

A photograph of a hand reaching upwards, palm facing forward, against a soft green background. The hand is positioned on the left side of the frame. The background has a subtle gradient and some abstract white and green geometric shapes at the top and bottom edges. The text is overlaid on the right side of the image.

TACKLING TEEN PREGNANCY

OREGON'S APPROACH TO
COMPREHENSIVE SEX EDUCATION

Words: Corinne Ellis

In a North Eugene High School classroom adorned with educational posters and old class projects, Marilyn Flick reads her students a story of two teenagers and their complicated relationship. It's the last class of the day, and the students are getting restless. The classroom is buzzing with plans for the upcoming weekend and talk of the fast approaching summer vacation. When Flick begins to speak, however, the class falls silent and all eyes are on her.

Students laugh and ask questions at every turn as Flick details the complex relationship between two young teens. The story follows their sexual histories and demonstrates what is known as the sexual exposure chart. This chart is based on the idea that for every sexual partner you have, you also come in contact with your partner's past partners. The story may be serious, but the students are engaged and enjoying themselves.

On the walls of the classroom, black and white posters promote safe sex practices. One features the image of a young couple holding an infant. The caption reads, "Don't let a hot date turn into a due date."

For the past 31 years, Flick has taught a human sexuality class at North Eugene High School. Her curriculum is based on comprehensive sex education and healthy relationship building.

Although it was one of the first of its kind at the time of its inception, Flick's class is now one of many across the state of Oregon

that teaches comprehensive sex education. Comprehensive sex education includes traditional pregnancy and STD prevention education as well as relationships and decision making.

"I acknowledge the fact that students are all across the board in their values, their own family situations and in their sexual experience," Flick said. "I'm not going to treat them any different. I will respect their position."

During the past seven years Oregon has put in motion a plan to reduce teen pregnancy and improve the quality of sexual health education in public schools. This plan was introduced in 2009 as a concept of what sex education could look like. Just three years after the plan was created, the rate of unplanned teenage births among females age 15-19 in Oregon had dropped from 4.8 percent to 3.2 percent.

The Oregon Youth Sexual Health Plan (YSHP), coordinated and overseen by a statewide coalition of government agencies and nonprofits and community advocates called the Teen Pregnancy Prevention/Adolescent Sexual Health Partnership, provides schools and educators with a framework for comprehensive sex education. It covers topics ranging from contraception, STD prevention and other safe sex information to healthy relationship building and communication skills.



Students work on a group project in Ms. Marilyn Flick's health class.

Shelagh Johnson, one of the Oregon Department of Health members who helped to draft the plan, says that it isn't your typical sex education.

"Typically sex education is considered pregnancy and STD," Johnson said. "But folks from the start need accurate information and skills to be sexually healthy and that goes beyond just how to use a condom."

In the five years that have passed since the YSH Plan was first drafted, Oregon has seen historical improvement. By 2012 the pregnancy rate of high school age females decreased by 33 percent. This is due in part to a large increase in availability of long-term birth control. The Population Institute, a nonprofit that seeks to provide universal access to family

planning, conducted their 4th annual report card on reproductive rights in the United States in 2015, and Oregon received A+, while the national average was a D-.

Oregon's current teen birth rate is 3.2 percent, a number that has decreased by almost half in the last two decades. In correlation with the decline in pregnancy, during the same time period there was also a 250 percent increase in the use of long-acting reversible contraception for women under 24. Long-acting reversible contraception (LARC) such as IUDs and subdermal implants are more than 99 percent effective and considered by professionals to be one of the most effective forms of birth control.

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Since 2010, the YSH Plan has been working on boosting curriculum surrounding these birth control methods throughout the state. Research from the YSH Plan also attributes the increase in LARC use to the CDC recommending them as the most effective form of birth control for women of all ages in 2010. These resources could also be made easier to access by Oregon’s birth control subsidy called C-Care, which provides free and low cost contraceptives to those who qualify financially.

An additional factor contributing to Oregon’s sexually responsible atmosphere is the Human Sexuality Education law passed in 2009. The law, which was unanimously approved, requires all public primary and secondary schools to provide medically accurate and age-appropriate sex education. According to the current Oregon Administrative Rules, abstinence “is to be stressed,” in sex education, but students must also be taught about condoms and contraceptives. Furthermore, teachers are forbidden from “devaluing, ignoring or stigmatizing” students who have had sex and “must not, in any way, use shame or fear based tactics.”

The law is considered one of the most comprehensive in the country, according to health professionals, including those at Planned Parenthood.

Ely Sanders, who helped to craft the YSH Plan, says that the law had a positive effect but that there is always more work to be done.

“We are updating it again now with new requirements for domestic violence instruction and sex abuse prevention from the 2015 legislative session,” Sanders said.

While this holistic approach to sex education has proved to be a good fit for Oregon as a whole, many communities are still lacking the help that they need. One goal of the YSH Plan was to reduce disparities in sexual health among teens of different ethnicities. Overall, every demographic group in Oregon has seen a drop in teen pregnancy rates, but Black and Hispanic teens still have a higher likelihood of pregnancy than the statewide average.

Jenny Russell, Oregon Youth Advocacy Coordinator and Educator for Planned Parenthood, says that many non-English speaking communities are harder to reach. She attributes this to the way that “cultural identities and gender normative ideals” play differently across diverse communities. To continue addressing these diverse groups, the YSH Plan has programs in place aimed specifically at outreach in these communities.

Socioeconomics play a factor, too: according to the Guttmacher Institute, the rates of teenage pregnancy are much higher if one's family has low levels of education or income. As of 2011, unintended pregnancy rates for women age 15-44 who live at or below the poverty line was 11.2 percent, more than five times the rate among women at the highest income level.

Flick teaches in Oregon and witnesses firsthand the strides that are being made in sex education curriculum, but she knows that that's not the case for many other states. As a member and former president of the National Council on Family Relations, an organization that, among many other things, conducts research on human health and child development, she has spoken with educators who teach under much different circumstances.

Reflecting on an experience at a past NCFR conference, Flick recalls a teacher from Florida who had to teach an abstinence-only approach and was not allowed to discuss any kind of birth issues related to abortion. Flick says this is ineffective because, according to the CDC, nearly 50 percent of all students

are sexually active at some point during high school, and abstinence-only education doesn't teach them how to be prepared.

What boils down to for Flick is giving every student respect and responsibility to make their own decisions.

"Some of them do not intend to have sex until they're married and some of them have sex at lunchtime in the parking lot," Flick said of students. "The class is about educating people for making the right decisions wherever they are."

With the appropriate services and curriculum it has become clear that Oregon can improve the lives and futures of teenagers, but the problem isn't over. There are still communities to be reached and new policy that needs to be created to reach them.

"Certainly there has been a fair share of successes, and there is a lot to be proud of, but there are enough stories out there which consistently remind me we have more to do," said Johnson.



Ms. Marilyn Flick, the health teacher at North Eugene high school, starts class with a discussion about how everyone's projects are progressing.