

CREATIVE PROJECT REPORT

A CREATIVE PROJECT

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## Overview of the Issue

Both national and local data collection has shown the serious state of sexual health practices in the United States. The World Health Organization describes sexual health as involving the mind, body and spirit of a person, as opposed to just physical. Another description from the organization explains that sexual health "...encompasses the problems of HIV and STIs/RTIs, unintended pregnancy and abortion, infertility and cancer resulting from STIs, and sexual dysfunction" ("Sexual Health", n.d.) . Unfortunately, the youth of this nation are not exempt from the negative consequences listed above. Interventions that will address the many aspects of sexual behavior among youth need to be implemented.

To begin with, a look at youth on a national scale may bring some perspective to the nature of this issue overall. Across the nation, nearly half of students have been involved in sexual activity ("Youth risk behavior", 2011 ). Of the students who had had sexual intercourse before, just over six percent of them were under the age of thirteen during their first encounter. About one third of the students were using some form of contraception. A little over twelve percent of the thirty-four percent sexually active admitted to taking no precaution against pregnancy. And "22% had drunk alcohol or used drugs before last sexual intercourse" ("Youth risk behavior", 2011 ). Interestingly enough, eighty-four percent of the students had been instructed about the risks and dangers of HIV/AIDS ("Youth risk behavior", 2011). It can easily be seen though, that teaching students about HIV/AIDS does not equate to a thorough education of all sexual matters.

Some 2011 statistical data involving Indiana youth will hopefully bring some perspective to this issue as it relates to local students. Fifty-one percent have ever had sexual intercourse ("HIV, other STD", 2012 ). Forty – two percent did not use a condom the last time they had sex. Sixty-six percent of the students were not using the pill or any other contraceptive the last time

they had sex. And “20% drank alcohol or used drugs before last sexual intercourse” (HIV, other STD”, 2012). Similar to the national findings, a high percentage of the students were exposed to HIV/AIDS education. About a third of the students had lessons specifically related to condom use. And over ninety percent of the students were given information resources regarding, STIs, pregnancy, etc.

The information gathered from both national and locals is indicative of a gap in connection. Some students are not receiving education regarding abstinence, STIs, pregnancy prevention, etc. These youth are living in an ignorant state and probably could not deduce healthy behavior for themselves. On the other hand, the students being exposed to sexual education are not being given its full scope. Both of these conditions are dangerous, as they leave students with a lack of resources and knowledge. The solution to the issue of risky sexual behavior by youth is twofold. First, students need to be introduced to a thorough education. As previously stated, most Indiana schools do provide some kind of health class with discussion of STIs. This method of educating the youth lacks comprehensive and interactive learning. Sexual health encompasses a series of lifestyle choices, of which students must be informed. By illustrating all of the factors involved with sex and allowing students to actively discuss these topics, more progress can be made. The other aspect to the issue of risky sexual behavior by youth is support. Young people must have safe, welcoming people and places in which they can receive help. These resources may include people such as parents, clergy, school counselors, and family doctors. The places may include local and school health clinics.

By implementing programs similar to the Holistic Sexual Health Education workshop, community leaders can work to stand in this gap of education and support. In doing so, the youth of this nation will be more educated and empowered as they make decisions with their bodies.

## Conclusion

The Holistic Sexual Health Education workshop exists in order to address all of the topics previously mentioned. The most effective manner in which the program reaches students, is the pro-abstinence emphasis integrated into the learning modules. As stated before, this program is comprehensive in nature, but the delaying of sexual activity is a very strong component of the curriculum. More and more studies are being conducted in support of this type of approach. The New York Times reported the positive results of University of Pennsylvania professor, Dr. John B. Jemmott III's related 2010 study. "In Dr. Jemmott's research, only about a third of the students who participated in a weekend abstinence-only class started having sex within the next 24 months, compared with about half who were randomly assigned instead to general health information classes, or classes teaching only safer sex." Being that the Holistic Sexual Health Education workshop may be conducted over the course of several days, the prospect of longer lasting results is very promising.

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