Sex Education Decision Making at the Independent School District of Boise

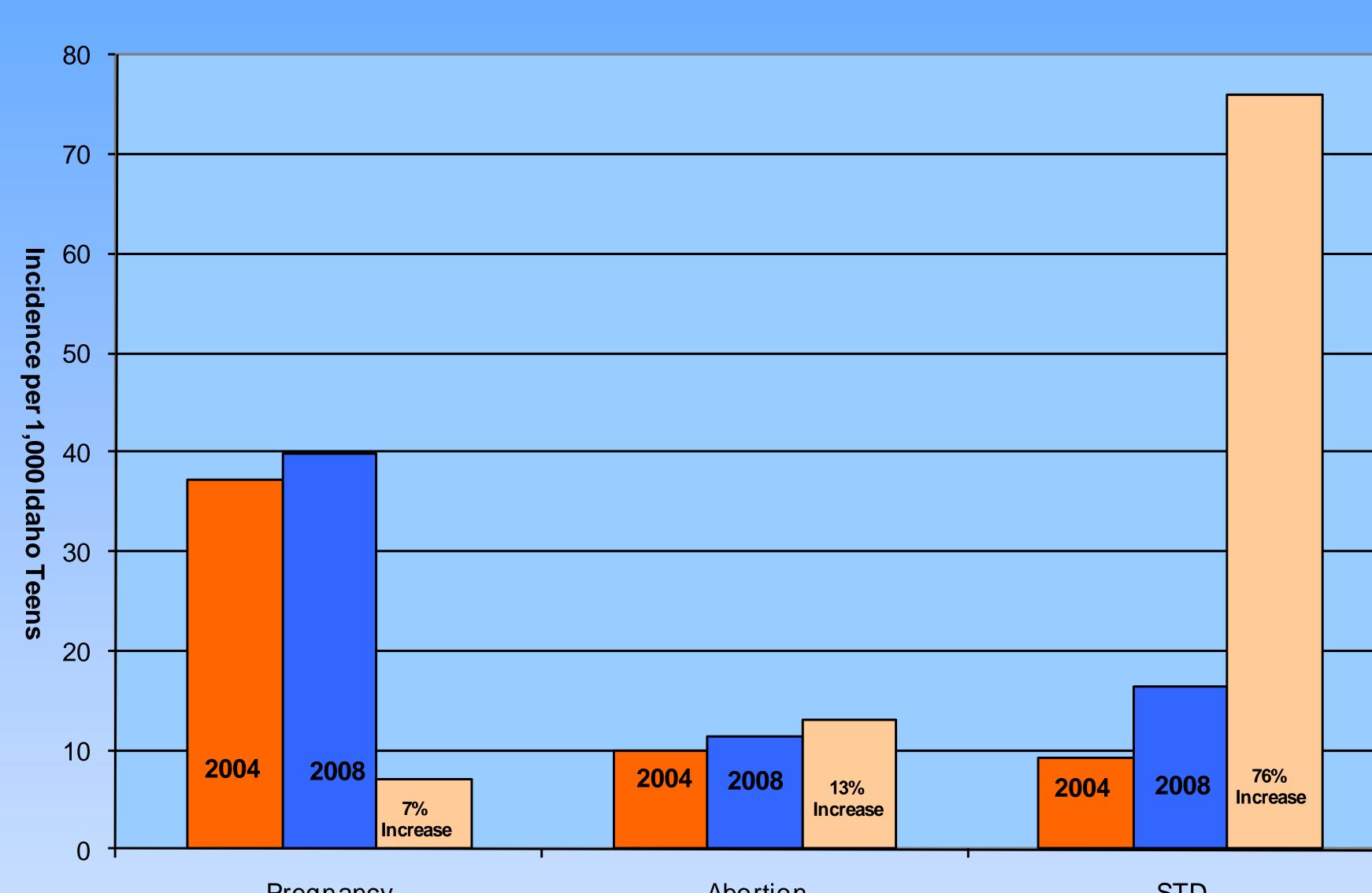
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Background



Pregnancy, Abortion, and STD (Chlamydia, Gonorrhea, Syphilis, and HIV) in Persons 15 – 19, Ada County, Idaho, 2004 vs. 2008.

A 2008 sexual health community needs assessment found:

- The preferred strategy to reduce teen pregnancy, abortion and sexually transmitted diseases (STD) in Boise teens was comprehensive sex education.
- The Independent School District of Boise (ISDB) had an abstinence-only sex education policy, so the strategy could not be implemented.

Purpose

- Understand what influences sex education policy decision-making at ISDB
- Inform the adoption of evidence-based sex education

Design

A qualitative case study described the most recent sex education policy decision made at ISDB.

Methods

- Unstructured one-on-one interviews with
- Two Board of Trustee members
- Five ISDB employees
- Archival record and document review
- Review of 2008 sexual health community needs assessment of Boise



Results

Five primary categories of influence emerged:

- Fear of conflict by Trustees led to avoidance of sex education issues.
- Trustees lacked knowledge of worsening teen sexual health, evidence-based sex education curricula, parental support, and statewide sex education policies.
- The Trustee's perception that the community value was abstinence until marriage prevented ISDB from facing the reality of teen sexuality.
- ISDB staff strictly adhered to the abstinenceonly policy to avoid controversy.
- Bureaucracy was a barrier to communication between teachers, school nurses, and administration.

Implications

- Strong community support for evidence-based sex education is essential to change policy.
- Nurses, teachers, and parents need to collaborate to bring vital information to Trustees.
- Strategies to improve communication regarding sexuality are needed.
- Additional research about teens' perceptions of sex education may increase effectiveness.