

Adolescent Sexual Health Education Programs

Focus on the Information & Education (I&E) Program

December 2020

DATA BRIEF



The goal of the Information & Education (I&E) Program is to improve adolescent sexual and reproductive health and well-being with a particular focus on promoting healthy relationships, as well as decreasing adolescent unintended pregnancy and sexually transmitted infections (STIs). The program provides funding to local agencies serving youth with higher needs in a variety of settings across California. I&E agencies provide comprehensive sexual health education, information about eligibility and access to federal, state, and local clinical services, life-skills instruction in areas such as communication with partners and trusted adults, and negotiation skills. Agencies also engage parents, caring adults and community stakeholders to promote adolescent health and well-being.

This brief presents program attendance data (January-June 2017) for 2,877 youth and survey data (March-June 2017) from 2,131 youth surveyed at program entry and 1,911 youth surveyed at program exit.

WHERE WE SERVE

In 2017, there were 14 I&E agencies that served youth in nine counties (**Figure 1**). Half of participants were served in traditional high schools, 17% in alternative/continuation

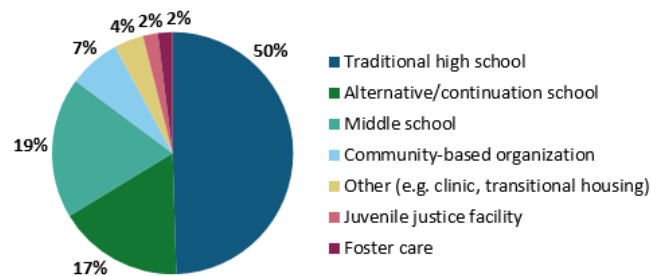
schools, 19% in middle schools and smaller proportions in other settings (**Figure 2**).

Figure 1: Counties served by I&E Agencies

Fresno
Kern
Lake
Los Angeles
Merced
Riverside
San Bernardino
Santa Barbara
Stanislaus



Figure 2: Percentage of participants by setting (n=2,877)



WHO WE SERVE

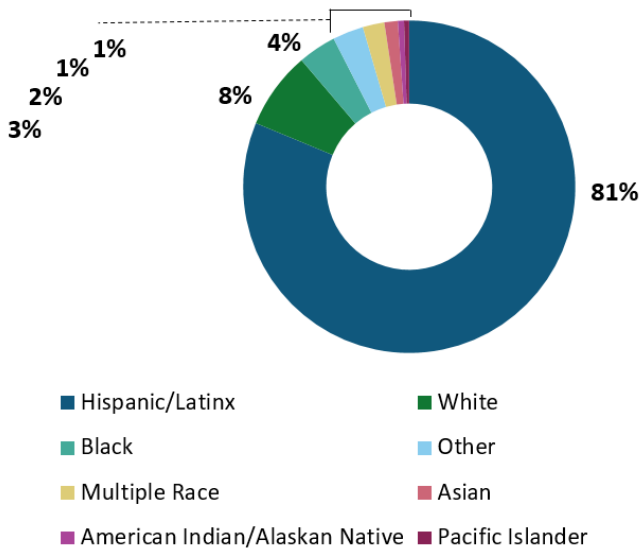
I&E agencies served 2,877 youth from January to June 2017. 53% were male, 46% were female, and 1% were transgender, gender queer, or another gender identity. 50% were ages 15-17, 40% were ages 10-14 and 7% were ages 18-21.¹ 81% were Hispanic or Latinx (**Figure 3**).

I&E agencies serve youth who meet at least one of the following criteria:

- ▶ Reside or attend school in a high-need community
- ▶ Attend an alternative or continuation school
- ▶ Did not complete middle or high school

- ▶ Are experiencing homelessness or have run away from home
- ▶ Are emancipated or in foster care
- ▶ Are in a juvenile justice facility
- ▶ Reside in a farmworker household
- ▶ Identify as Lesbian, Gay, Bisexual, Transgender and/or Queer
- ▶ Are in a gang or are an ex-gang member
- ▶ Have special needs

Figure 3: Percentage of participants by race/ethnicity (n=2,756)¹



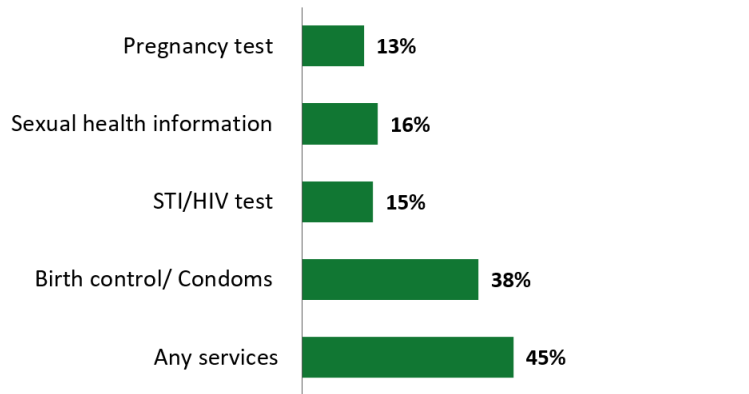
Sexual Experience and Use of SRH Services

Receiving sexual and reproductive health (SRH) services from a doctor or clinic differed greatly by the sexual experiences of program participants. Of the 2,093 youth who reported information about their sexual history at program entry, only 9% of those who had never had sex, versus 45% of those who had ever had sex,

reported ever receiving SRH services (**Figure 4**). This figure shows the types of services received by youth who reported ever having sexual intercourse.

24% *Percentage of participants who reported ever having vaginal and/or anal sexual intercourse.*

Figure 4: Among participants who had ever had sexual intercourse, percentage at entry who had received SRH services (n=465)²



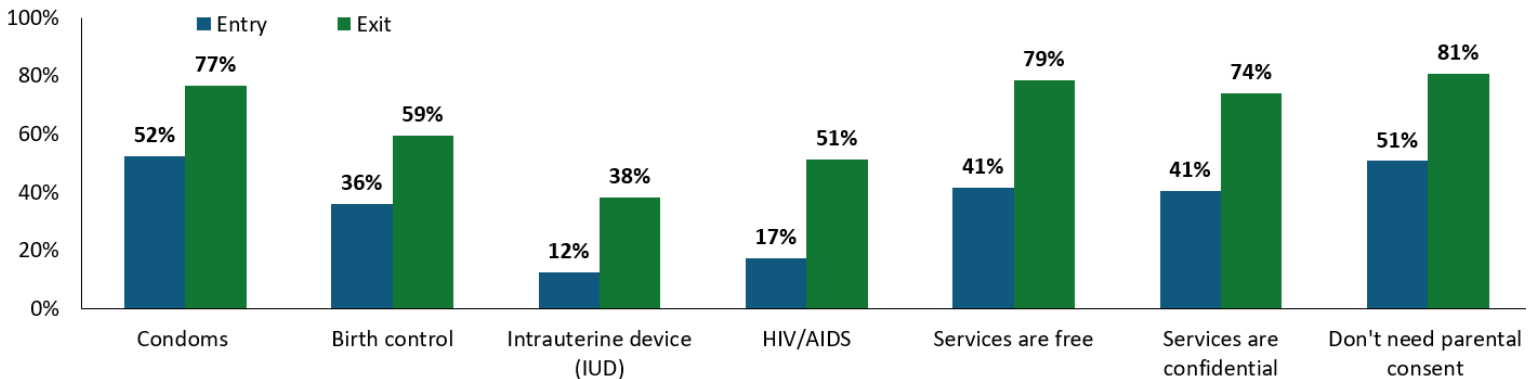
EFFECTIVENESS OF ASH PROGRAMS

Knowledge About SRH and SRH Services

I&E participants surveyed at program entry and exit showed an increase in knowledge about SRH topics and services (**Figure 5**). Notably, 34% more participants answered the HIV/AIDS knowledge question correctly at program exit than entry. Participants' knowledge about SRH services also increased from program entry to exit: 37% more participants knew that services are free, 34% more understood that services are confidential and 30% more knew that they have the right to receive SRH services without parental permission.



Figure 5: Percentage of participants who answered the knowledge about sexual and reproductive health and services questions correctly at entry and exit (n=1,178)³



Participant Perceptions

Overall, survey participants reported positive perceptions of the I&E program, including that they felt respected as a person in the program (88%), thought the materials were clear (86%), did not feel picked on, bullied or teased (85%), and thought that the program activities or discussions helped them learn (84%). Over 2/3 of participants reported they had a chance to ask questions (71%) and that they were interested in the program (69%).

Footnotes: 1.) 90 participants did not provide their age. 121 participants did not provide their race/ethnicity. 2.) Among youth surveyed, 38 did not respond about sexual intercourse. Of those reporting sex, 41 did not respond about SRH service use. 3.) All changes between entry and exit are significant ($p < .05$). There were 15 to 54 missing responses for each question.

SUMMARY

Young people who are knowledgeable about their sexual and reproductive health and well-being are less likely to have unintended pregnancy, sexually transmitted infections and healthier relationships. Through I&E, program participants are empowered to make informed decisions regarding their sexual and reproductive health. Information presented here shows that I&E is reaching youth with higher-needs in a wide variety of settings throughout California, that participants reported high satisfaction with the program and that the program is effective for improving participants' knowledge about SRH topics and services.

This brief was prepared by the California Department of Public Health Maternal, Child and Adolescent Health Division and the University of California, San Francisco Philip R. Lee Institute for Health Policy Studies.