is **broad**, covering much more than just prevention. We must teach about many topics within the following four broad categories:

- Anatomy, physiology and sexual behavior, including content on the reproductive system, growth and development, pregnancy, sexual response, etc.
- Social and emotional health, including life planning, decision making, self esteem, communication, friendship, relationships, family relationships, etc.
- Health and safety, including content on prevention, detection and treatment of sexual abuse, STDs, HIV, unplanned pregnancy, sexual dysfunction, cervical cancer, testicular cancer, breast cancer, etc.

- Society and culture, covering sexual expression and societal values reflected in the law, religion, the arts, the media, community norms, etc.

Comprehensive sexuality education must be broad in content because sexuality is more than just “doing it.” In the words of my friend Gabriel, when he was eight, “Sex is something you do. . . sexuality is who you are” — which is why I deliberately talk about *sexuality* education, not *sex* education. The most thorough description of this breadth is available in an extremely useful document, the *Guidelines for Comprehensive Sexuality Education: Kindergarten through 12th Grade* (SIECUS, 2004), which lists the key concepts, topics and messages of comprehensive sexuality education.

Third, comprehensive sexuality education is **skills-based**. Without teaching and involving the following skills, we would not be able to reach our goal of helping young people develop the capacity for caring, supportive, non-coercive, and mutually pleasurable, intimate and sexual relationships:

- Critical thinking skills: learning how to analyze and assess situations and information.
- Decision making skills: learning how to make decisions about real life issues.
- Intrapersonal skills: learning how to look inside and articulate one’s own values, assess one’s environment and social group, and rehearse positive behaviors.
- Interpersonal skills: learning how to talk with others, how to listen, and how to be assertive.
- Technology & mechanics: discovering and practicing the kinesthetics of a behavior—for example, how to use a condom.
- Finding and using resources: learning how to find help when it’s needed, including how to obtain family planning services.

Fourth, we need to incorporate **values** in comprehensive sexuality education; we must:

- Reflect broadly accepted values: respect and responsibility come to mind.
- Reflect standards for human rights and human dignity: I would direct you to the International Declaration of Human Rights (United Nations, 1948), Article 26, 1 (*everyone has the right to education*) and 2 (*education shall be directed to the full development of the human personality and to the strengthening of respect for human rights and fundamental freedoms. It shall promote understanding, tolerance and friendship. . .*)
- Reflect and respect the values of the specific community, the families who live there, the sub-parts of the community, and faith communities: we need to be “community competent.”

Fifth, our education must be **research and theory based**:

- The informational aspects should be accurate, honest and complete in content and intent. We all innately search for meaning, and that meaning must correlate with reality—or it is not learned.
- The teaching methods we use need to work for the diversity of learning styles, modalities and abilities. We must teach the way people learn—and we have lots of information about brain-based learning and teaching. For example, we need to teach in all the learning domains, not merely cognitive, but also affective and behavioral. As Mager said, “if telling were the same as teaching, we’d all be so smart we could hardly stand it.”
- Curricula and lessons need to be tested. We should use proven curricula and proven components of science-based programs, appropriately adapted to our audiences, and we need to advocate for research on broader curricula.
- Curricula and lessons need to be based on what we know about young people, including their behaviors, risks, assets, needs, wants, culture and life experiences.
- Curricula and lessons need to be evaluated. We should evaluate locally and continually in order to improve what we do.

Sixth, comprehensive sexuality education is **long term** in scope and purpose. K-12 programs should be progressively developmental, with age appropriate content, and logically sequenced. Sexuality education should promote life-long learning: that is, education should establish a norm of rational discourse, an approach to sexuality as a part of life to be celebrated as well as discussed. Finally, being long term means promoting learning skills that can be used throughout life, for example, communication skills, how to access resources, information, services, etc.

Seventh, sexuality education should be **integrated** into a variety of programs, not just health education. After all, sexuality is a factor, an issue, a topic in all of our lives’ contexts. Because sexuality is central to life, we must learn about sexuality across disciplines, i.e., in courses about culture, religion, law, justice, science, politics, health, literature and language arts.

Eighth, comprehensive sexuality education is **collaborative**. It should be supported and reinforced by parents, extended family, peers, faith organizations, clinics, youth-serving organizations, and media, as well as take place in many community arenas, including schools and churches.

Finally, my last defining principle of comprehensive sexuality education is that it must be **positive**. We must focus on potential good, not just the potential bad, undesirable or harmful aspects of sexuality. We must focus on personal assets of young people, their strengths, joys, and abilities. Sexuality education should respect and empower youth. We should celebrate sexuality, life, and even pleasure! And not just pleasure in sex, but more

importantly, in relationships. Whether a relationship includes sex or not, we all seek rewarding, mutual intimacy. And we are all sexual. Our young people know this, feel this, and long to understand themselves and others. And in order for sexuality education to be positive, it needs to be taught by trained, comfortable, positive teachers and leaders.

Sexuality is a complex and integral aspect of life. Sexuality professionals should not accept the minimization and isolation of sexuality education into the narrow prevention category of education programs. Instead we must work toward a societal shift that accepts sexuality education that is client-centered, broad, skills- and values-based, integrated, collaborative, long term, and positive.

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