



Frequently Asked Questions

For Parents & Guardians



When it comes to parents and guardians, our aim is to help them gain the knowledge and confidence they need to communicate openly and honestly with their children about all aspects of sexuality, at every stage of life, so adolescents can make informed, empowered sexual health decisions for a lifetime.

We've created this Frequently Asked Question list (FAQ) to address some of the most common questions we receive from parents, with the hope of giving you more insight into the experience your child will have if they take part in our program (s).

Why is there so much more to learn than when I had sex ed?

In fall 2015, **the California Healthy Youth Act (AB 329)** was passed. It mandates that all California public schools expand the breadth and depth of what sexual health education covers, including more up-to-date discussions about sexually transmitted infections (STIs) and pregnancy prevention, gender and sexual identity, healthy relationships, sexual assault and safety, and HIV/AIDS. We hope these new regulations help adolescents to better understand their bodies, relationships, and the world around them.

Who developed the curricula my student will be receiving?

Health Connected's series of sexual health curricula has been developed over the past 20 years, constantly informed by our work with schools and districts, students, and parents. We strive to respond to the changing needs of California's youth.

Our staff—dedicated specialists in education, biology, gender, and sexualities, public health, and community-based organizations—have authored curricula for students in grades 5 to 12. These are developmentally appropriate, medically accurate programs designed to help youth better understand not only STIs and pregnancy prevention strategies but also the physical, emotional, and relational changes that accompany adolescence.

Before publication and implementation, each Health Connected curriculum is reviewed by independent experts, including physicians to ensure it's medically accurate and age-appropriate.

How does your curricula address sex and technology?

Increasingly, technology and media facilitate the ways kids communicate with their peers and the world. In middle school and high school, while we do not dedicate entire lessons to tech/media, we do use it as a springboard to discuss sexual safety, body image, and healthy communication. In Puberty Talk, our curriculum integrates tech/media to help youth define and identify instances of sexual harassment/assault, per the California Healthy Youth Act. Additionally, educators often address in-class questions from students about these topics in age appropriate ways. We encourage parents to consider their values around tech/media so they can talk to their kids about it early and often.

Where can I review the Health Connected curricula?

Typically, your child's school district—the entity with which we contract—will keep copies of the curriculum we are implementing on hand at either the district office or school sites, for parents/guardians to view before we begin instruction. You are also welcome to **make an appointment** with us to read through our curricula at our office in Redwood City.

Unfortunately, Health Connected cannot make our curricula available for viewing electronically for proprietary reasons.

What will my child do in class if we opt out?

We know our curricula may not be the right choice for every family, and we respect parents' right to opt their child out of all, or part, of our programming. If your child does not participate, their school is responsible for finding a meaningful educational activity for them to take part in, so your child can continue their academic growth.

Can I sit in on my child's class during a Health Connected program?

We understand parents' desire to ensure their child is getting the highest quality education. We also know that parents want their child to feel safe while talking about topics like body changes and sexual development. But, our experience shows us that when classes are taught by neutral, outside specialists,

“This program made me 100% comfortable with talking about sex and pregnancy in the classroom or at home.”

– 7th grade student

“I feel more comfortable talking about my body. I also feel more normal and I know I’m not the only one going through these changes.”

**– 5/6th grade student
Synapse School**

without the oversight of parents or guardians, we have the greatest opportunities to create an honest dialogue in which students can share their feelings—leading to emotional and academic growth.

That said, we do invite parents to visit our website at health-connected.org to learn about our approach to education and sexual health. We are currently building a new website with helpful tips for parents to support them in talking to their kids about sexual development. Here we'll provide more insights into our classroom experience.

Why are students in mixed-gender classes?

All of Health Connected's courses are taught in mixed gender environments. This model has worked successfully since our inception. We believe this model is important for many reasons, but there are three in particular. First, while many young people socialize in same-gender circles while they're young, this often changes with age. Learning about other genders and sexes demystifies things like body changes, menstruation, and “wet dreams” for all students so they can be knowledgeable and supportive of their peers and partners as they grow.

Secondly, it's gender inclusive. We know there are more than two gender identities. Research has shown that by having students participate in a mixed gender group, instead of separating them according to a gender binary, we can honor an array of identities, making all students feel welcome.

Lastly, the potential discomfort of being in a mixed gender class may bring positive outcomes. Some studies suggest when youth are able to navigate in uncomfortable or unfamiliar situations, neurological shortcuts are created in their brains that make similar experiences easier in the future.

I've heard that pictures of the foreskin and hymen are shown in Puberty Talk. Why?

Puberty Talk has been reviewed to ensure it's developmentally appropriate for 5th and 6th graders. We have seen the positive benefits that come from honest, medically accurate dialogue about sexual health, that honors the values that each student holds. That's why we believe it's important not to overlook anatomical structures like the hymen and foreskin in the context of anatomy lessons, particularly because these

areas have historically been regarded as taboo. When they are recognized as natural parts of the human make-up, they are normalized, which reduces the chances youth will experience feelings of shame about their anatomy.

Many adolescents have a strong desire to understand their growing bodies and gain reassurance that its evolving shape, size, and height is “normal”. Openly discussing the human form in a neutral way while acknowledging anatomical variation, ultimately helps youth feel more comfortable in their own skin.

I know that masturbation is included in the curriculum for Puberty Talk. How is it addressed?

Children, from very young ages, touch their genitals, intentionally and unintentionally, as a means of soothing themselves (to sleep, for example), or simply because it feels good. Yet masturbation remains a controversial and difficult subject for kids and adults alike. In fact, many parents never discuss it with their children.

In the classroom we discuss masturbation within the context of other body changes like increased hormones, pubic hair growth, and ovulation. We let students know that touching one's body in a way that feels good is an individual choice that each person can make based on their values—no one should feel pressured to do it. It is also something to be done in private. Discussing this behavior in a factual and unbiased way, helps re-frame masturbation as a personal decision, instead of something inherently shameful or unnatural. This discussion also provides medically accurate vocabulary so youth have tools to speak respectfully about the topic.

Why don't you wait until high school to talk about sexual assault and HIV/AIDS?

When taught in developmentally appropriate ways, we see that students react positively to learning about these themes, and take pride in gaining a clearer understanding of both sexual assault and HIV/AIDS. Discussions of both are required under the California Healthy Youth Act. *(Cont.)*

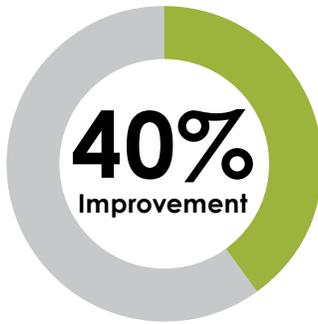


In our country, sexual assault is an epidemic. One in four girls and one in six boys are sexually abused before they turn 18 years old—12.3% of assault survivors are under 10 [1]. But when trained health educators and students explore sexual abuse and assault together in a classroom, students 1) understand what our law considers illegal and legal—reinforcing notions that sexual abuse is unacceptable; 2) gain comfort in using language like “sexual assault” and “sexual harassment”, knowledge that leads to self-confidence; 3) can practice identifying unhealthy behaviors and seeking help; 4) learn to be an “upstander”—intervening when something is amiss; and 5) have a safe place in which they can report abuse.

Similarly, our 5th and 6th grade curriculum includes basic information about HIV/AIDS, including how it's passed and how it is not, and what we can do to support people who are HIV+. We help students gain basic knowledge of the virus, give them language to discuss the illness respectfully, and begin empowering them to care for their (sexual) health.

What kinds of results have you seen with your programs?

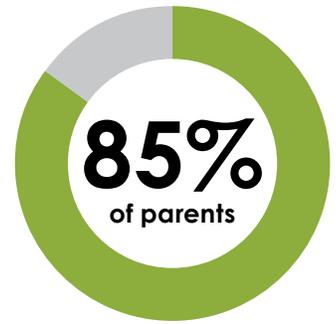
We conduct a pre and post evaluation in each classroom, recognizing that all students have a different knowledge base. While each child responds differently, we are pleased to report that we have seen overwhelmingly positive results for our curricula year after year.



Students improve their **sexual health knowledge** by 40% (25 percentage points) (as measured by post-test score).



95% of 7th-12th grade students state that they will feel more comfortable **accessing sexual health services** in the future.



85% of parents state that participation in our parent communication exercise will make them more comfortable having **conversations with their children** about sexual health and relationships in the future.

We appreciate your interest in your child's sexual health education! You can get more information on who we are and what we do by visiting health-connected.org.

Interested in one of our interactive workshops that help parents build skills in talking with their kids about sexual health? Email us at programs@health-connected.org.

To get the latest research and helpful tips just for parents delivered right to your inbox, sign up for our e-newsletter on our homepage at www.health-connected.org.

P.S. We never sell or give your information to outside parties.

Sources

1. National Sexual Violence Resource Center. (2015). Statistics About Sexual Violence. Retrieved from http://www.nsvrc.org/sites/default/files/publications_nsvrc_factsheet_media-packt_statistics-about-sexual-violence_0.pdf