

Survey: Two-thirds of Illinois public schools provide comprehensive sex education

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A study of sex education in Illinois public schools found that one out of three teachers did not meet a very forgiving definition of comprehensive instruction, researchers from the University of Chicago Medical Center report in the February 2008 issue of the journal *Obstetrics and Gynecology*.

Only 65 percent of teachers who responded to the survey covered the four basic topics required to be rated "comprehensive:" abstinence until marriage or older, HIV/AIDS, other sexually transmitted diseases, and contraception. When the researchers added a widely recommended fifth topic--where to get condoms, birth control and health related services—only 42 percent of sex education teachers passed the comprehensiveness test.

The survey also found that 30 percent of the State's sex-education teachers had never received sex-education training, well above the national average of 18 percent. Although most teachers with training reported that they felt, "very comfortable" teaching adolescents about sex, only 56 percent of those who lacked such training said they felt as comfortable.

"For this study, we set the bar for comprehensiveness fairly low relative to what most medical and public health organizations recommend," said senior author Stacy Tessler Lindau, MD, assistant professor of obstetrics and gynecology and medicine at the University of Chicago, "and one out of three programs failed to clear it."

"Our children learn many of the skills they need to be healthy citizens and to take responsibility for their own health in school," she said. "That should include information about sexual aspects of health. Physicians who care for adolescents need to know what students are, or are not learning, in school in order to fill gaps caused by deficits in program content, quality and teacher training."

Previous studies showed that nearly two-thirds of 12th graders have engaged in sexual intercourse, and that accurate knowledge can delay sexual debut and increase the use of condoms or other forms of contraception when adolescents do become sexually active.

"Most parents support school-based sex education and teens regard it as an important source of information," Lindau said, "yet we found that several important health topics and skills are omitted, more often than not, from most Illinois public school sex-education criteria."

"Uninformed teens often become uninformed young adults," said second author Adjoa S. Tetteh, research assistant and a college peer sex educator. "Working with college students, I have witnessed this firsthand. Many students come to college with years of sexual experience, but are learning, for the first time, about effective ways to prevent STIs and unintended pregnancy."

The researchers used data collected by NORC, a survey research firm. NORC mailed self-administered questionnaires to 335 sex education teachers from 201 public middle and high schools in 112 Illinois school districts in the 2003-04 school year. Sixty-two percent of the teachers, representing 91 percent of schools, responded.

Teachers were asked which of 17 possible topics they taught and, if they omitted certain topics, to explain why. They were also asked about their training and how they would grade the sex education curriculum.

The researchers found that 93 percent of Illinois Schools offered sex education; seven percent did not.

The most frequently taught topics, covered by 96 percent of teachers, were HIV/AIDS and other sexually transmitted diseases. Almost 90 percent of teachers covered abstinence. Among those who taught abstinence, 57 percent emphasized that it was the "best alternative," 39 percent said it was the "only alternative," and four percent described it as "one alternative."

Practical skills--such as contraception, condom use, decision-making and communicating with a partner--and morally debated topics, such as abortion or sexual orientation, were among the least frequently taught. Teachers who had not received sex-education training were less likely to spend time on practical or morally debated topics.

Of the 17 topics, emergency contraception was mentioned least, taught by only 30 percent of teachers. Only 32 percent of teachers brought up homosexuality or sexual orientation, 34 percent taught how to use condoms, 37 percent taught how to use other forms of birth control, 39 percent discussed abortion and 47 percent taught students where to access contraception and sexual-health services.

The most common reason for omitting a topic was "not part of the curriculum." Those who omitted condom use, however, most often cited "school or district policy."

Teachers gave themselves the highest grades for instruction on reproductive basics and abstinence, with nearly four out of five ranking that part of the curriculum as good or excellent. About two-thirds gave themselves comparable grades for teaching their students about the emotional consequences of sex, dealing with pressures to have sex, or where to access contraception or services.

Although about half rated their instruction on how to use condoms or other forms of birth control as good or excellent, a quarter rated instruction on these topics average and a quarter rated them as poor or very poor.

"Although a recent study has called into question the effectiveness of abstinence-only sex education, the trend over the last ten years, supported by federal incentives, has been to emphasize abstinence and exclude information about contraception," said Lindau. "Given that a large number of young people are sexually active, we worry that such restrictive approaches leave students unprepared to prevent pregnancy and/or sexually transmitted diseases."

"In most cases," she added, "they are not even given access to information about how to talk about these issues or where to get help should they need it. Doctors need to be aware of this and should be proactive in initiating discussion about sexuality with parents and adolescents. Doctors may also be an important resource for providing teachers with medically accurate information and training."

"Our study provides important new data from the teachers' perspective," said study co-author Melissa Gilliam, associate professor and section chief of family planning and contraceptive research at the University of Chicago. "It supports other recent studies showing that large numbers of teens, especially low-income and youth of color, received no instruction about birth control methods before they first had sex."

Source: University of Chicago Medical Center

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