

Facts and Figures for Comprehensive Health Education

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This document was produced by the Women's Fund of Omaha.



Research Related to Comprehensive Health Education

Comprehensive sex education DELAYS THE AGE OF FIRST SEX,* reduces unprotected sex and reduces unintended pregnancy.**

*Source: Laura Duberstein Lindberg, Isaac Maddow-Zimet (2012). Consequences of Sex Education on Teen and Young Adult Sexual Behaviors and Outcomes, *Journal of Adolescent Health*, Volume 51, Issue 4, Pages 332-338. <https://www.sciencedirect.com/science/article/abs/pii/S1054139X11007178>

**Source: Chin HB et al. (2012). The Effectiveness of Group-Based Comprehensive Risk-Reduction and Abstinence Education Interventions to Prevent or Reduce the Risk of Adolescent Pregnancy, Human Immunodeficiency Virus, and Sexually Transmitted Infections: Two Systematic Reviews for the Guide to Community Preventive Services, *American Journal of Preventive Medicine*, Volume 42, Issue 3, pgs. 272-294. <https://pubmed.ncbi.nlm.nih.gov/22341164/>

Three decades of research demonstrates that comprehensive sex education leads to increased student efficacy in EMPATHY, RESPECT FOR OTHERS and bystander interventions, communication, POSITIVE SELF-IMAGE as well as increased recognition of GENDER EQUITY and increased SENSE OF SELF-CONTROL and SAFETY. This research also demonstrated DECREASED INTIMATE PARTNER VIOLENCE perpetration and victimization.

Source: Eva S. Goldfarb, Lisa D. Lieberman. (2020). Three Decades of Research: The Case for Comprehensive Sex Education, *Journal of Adolescent Health*. <https://www.sciencedirect.com/science/article/pii/S1054139X20304560>

Effective health education PROMOTES SOCIAL AND EMOTIONAL LEARNING that contributes to ACADEMIC ACHIEVEMENT, fewer truancies,* reduced risk-taking and HEALTHY RELATIONSHIPS.**

*Source: Advocates for Youth. *Comprehensive Sex Education and Academic Success: Effective Programs Foster Student Achievement*. Washington, DC: Advocates for Youth. https://www.advocatesforyouth.org/wp-content/uploads/storage/advfy/documents/comprehensive_sex_education_and_academic_success.pdf

**Source: Advocates for Youth. *Science and Success*. 3rd ed. *Programs that Work to Prevent Teen Pregnancy, HIV and STIs in the US*. Washington, DC: Advocates for Youth; 2012. <https://advocatesforyouth.org/wp-content/uploads/storage/advfy/documents/thirdeditionexecutivesummary.pdf>

*Source: Durlak, et al., "The Impact of Enhancing Students' Social and Emotional Learning: A Meta-Analysis of School-Based Universal Interventions." *Child Development* 82.1 (January/February 2011): 405–432; Collaborative for Academic, Social, and Emotional Learning. "Social and Emotional Learning Core Competencies." <https://pubmed.ncbi.nlm.nih.gov/21291449/>; See also: <https://blog.shapeamerica.org/2021/03/how-to-integrate-social-and-emotional-learning-in-school-health-education/>

Effective health education is CHILD SEXUAL ABUSE PREVENTION. Children who lack sexual knowledge may be more vulnerable to sexual abuse. Some sexual offenders avoid children who know the correct names for their genitals because this suggests these children have been educated about body safety and sexuality.

Source: Kenny, M. C., & Wurtele, S. K. (2008). *Toward prevention of childhood sexual abuse: Preschoolers' knowledge of genital body parts*. In M. S. Plakhotnik & S. M. Nielsen (Eds.), *Proceedings of the Seventh Annual College of Education Research Conference: Urban and International Education Section* (pp. 74-79). Miami: Florida International University. <https://digitalcommons.fiu.edu/cgi/viewcontent.cgi?article=1121&context=sferc>

Inclusive and comprehensive sex education is SUICIDE PREVENTION and contributes to positive school climates. Students in states with a greater proportion of LGBTQ-inclusive sex education have lower odds of experiencing school-based victimization and adverse mental health.

Source: Proulx C et al. *Associations of Lesbian, Gay, Bisexual, Transgender, and Questioning-Inclusive Sex Education With Mental Health Outcomes and School-Based Victimization in U.S. High School Students*. Volume 64(5). May 2019. *Journal of Adolescent Health*. <https://pubmed.ncbi.nlm.nih.gov/30691941/>



Why is Comprehensive Health Education Needed?

Young people, ages 15-24, are disproportionately impacted by HIGH RATES OF STIS. In 2023, almost half (48.2%) of reported cases of STIs were among adolescents and young adults aged 15-24 years.

Source: Centers for Disease Control and Prevention. *National Overview of STIs in 2023*. (2024, November 12). <https://www.cdc.gov/sti-statistics/annual/summary.html>

Many LGBTQ+ YOUTH ARE AT HIGHER RISK FOR HIV infection—particularly youth of color.

Source: Centers for Disease Control and Prevention. Estimated HIV infections in the United States, 2018-2022. Published February 2025. https://www.cdc.gov/hiv-data/nhss/estimated-hiv-incidence-and-prevalence.html#cdc_survey_profile_key_findings-key-findings

While 35% OF NEBRASKA HIGH SCHOOL STUDENTS REPORTED EVER HAVING HAD SEX, only 5% have been tested for STIs.

Source: Nebraska Department of Education (2021). Youth Risk Behavior Survey. <https://www.education.ne.gov/wp-content/uploads/2023/03/YRBS-2021-Sexual-Health-1-791x1024.jpg>

Sexual violence impacts the LGBTQ+ community at significantly high rates. LGBTQ+ YOUTH ARE 7X MORE LIKELY TO EXPERIENCE SEXUAL VIOLENCE* and almost HALF OF TRANSGENDER (47%) INDIVIDUALS HAVE BEEN SEXUALLY ASSAULTED during their lives.**

*Source: Polaris Project. (2016). Sex Trafficking and LGBTQ++ Youth. <https://polarisproject.org/resources/sex-trafficking-and-lgbtq-youth>

**Source: James, S. E., Herman, J. L., Rankin, S., Keisling, M., Mottet, L., & Anafi, M. (2016). US Transgender Survey, <https://transequality.org/sites/default/files/docs/usts/USTS-Full-Report-Dec17.pdf>

Nationally, one in three high school female students experience dating violence by the time they are 18.* In Nebraska, LGBTQ+ STUDENTS EXPERIENCED SEXUAL VIOLENCE AT RATES OF NEARLY 4 TIMES their heterosexual peers. **

*Source: Davis, Antoinette, MPH. Interpersonal and Physical Dating Violence among Teens. The National Council on Crime and Delinquency Focus. (2008). <https://issuelab.org/resources/2733/2733.pdf>

**Source: Nebraska Department of Education (2021). Youth Risk Behavior Survey. 2021NEH_Graphs (powerpoint), slide 42, <https://docs.google.com/presentation/d/1xr8wkrWVIWl2n250tcOqhH0fWMCiSkTD/edit#slide=id.p41>

Most LGBTQ+ students in Nebraska EXPERIENCE ANTI-LGBTQ VICTIMIZATION AT SCHOOL. They also experienced victimization at school based on disability (35%), religion (28%) and race/ethnicity (24%). Most never reported the incident to school staff (58%). Only 14% of LGBTQ+ students who reported incidents said it resulted in effective staff intervention.

Source: GLSEN. (2021). School Climate for LGBTQ++ Students in Nebraska (State Snapshot). New York: GLSEN. https://maps.glsen.org/wp-content/uploads/2023/02/GLSEN_2021_NSCS_State_Snapshots_NE.pdf

Almost 1 OUT OF 5 LGBTQ+ NEBRASKA HIGH SCHOOL STUDENTS (19.3%) DID NOT GO TO SCHOOL BECAUSE THEY FELT UNSAFE AT SCHOOL or on their way to/from school, compared to 4.2% of their heterosexual peers.

Source: Nebraska Department of Education (2021). Youth Risk Behavior Survey. 2021NEH_Graphs (powerpoint), slide 30, <https://docs.google.com/presentation/d/1xr8wkrWVIWl2n250tcOqhH0fWMCiSkTD/edit#slide=id.p29>

LGBTQ+ youth who report having AT LEAST ONE ACCEPTING ADULT were 40% less likely to report a suicide attempt.

Source: The Trevor Project (2019). The Trevor Project Research Brief: Accepting Adults Reduce Suicide Attempts Among LGBTQ Youth. <https://www.thetrevorproject.org/2019/06/27/research-brief-accepting-adults-reduce-suicide-attempts-among-lgbtq-youth/>

Compared to LGBTQ+ students with no or few supportive school staff (0 to 5), STUDENTS WITH MANY (11 OR MORE) SUPPORTIVE STAFF AT THEIR SCHOOL WERE LESS LIKELY TO FEEL UNSAFE because of their sexual orientation, LESS LIKELY TO MISS SCHOOL, had HIGHER GPAS and felt a greater belonging to their school community.

Source: Kosciw, J.G., Clark, C.M., Menard, L. (2022). The 2021 National School Climate Survey: The experiences of LGBTQ+ youth in our nation's schools. (Executive Summary, Pg 67). New York: GLSEN. <https://www.glsen.org/sites/default/files/2022-10/NSCS-2021-Full-Report.pdf>

Students are not receiving the level of sex education they need to plan for their futures. In 2015 through 2019, ONLY HALF OF ADOLESCENTS RECEIVED SEX EDUCATION THAT MET THE MINIMUM STANDARDS articulated in the CDC's Healthy People 2020.

Source: Lindberg, L. D., & Kantor, L. M. (2022). Adolescents' Receipt of Sex Education in a Nationally Representative Sample, 2011–2019. *Journal of Adolescent Health*, 70(2), 290–297 <https://www.sciencedirect.com/science/article/pii/S1054139X21004444>



What is Age-Appropriate Comprehensive Health Education?

ABSTINENCE/DELAYING SEX

Comprehensive sexual health education **equips students to delay sexual initiation until they are emotionally and physically ready**. Abstinence, discussed by the time young people are 14, is a valid choice which everyone has the right to make for various reasons at different stages in their life. Dozens of comprehensive sex education programs including **content on risk avoidance through abstinence have been proven effective at helping young people delay sex**.

Source: Alford S, et al. *Science and Success: Sex Education and Other Programs that Work to Prevent Teen Pregnancy, HIV & Sexually Transmitted Infections*. 2nd ed. Washington, DC: Advocates for Youth, 2008. <https://advocatesforyouth.org/wp-content/uploads/storage/advfy/documents/thirdeditionexecutivesummary.pdf>

ACCURATE NAMES FOR BODY PARTS

The American Academy of Pediatrics recommends **teaching children as young as 18 months old the proper names of genitalia**. Using improper names may give a child the wrong idea that there is something bad about them.* School-based child abuse prevention programs are effective in increasing students' skills in protective behaviors. Common elements of these programs are: **teaching of safety rules, body ownership, private parts of the body, distinguishing type of touches and types of secrets, and who to tell**.**

*Source: American Academy of Pediatrics. (2004). Talking to Your Young Child About Sex. HealthyChildren.org. <https://www.healthychildren.org/English/ages-stages/preschool/Pages/Talking-to-Your-Young-Child-About-Sex.aspx>

**Source: Walsh, K., Zwi, K., Woolfenden, S., & Shlonsky, A. (2015). School-based education programmes for the prevention of child sexual abuse (Review). Cochrane Database of Systematic Reviews. doi: 10.1002/14651858.CD004380.pub3 <https://pubmed.ncbi.nlm.nih.gov/25876919/>

BIRTH CONTROL

An estimated **55% of teens nationally have had sexual intercourse by age 18** and approximately **80% of teens used some form of contraception at first sex**. Comprehensive health education includes birth control education before students need it, not after.

Source: Abma JC, Martinez GM. Sexual activity and contraceptive use among teenagers in the United States, 2011–2015. National health statistics reports; no 104. Hyattsville, MD: National Center for Health Statistics. 2017. <https://pubmed.ncbi.nlm.nih.gov/28696201/>

GENDER IDENTITY

By the age of four, most children have a stable sense of their gender identity.* Children receive messages about their gender and stereotypes at a young age. **As early as age six, harmful stereotypes about gender have already been present.**** The best way to combat negative impacts of gender role stereotypes on a young person's mental health is to **talk with children about the harm of restrictive gender-roles before puberty**.

*Source: Rafferty M.D., J. (2018, September 18). Gender Identity Development in Children. HealthyChildren.org. <https://www.healthychildren.org/English/ages-stages/gradeschool/Pages/Gender-Identity-and-Gender-Confusion-In-Children.aspx>

**Source: Prismic. (2019). Some Common Myths About Gender. Gender Spectrum. <https://www.genderspectrum.org/s/Some-Common-Myths-About-Gender.pdf>

HEALTHY RELATIONSHIPS

Maintaining a healthy relationship requires skills many young people are never taught—like **positive communication, conflict management, setting boundaries and negotiating decisions around sexual activity**. Sex education should include understanding and identifying healthy and unhealthy relationship patterns; effective ways to communicate consent, relationship needs and managing conflict; and strategies to avoid or end an unhealthy relationship. **This builds on topics of consent and bodily autonomy discussed in early elementary to help keep young students safe from child predators and lay the groundwork for an understanding of sexual relationships much later on** as well as ensuring a safer classroom environment.

Source: Future of Sex Education Initiative. (2020). National Sex Education Standards: Core Content and Skills, K-12 (Second Edition). <https://www.advocatesforyouth.org/resources/health-information/future-of-sex-education-national-sexuality-education-standards/>



SEXUAL INTERCOURSE/REPRODUCTION

As children approach puberty, **pediatricians recommend that children understand sexual intercourse and conception.** By age nine, children should start to receive more detailed information about reproduction.

Source: *Talking With Your Young Child About Sex*. Advanced Pediatrics. (2009). <https://advancedpediatricassociates.com/Talking-With-Your-Young-Child-About-Sex-3>

Source: Wurtele, Sandy & Kenny, Maureen. (2011). Normative sexuality development in childhood: Implications for developmental guidance and prevention of childhood sexual abuse. *Journal of multicultural counseling and development*. 43. 1-24. https://www.researchgate.net/profile/Sandy-Wurtele/publication/245022218_Normative_sexuality_development_in_childhood_Implications_for_developmental_guidance_and_prevention_of_childhood_sexual_abuse/links/549489eb0cf2ec1337581933/Normative-sexuality-development-in-childhood-Implications-for-developmental-guidance-and-prevention-of-childhood-sexual-abuse.pdf

SEXUAL ORIENTATION

Pediatricians recognize that **by nine years old, children should understand there are different sexual orientations.** They **also recognize the poor outcomes of LGBTQ+ youth due to stigmatization** and the evidence of family support combating these outcomes.

Source: [Amaze.org](https://www.amaze.org) (2017, November 9). Talking sexual orientation with Jane. [Amaze.org](https://www.amaze.org).

SEXUALLY TRANSMITTED INFECTIONS

The American Academy of Pediatrics **recommends teaching children ages 8-9 years old about STIs, especially HIV/AIDS.*** The Society for Adolescent Health and Medicine also advocates that youth learn more about HIV/AIDS **in a comprehensive way.****

*Source: American Academy of Pediatrics. (2004). Talking to Your Young Child About Sex. *HealthyChildren.org*. <https://www.healthychildren.org/English/ages-stages/preschool/Pages/Talking-to-Your-Young-Child-About-Sex.aspx>

**Source: D'Angelo, Lawrence J. et al. HIV infection and AIDS in adolescents: An update of the position of the Society for Adolescent Medicine. *Journal of Adolescent Health*, Volume 38, Issue 1, 88 – 91 [https://www.jahonline.org/article/S1054-139X\(05\)00452-0/fulltext](https://www.jahonline.org/article/S1054-139X(05)00452-0/fulltext)



Experts Who Support School-Based Comprehensive and Inclusive Health Education

AMERICAN ACADEMY OF PEDIATRICS

Originally published in 2001 and updated in 2016, the **American Academy of Pediatrics published a report to provide pediatricians updated research on evidence-based sexual and reproductive health education. They conclude that all children and adolescents need to receive accurate education about sexuality to understand ultimately how to practice healthy sexual behavior.** Sexuality education is more than the instruction of children and adolescents on anatomy and the physiology of biological sex and reproduction. It covers healthy sexual development, gender identity, interpersonal relationships, affection, sexual development, intimacy and body image. **Formal sexuality education in schools** that includes instruction about healthy sexual decision-making and STI/HIV prevention **can improve the health and well-being of adolescents and young adults.**

Source: American Academy of Pediatrics, Committee on Psychosocial Aspects of Child and Family Health and Committee on Adolescence. Sexuality education for children and adolescents. *Pediatrics*. August 2016. 138 (2) e20161348; DOI: <https://doi.org/10.1542/peds.2016-1348>

AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS

Reaffirmed in 2023, the **American College of Obstetricians and Gynecologists' Committee on Adolescent Health Care made the following recommendations and conclusions:** comprehensive sexuality education should be **medically accurate, evidence-based** and **age-appropriate**; comprehensive sexuality education should **begin in early childhood** and continue through a person's lifespan; and programs should not only focus on reproductive development but also **teach about forms of sexual expression, healthy sexual and nonsexual relationships, gender identity** and **sexual orientation**.

Source: Comprehensive sexuality education. Committee Opinion No. 678. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2016;128:e227–30. <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2016/11/comprehensive-sexuality-education>

AMERICAN MEDICAL ASSOCIATION

In 2018, the American Medical Association (AMA), the **premier national physician organization in the country, adopted a policy of support for inclusive and culturally competent sex education aimed at improving the health of the nation**. This update recognized that comprehensive, evidence-based sex education helps promote healthy sexual relationships, **lower rates of teenage pregnancy** and **reduce risky sexual behavior**. The AMA also updated its current policy to **encourage all schools to offer LGBTQ+ sex education** alongside heterosexual sex education, stating that **inclusive sex education helps increase awareness, dispel myths and break down stereotypes** without judgment or stigma.

Source: American Medical Association. Health Education Policy. Council on Science and Public Health. Health Education H-170.993. <https://www.ama-assn.org/press-center/press-releases/ama-adopts-new-public-health-policies-improve-health-nation-1>

AMERICAN PUBLIC HEALTH ASSOCIATION

Published in November 2014, the American Public Health Association (APHA) asserted that **all young people need the knowledge, attitudes and skills necessary to avoid HIV, other sexually transmitted infections (STIs) and unintended pregnancy so that they can become sexually healthy adults**. APHA calls on federal, state, and local governments and the nation's K–12 schools, in concert with families, community groups, and health care professionals, to implement effective sexuality education programs that are developmentally and culturally appropriate; foster equality and respect; support the elimination of health disparities, sexual assault, and intimate partner violence; and are based on sound science and proven principles of instruction.

Source: American Public Health Association. Sexuality as Part of a Comprehensive Health Education Program in K to 12 Schools. Nov 2014. Policy 20143. <https://www.apha.org/Policies-and-Advocacy/Public-Health-Policy-Statements/Policy-Database/2015/01/23/09/37/Sexuality-Education-as-Part-of-a-Comprehensive-Health-Education-Program-in-K-to-12-Schools>

AMERICAN SCHOOL HEALTH ASSOCIATION

With the focus of the Whole School, Whole Community, Whole Child (WSCC) model, the American School Health Association **supports implementing evidence-informed practices to make schools safer and more supportive of sexual and gender minority youth**.

Source: Shattuck D, Hall JL, Dickson E, Green AE, Ramos MN. Implementing evidence-informed practices to make schools safer and more supportive of sexual and gender minority youth. *J Sch Health*. 2021; 91: 258–261. DOI: 10.1111/josh.12966 <https://onlinelibrary.wiley.com/doi/10.1111/josh.12966>

CENTERS FOR DISEASE CONTROL

The Centers for Disease Control and Prevention's Division of Adolescent and School Health (DASH) has established an evidence-based approach schools can implement to **help prevent HIV, STIs and unintended pregnancy among adolescents**. It includes quality health education, systems that connect students to health services, and **safer and more supportive school environments**.

Source: Centers for Disease Control and Prevention. Division of Adolescent and School Health, National Center for HIV/AIDS, Viral Hepatitis, STD and TB Prevention. What Works: Sexual Health Education. Updated February 2020. https://www.cdc.gov/healthy-youth/?CDC_AAref_Val=https://www.cdc.gov/healthyyouth/whatworks/whatworks-sexual-health-education.htm

NATIONAL ASSOCIATION OF SCHOOL NURSES

Originally adopted in October 2002 and last updated in June 2017, the National Association of School Nurses (NASN) took the position that **developmentally appropriate evidence-based sexual health education should be included as part of a comprehensive school health education program and be accessible to all students**.

Source: National Association of School Nurses. (2017). Sexual health education in schools (Position Statement). Silver Spring, MD. <https://journals.sagepub.com/doi/10.1177/1942602X221124671>

NATIONAL ASSOCIATION OF SCHOOL PSYCHOLOGISTS

In 2021 the National Association of School Psychologists (NASP) released a position statement which **recognizes that sexuality and sexual health are part of healthy development, that all types of healthy sexual relationships exist and that all children**, including those representing all racial/ethnic backgrounds, genders, gender identities, sexual orientations, abilities, and disabilities **should have access to evidence supported, comprehensive, developmentally appropriate, accurate, and inclusive sexuality education**.

Source: National Association of School Psychologists. (2021). Comprehensive and inclusive sexuality education [Position Statement]. <https://www.nasponline.org/research-and-policy/policy-priorities/position-statements>

SEXUAL VIOLENCE PREVENTION ADVOCATES

In 2021, the National Sexual Violence Resource Center published key findings of comprehensive sexuality education as a **primary prevention strategy for sexual violence prevention**. This explains the link between school-based sex education programs and sexual violence prevention, and how **sex education can become an important strategy in preventing harm**.

Source: National Sexual Violence Resource Center. (2021). "Key Findings from Comprehensive Sexuality Education as a Primary Prevention Strategy for Sexual Violence Perpetration." https://www.nsvrc.org/sites/default/files/2021-02/Comprehensive%20Sexuality%20Education_Final508_0.pdf

STUDENTS IN NEBRASKA

Results from a 2021 Youth Participatory Action Research (YPAR) research project shows that **young people in Nebraska are asking for better sex education, specifically selecting school-based sex ed** as a desired source for topics such as **consent** and **healthy relationships, sexual orientation, gender identity** and additional related skills and resources.

Source: 2021 Youth Participatory Action Research (YPAR) research project. Sex Education: What Do Nebraska Students Want? https://www.omahawomensfund.org/wp-content/uploads/NDE_2021_YPAR-Infographic-Flyer_FINAL-8_4_21.pdf

PARENTS

Parents and likely voters, regardless of political affiliation, religion and/or regional demographic, **overwhelmingly support instruction on abstinence, birth control, STIs, healthy relationships, sexual orientation and puberty.**

Source: Kantor, Leslie, and Nicole Levitz. "Parents' Views on Sex Education in Schools: How Much Do Democrats and Republicans Agree?" *Plos One* 12, no. 7 (July 03, 2017). <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0180250>

PLEASE NOTE:

Throughout this document, you will see variations in the utilization of the acronym LGBTQ+, and that variation reflects the usage of the terms in the cited research. The letters in the acronym LGBTQ+ stand for lesbian, gay, bisexual, transgender, queer and/or questioning.

HOW TO CITE THIS REPORT:

Women's Fund of Omaha, *Facts and Figures for Comprehensive Health Education*, 2025.

