

COMMENTARIES

Fostering open dialogue: Creating safe spaces for adolescents to discuss sexual health

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Sexual health education has significant implications on the physical and mental well-being of adolescents, yet several barriers impede the delivery of a quality curriculum. This article explores the challenges and importance of comprehensive sexual education. Through the experiences of adolescents like “Maya” (pseudonym), we discuss the need for safe spaces, inclusive curricula, and supportive networks to address gaps in sexual health education. The article also examines the current landscape of sexual education across the United States, emphasizing the role of advocacy and community-driven initiatives in promoting standardized, inclusive, and comprehensive programs. It concludes with actionable steps individuals can take at the local, national, and legislative level to support and advance comprehensive sexual health education.

In our first sexual education session with Teen Promise Project (TPP) at a Washington, DC public charter school, a poignant question echoed through the room, piercing the hesitant atmosphere that often accompanies discussions about sexual health among adolescents: “But what if I don’t have anyone I can ask?” As we encouraged students to compile a list of adults they felt comfortable discussing these matters with, a sense of uncertainty permeated the room.

Among those grappling with this dilemma was “Maya,” a curious 12-year-old whose notebook brimmed with questions about puberty, relationships, and contraception—a clear testament to her desire for understanding. Yet, on approaching her to offer assistance, her vulnerability became apparent. “I don’t really have anyone to talk to about this stuff,” she confided. “My mom is always busy with work, and my dad, well, he’s not around much.” Her words conveyed a mix of uncertainty and hesitation, echoing the isolation felt by many adolescents navigating similar challenges. Like Maya, her classmates found themselves struggling to identify more than 1 adult figure they could trust and confide in regarding matters of sexual health.

Working with schools through TPP, a volunteer organization that provides comprehensive sexual health education to middle school students in Washington, DC, brought firsthand insight into the challenges many young

people face regarding sexual health education. Maya's story, though unique in detail, represents a broader issue—the absence of a supportive network and safe space for adolescents to openly discuss sensitive topics.

Comprehensive sexual health education provides individuals with knowledge and skills on anatomy, contraception, sexually transmitted infections (STIs), healthy relationships, sexual orientation and gender identity, reproductive rights, emotional and mental health, and cultural considerations to make informed decisions about their sexual health. The primary goal of these programs is 2-fold: to reduce rates of adolescent pregnancy and increase risk-reducing behaviors among young people and to foster the development of healthy, diverse relationships.^{1,2} Organizations like TPP exemplify the potential effectiveness of these programs. Within its framework, the 8 sessions include detailed learning objectives and lesson plans created by medical professionals, ensuring that students across different schools in Washington, DC, receive uniform, comprehensive, and accurate information.³ As Maya's story unfolded during our sessions, it became evident that providing a “safe space” for discussions not only empowers students to confront uncertainties, but also bridges gaps in their sexual health knowledge. Although initially met with discomfort, our students gradually opened up and began asking questions.

During 1 TPP session on gender identity, Maya bravely spoke about her experiences navigating uncomfortable discussions about her gender identity with her parents. “Is it normal to feel confused about my gender identity or am I just going through a phase?” she candidly asked. “How can I talk to my friends or family about my gender identity if I'm not sure how they'll react?” Maya's story sheds light on some of the many challenges that LGBTQ+ youth often face and underscores the critical need for inclusive sexual education in classrooms that will allow students to openly discuss and explore their identities without fear or judgment.

The necessity of comprehensive sexual education programs becomes increasingly evident when considering statistics such as the teen pregnancy and STI rates in the US. The teen pregnancy rate remains notably higher in the US compared with other industrialized nations. Approximately 51% of all pregnancies in the US are unplanned; this percentage rises to 82% among teens aged 15 to 19 years.⁴ Additionally, half of the 20 million new STI cases reported annually in the US affect adolescents and adults aged 15 to 24 years.⁵ These challenges carry far-reaching consequences, including decreased academic achievement, increased poverty rates, and adverse health outcomes for children born to teenage mothers. A significant portion of these children contend with chronic health conditions, obesity in their early teen years, and a substantial number of girls also become teenage mothers themselves. Furthermore, nearly half of teenage mothers do not complete high school and typically earn less than \$6500 annually during the first 15 years of

parenthood.⁶ Consequently, empowering teenagers with comprehensive knowledge to make informed decisions regarding healthy sexual activities and relationships becomes increasingly imperative.

Maya's courage and openness to share her story, for one, underscores the critical role sexual education plays in cultivating inclusivity and promoting a sense of belonging among students of all backgrounds and orientations. Research consistently supports the efficacy of comprehensive sexual education programs. For instance, students are more likely to engage in conversations about sexual matters with trusted adults after participating in year-round comprehensive sexual education initiatives. A study conducted by a medical school in Rhode Island found that 42.9% of middle school students engaged in discussions about sexual health with an older, trusted person prior to participating in a sexual health program; after completing the program, this figure rose to 65.1%.⁷ Studies have also shown that students in states with more LGBTQ-inclusive sex education are less likely to experience school-based victimization and adverse mental health outcomes.⁸ Furthermore, approximately two-thirds of comprehensive programs have demonstrated strong evidence of positively influencing young people's sexual behavior, including both delaying initiation of sex and increasing condom and contraceptive use. While advocates of abstinence education programs argue that teaching abstinence can lower rates of teen pregnancy and STIs by reducing early sexual activity and the number of sexual partners, research has found that most abstinence programs did not delay the initiation of sex, with only 3 of 9 showing any significant positive impact on sexual behavior.^{9,10}

Despite some progress in implementing sexual education programs across the US, many initiatives remain incomplete or lack crucial components. For instance, only 30 US states and Washington, DC, require sex education to be taught in schools, with 25 states and Washington, DC, mandating both sex and HIV education and 18 states requiring the content to be medically accurate.¹¹ Furthermore, just 26 states and Washington, DC, require instruction to be appropriate for the students' age.

Sex education content concerning sexual orientation, contraception, and healthy relationships also varies across the US. Only 10 states mandate that the curriculum must incorporate affirming content regarding LGBTQ+ identities or address sexual health topics specific to LGBTQ+ youth.¹⁰ Similarly, just 20 states and Washington, DC, require that information be provided on contraception and 39 states and Washington, DC, require that information be provided on abstinence, with the majority requiring that abstinence be stressed. To add to this variability, only 11 states and Washington, DC, incorporate terms such as "healthy relationships," "sexual assault," or "consent" into their curricula.^{11,12} The inconsistency in sexual education curricula is exacerbated by the lack of guidance given to educators on which subjects should be addressed in their lesson plans. As a result, there

is significant variation in the content taught across classrooms, leading to the omission of crucial topics that should be part of comprehensive sexual education.¹² This only exacerbates the challenges faced by young people in accessing accurate and inclusive sexual education.

Existing federal initiatives, such as the Centers for Disease Control and Prevention's Division of Adolescent and School Health and the Teen Pregnancy Prevention Program, focus on offering evidence-based instruction about HIV, STIs, and unintended pregnancy, but do not encompass the entire range of comprehensive sexual health education. The lack of federal programs dedicated to funding and expanding access to comprehensive sex education further contributes to this fragmented landscape, highlighting the need for standardized and inclusive sexual education nationwide.¹³

Despite the absence of sexual health education in many states and the need for improvement on existing programs, there is an emerging trend in the US to restrict rather than advance sexual health education over the past few years. In 2023, 8 states passed restrictive sex education laws, an 800% increase in anti-sex education bills compared with 2022, as reported by the Sexuality Information and Education Council of the United States. Additionally, over 100 bills aimed at restricting discussions about sexual orientation and gender identity in sex education, as well as limiting instruction on certain subjects within sex education were introduced. Of these bills, 9 were successfully passed in 8 states, representing an 8.26% success rate in implementing such restrictive measures.¹³

Washington, DC, stands out as one of the few regions that mandate comprehensive sex education.^{11,14} However, the effectiveness of these programs can vary widely, highlighting the need for continuous improvement and community-driven advocacy. Change can begin at the local level, where opportunities exist to improve comprehensive sex education curricula and policies within individual school districts. The implementation of programs such as TPP underscore the transformative power of advocating for comprehensive sex education. Just as Maya had felt supported in our space to share her gender identity journey, her classmates gained the confidence to engage in meaningful discussions about sexual health with us as our sessions progressed: "What are healthy boundaries in a relationship?," "What are some ways we can say no?," and "How does puberty affect my body?" Their questions stress the importance of creating a safe and inclusive environment for students to address gaps in their sexual health knowledge and seek help without hesitation. As our sessions concluded, the students had developed a strong sense of trust in identifying adults for discussing sexual health topics, including school teachers, sexual health program leaders, and counselors, while also recognizing that our weekly sessions provided yet another avenue for them to seek answers to their questions.

Looking ahead, the imperative is clear: we must advocate for standardized, inclusive, and comprehensive sexual health education programs. Based on that, here are some actionable steps:

1. **Volunteer locally:** Volunteer for local organizations like the Team Promise Project. These programs provide opportunities to directly engage in teaching sexual health education and create safe spaces for teens to discuss sensitive topics openly.
2. **Engage nationally:** Join national organizations like Advocates for Youth that offer valuable resources and opportunities to take action, whether through volunteering or donating to support their advocacy efforts.
3. **Advocate legislatively:** Start by checking the sexual health education laws in your state. If these laws are comprehensive, reach out to your local school district to ensure they are adhering to them. If there are gaps or an absence of such laws, take action by advocating directly with your local representative. This can include writing letters, making phone calls, scheduling meetings to discuss the importance of comprehensive sexual health education, and organizing or joining community campaigns to push for legislative improvements.

By embracing the stories of students like Maya, along with those of countless other adolescents, we embark on a collective journey towards creating environments where young individuals feel empowered, supported, and equipped to make informed decisions about their sexual health. It is through collaborative efforts, inclusive policies, and dedicated initiatives that we can pave the way for a healthier, more informed future generation.

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