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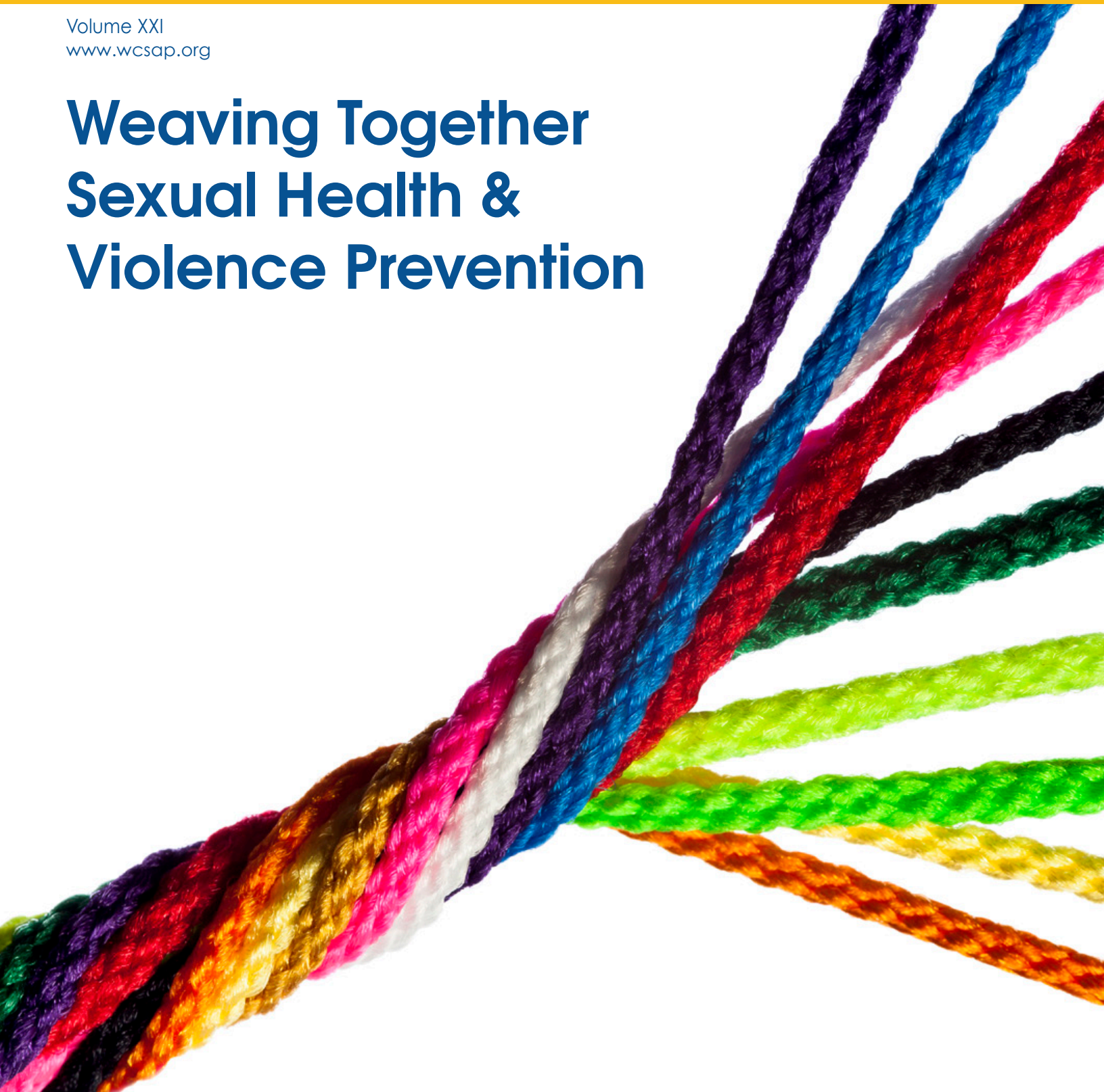
A Publication of the
**Sexual Assault
Prevention Resource
Center**, dedicated to
providing technical
assistance to those
engaged in sexual
violence prevention
in Washington State

WASHINGTON COALITION OF SEXUAL ASSAULT PROGRAMS

SPRING 2018

Volume XXI
www.wcsap.org

Weaving Together Sexual Health & Violence Prevention





The work being done in the fields of sexual health education and sexual violence prevention encompasses so many exciting and challenging public health concepts. This issue of PISC draws equally from those working within the sexual health field and those working in the sexual violence prevention field. We'll explore overarching strategies and hear the stories of those on the ground.

The first two articles in this issue are from Washington State sexual health practitioners. Our state allies at King County Public Health share research on the deep connection between sexual health education and sexual violence prevention, and provide tangible tips on getting to the roots of sexual violence within health education. Next, a local health educator writes about their journey delving into the world of comprehensive sex education. They share the humor and awkwardness of being "that person" that talks about sex and sexuality with young people, as well as key 'lessons learned' that we can all benefit from.

Then we shift gears, just a little, to look at the ways sexual violence preventionists are incorporating sexual health concepts into their work. First, we highlight a Washington State program, Skagit Domestic Violence & Sexual Assault Services, whose preventionist is engaging with youth in a variety of community settings, to build skills and shift norms related to healthy sexuality. Finally, we jump down to Oregon to learn about the statewide partnerships, policies, resources, and on-going practices of making sexual health promotion a critical part of sexual violence prevention. As always, we close this issue with our Question Oppression and Resources sections to nurture deep conversations on these topics in your work.

We hope this issue will provide you with some new ideas to use in your prevention work. We welcome feedback at prevention@wcsap.org.

In Solidarity,
Kat Monusky, Prevention Program Coordinator
WCSAP Prevention Resource Center



WCSAP

Washington Coalition of
Sexual Assault Programs



Volume XXI
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& Violence Prevention

The mission of the Washington Coalition of Sexual Assault Programs is to unite agencies engaged in the elimination of sexual violence through education, advocacy, victim services, and social change.

The Prevention Resource Center is a project of WCSAP, designed to provide support and technical assistance to individuals, communities, and agencies engaged in sexual violence prevention within Washington State.

Partners in Social Change

is published by the WCSAP Prevention Resource Center from its office in Olympia, Washington. The focus of this publication is to present information and resources for the prevention of sexual violence, with a special emphasis on social change.

For membership information, visit www.wcsap.org.

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SPRING 2018

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INTEGRATING SEXUAL VIOLENCE PREVENTION INTO Comprehensive Sexual Health Education

Andrea Gerber and Kari Kessler
Public Health – Seattle & King County

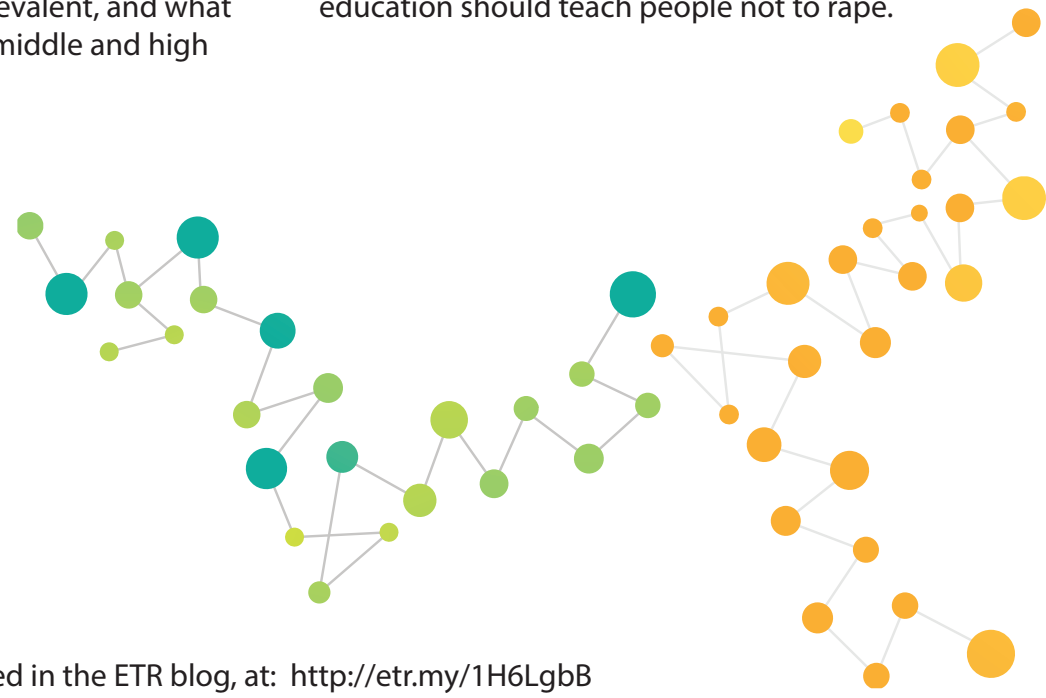
Public Health
Seattle & King County 

The Role of Sex Ed in Sexual Violence Prevention

There has been much attention to the topic of sexual violence in the media recently. Many colleges, including those with open Title IX investigations, are clamoring to implement or improve education programs in an attempt to reduce the number of rapes perpetrated on their campus. Victims are coming forward to tell their #metoo stories of assaults and harassment they have experienced in the workplace across sectors. This attention to the issue of sexual assault has left many people wondering if sexual assault prevention education shouldn't be more prevalent, and what role sexual health education in middle and high schools should play.

Preventing Perpetration

As authors of FLASH, a comprehensive sexual health education program with an evidence-informed sexual violence prevention component, we have been considering these issues for a long time. We believe that sexual health education is exactly the venue in which to address these issues, and that this education should start early. We also believe, and research agrees, that the only way to effectively reduce sexual violence is for this education to focus on the prevention of perpetration of sexual violence. To be clear – sexual assault prevention education should teach people not to rape.



Based on an article first published in the ETR blog, at: <http://etr.my/1H6LgbB>



FLASH Curriculum

The FLASH curriculum is published by Public Health – Seattle & King County. To learn more about FLASH, go to www.etr.org/flash. To inquire about FLASH training for educators, contact FLASHTrain@etr.org. High School FLASH, 2nd edition, and Middle School FLASH, 3rd edition, are authored by Andrea Gerber, Kari Kesler, Mo Lewis, Rebecca Milliman and Becky Reitzes.

Applying the Research

The CDC and other research tells us that to reduce rates of sexual violence we need to undo some of our traditional gender norms, particularly those that link masculinity to domination, entitlement and violence and that link femininity to submissiveness and sexual appeal. (How affirming to have the CDC provide a research-based recommendation for the dismantling of rape culture.) It is also important to point out that these toxic masculine gender norms do damage to people of all genders. For example, notions of masculinity that value domination, violence and stoicism impede men's ability to form authentic and meaningful relationships, lead them to engage in risky behaviors, and shame them for vulnerability.

Research on sexual violence prevention has not yet benefited from the same level of funding and attention as many other health issues impacting young people. There are no long proven program lists or extensive meta-analyses of studies. How then do you actually prevent sexual violence through a comprehensive sexual health education program? Based on the research and extensive discussions among our team members and local sexual violence prevention experts, we'd like to provide some guidance for others looking to integrate sexual violence prevention into an existing sex education program.

The CDC provides a helpful list of risk factors¹ that are "associated with a greater likelihood of sexual violence perpetration." A few of these risk factors include:

- ▶ **Adherence to traditional gender role norms**
- ▶ **Hostility towards women**
- ▶ **Hyper-masculinity**
- ▶ **General tolerance of sexual violence within the community**
- ▶ **Societal norms that support sexual violence**
- ▶ **Societal norms that support male superiority and sexual entitlement**
- ▶ **Societal norms that maintain women's inferiority and sexual submissiveness**

¹ <https://www.cdc.gov/violenceprevention/sexualviolence/riskprotectivefactors.html>

Three Essentials for Incorporating Sexual Violence Prevention into Sex Education Programs

1. Teach explicitly about gender norms and provide skills for resisting them

Gender norms are a cultural creation. They vary from culture to culture and have varied across time. Young people need to understand that gender expectations are purely fiction. There are no ways of being that are “for girls” or “for boys.” There is nothing inherent that leads all men to be violent or all women to be submissive. And in fact, our students all know people, or are those people themselves, who don’t fit these stereotypes at all. In addition to learning about gender norms as a cultural creation, young people (and all of us, really), need the skills to resist them. When a person recognizes that their behavior or the behavior of a friend is likely being negatively influenced by a gender expectation, they need the language, the motivation and the confidence to resist that pressure. These skills are important for young people of all gender identities and sexual orientations, as we are all influenced by these expectations. We cannot hope to lower rates of sexual violence without tackling these issues head on.

Example

In a high school FLASH lesson, Bruno is feeling sad and hurt because his girlfriend broke up with him, but when his friends ask him how he is, he says he’s glad they broke up and that he never cared about her anyway. We ask students to identify “Which traditional expectation of men is likely influencing Bruno’s action?” and “What problems could this expectation cause for Bruno?” as well as “What advice would you give to Bruno to challenge this gender expectation?”



2. Teach young men to recognize the presence or absence of consent

Traditional gender expectations of men place them at risk for not recognizing or respecting consent. Young men are taught to be strong and in control, pushing ahead for what they want. Coupled with the lack of teaching on recognizing the emotions of others, this can lead some men to not recognize consent, or to not be concerned with the lack of consent. In fact, research shows that men who have committed an act of sexual violence are more likely to interpret an ambiguous situation in the affirmative. It is imperative that we teach what consent is and how someone would know if they had consent for a specific sexual act. This includes building communication skills so that young people feel more comfortable checking in with a partner during a sexual encounter to ascertain ongoing consent, skills in reading body language, and skills for handling disappointment when consent is not given.

In FLASH, we provide specific sexual situations for young people to analyze for consent, and discuss how they drew their conclusion. Although young men’s socialization puts them at particular risk for not recognizing consent, people of all genders need to know how to ask for consent and how to recognize it. For this reason, and to support the dismantling of gender stereotypes, FLASH does not rely solely on scenarios in which men seek consent from women. Additionally, it is also very important to remind students that the lack of a “no” does not indicate a “yes.” Consent is a more active process than that, and must be freely given. These concepts have some interesting crossover with abstinence lessons, which likely focus on the skill of saying no. In this framework, learning to say no is not a sexual violence prevention skill – learning to hear no is. Furthermore, “saying no” lessons must be clear that if a person is a victim of sexual assault, it is not because they did not say no clearly enough. It is because someone else didn’t listen well enough.

3. Reset norms so that sexual violence seems unacceptable

Many people still believe that young men simply can't control themselves, and that in the right circumstances, rape is inevitable. This is a myth. Not only is it offensive to men, it contributes to a societal norm that supports sexual violence. When asked if they would stop sex when they were asked to, even if they were already aroused or turned on, the overwhelming majority of high school students we have surveyed said they would definitely stop. However, the same students, when asked if their peers would stop, said no. FLASH collects this data in the high school in which it is taught and presents it back to students in a social norms campaign, to illustrate that their peers, in fact, feel just like they do – that forcing sex is wrong. Correcting these misperceptions is a powerful tool for resetting social norms. As long as we feel like sexual violence is “just something that happens,” we are powerless to change it.

A Note of Caution

Some abstinence education programs and speakers rely heavily on gender stereotypes in their teaching, and link a woman's worth to her sexual experiences. These programs, which teach young women to resist young men's sexual advances, and which teach that women who have had sex are “used goods” or damaged in some way are in fact reifying the very risk factors we have been discussing here. Let us be clear: these programs are promoting and supporting hostility towards women, adherence to traditional gender norms, and societal norms that support male superiority and sexual entitlement. These programs have no place in a community that is working to end sexual violence. Any school that is concerned with sexual violence should carefully analyze its abstinence programming for these elements.

A Commitment to Young People

Young people are eager to make positive change in the world around them, and are rightly resentful of unfair expectations placed on them. Critical conversations about gender are welcomed by them, and can make a real impact. When sexual health education programs incorporate these discussions, along with the building of skills and the resetting of norms, meaningful inroads can be made into the seemingly entrenched issue of sexual violence.



Bios



Andrea Gerber, MSEd



Kari Kesler, MA

Andrea Gerber, MSEd, and Kari Kesler, MA are Family Planning Health Educators with Public Health–Seattle & King County. Andrea has worked for nearly 30 years in the reproductive and sexual health education field. Kari's background is in sexual violence prevention and as a college instructor for sexualities courses. They have taught sexual health education to students in all grades and have trained teachers. They are the lead authors of middle and high school FLASH and co-authors of the redesigned WA State KNOW curriculum. In 2016, they received the Public Health Excellence Award from the Washington State Public Health Association.



BEING "THAT PERSON": Stories from a Sexual Health Educator

Collin Veenstra

MY counselor recently reminded me that my work in sexual health and sexual violence (SV) prevention requires me to be a person the youth I work with may have incredibly mixed feelings about. No matter how hard I try to make my workshops and classes positive, inclusive, and trauma-informed, or to show up as a genuine, trustworthy adult, I am That Person. That Person who, every time they come into the room, brings up uncomfortable, sometimes incredibly difficult topics; topics our society teaches us from an early age to NOT talk about. No matter how helpful, impactful, or fun my workshops may be, I am That Person. For those working in SV prevention or advocacy, you might be That Person too.

I want to be clear that I don't think this is a bad thing. Creating spaces where young people are able to learn, engage, and think critically about their sexual health, autonomy, and relationships is crucial to helping youth navigate their lives in healthy, safe ways. But being That Person is also a considerable undertaking, requiring a great amount of passion, commitment, and self-care.

Looking back a year into my work in comprehensive sexual health, there are many things I have learned so far; new concepts, information, activities, and curricula. But, more importantly, I better understand the importance of normalizing and better connecting sexual health and sexual violence prevention for the young people I work with.

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My Dive into Comprehensive Sexual Health Education

When I took my first position as a youth sexual health educator last fall, I anticipated very natural connections between this position and my experience in sexual violence prevention. Amid the nervousness and heartache for the prevention position I had departed, I felt excited to use my skill-set to make the high school classes I would teach more trauma-informed, consent-focused, and LGBTQ inclusive.

I felt I had a solid grasp on what my new position would entail, and that this transition would be more similar than different to my past prevention work. After facilitating workshops on topics like consent, boundaries, healthy relationships, and bystander intervention, how difficult would it be to add in discussions around Sexually Transmitted Infections (STIs), unintended pregnancy prevention, and reproductive anatomy? I looked forward to expanding my personal scope of prevention to include these topics, building a more full-circle approach to healthy sexuality and relationship education.

I had been through weeks of training on comprehensive sexual health topics, had studied and adapted the curriculum I would be using, and was experienced with the 14-19 age range I would be working with. What I hadn't given much thought to, however, was my comfort of actually diving into discussions about the specifics of anatomy, abstinence, sexual activity, STIs, and birth control with students. When a young person asks you what a "blue waffle" is in front of their freshman peers, what is your internal reaction going to be? When a student asks a series of questions about "blue balls," what level of anxiety is going to course through your body while in front of a class?

Specific questions that did not include the color blue left me equally nervous, doubting my training and gut instinct. I had been trained on appropriate ways to respond to seemingly off-the-wall questions, but the internal panic these moments created made me doubt my ability to be effective. These felt different than the questions I had been asked in prevention work, in large part

because many of these answers were scientific facts I either knew or didn't. The prevention field often dives deep into the grey areas that our society perceives consent and boundaries to exist within, and uses deep discussion to wade through. In teaching sexual health, I felt so nervous that I would misstep in simply not knowing all the answers. My start into teaching classes filled me with the same dread I remember from my own hugely lacking sex education classes back in high school. Who was I to be teaching this?

So, in the "burn this knowledge into your brain" mode I had used to tackle Latin classes back in college, flashcards on STI symptoms, contraception options, and fill-in-the-blank reproductive anatomy quickly began to litter my desk at home. My classes were bombarded with not only the basic knowledge of these topics, but a litany of statistics, studies, and lengthy explanations of each term used. Not too surprisingly, time management and student boredom quickly added to my stress. My partner woke me up one night to tell me I had been talking about spermicidal sponges in my sleep, and this was about the moment I realized I was going overboard in my approach.

When talking with a colleague about this struggle, he reminded me of the simple fact that, oftentimes, details fall flat or are forgotten, but general messages are more typically what people carry with them. This simple reminder shifted me back to my years of youth development and prevention, and helped me reframe my work into emphasizing more general, recurring themes.

Returning to my prevention roots, the engagement and enthusiasm of my students, as well as my personal comfort and enjoyment shifted tremendously. The more I focused on staying honest and present in discussions with youth, meeting questions that might cause me internal panic with "you know, I'm not sure the answer to that, but I'll do some research and will find out for all of us!", the more comfortably students responded to lessons.

Lessons Learned

The role of “educator” often falls into a frustrating hierarchy of those who hold the knowledge vs. those who don’t. The more I acknowledged and modelled moments I, myself, was not certain, however, the more accessible class discussions became. Students asked questions they themselves may feel uneasy not knowing, and we worked to practice and model how to talk about sex and sexual health in an approachable, conversational, shame-free, and knowledge-seeking way.

I continue to study new research and sexual health developments, but recognize that expertise is not the end goal, particularly with the changing nature of this field. Creating spaces for honest discussions, and modelling how to proactively find answers feels equally, if not more, important.

I acknowledge the discomfort, embarrassment, and intensity these topics may hold for my students, and to better internally address and care for these feelings in myself. I tackle and adapt the gender stereotypes, heterocentric and binary-focused lessons many sexual health curricula unfortunately still emphasize. I do my best to appear unflappable when students intentionally ask uncomfortable questions to try to get a response, and work to answer their questions in factual, normalizing, and “can’t shake me” ways.

I bring up consent and boundaries in nearly every class, connecting it to topics including sexual decision-making, birth control, condom use, and informing partners of STIs. I encourage my students to think critically about the messages they take in and the way they treat one another, often reminding them “we don’t have to fully understand someone’s identity to treat them with respect,” and that “there are many things we don’t have control of over the world, but we do have agency in how we treat others.” Finding this groove that honors my prevention roots has created a positive shift in my rapport with students. Ultimately, I know it has made me a better educator.

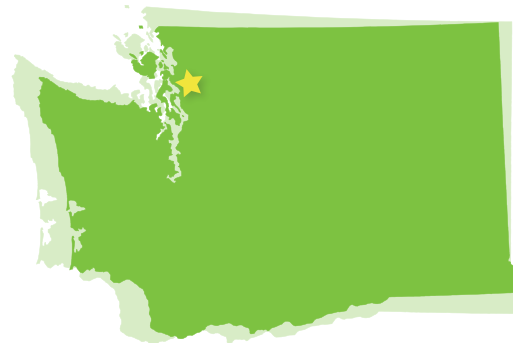
There is no “how to” guide when it comes to those new to teaching comprehensive sex-ed, and using or adapting already-made curricula can only go so far. I have come to recommend websites like Scarleteen.com, which provides sexual health through a trauma-informed, prevention lens. Advocates for Youth and Planned Parenthood have a variety of resources and curricula on their websites that can be great starting points for discussion. Looking to resources for parents and caregivers on how to talk with young people about sex can be a great starting place for folks aiming to build sexual health into their current work.

Comprehensive sexual health education is not something people should go into without research and support, but it is also not something people should be fearful in approaching. That general comfort (or comfort in the discomfort) of explaining to a room of teenagers how condoms or dental dams work takes time, practice, and patience with yourself. But ultimately, the more prevention framework that we can root into sexual health education, the more equipped and empowered students can be.

Bio



Collin Veenstra (they/them) is a youth sexual health educator and advocate, cat fanatic, visual artist, and founder the Peer Education Empowerment League (PEEL), a new sexual violence prevention youth leadership program in Tacoma, WA.



Skagit Domestic Violence and Sexual Assault Services

Helena Schlegel
Prevention and Education Coordinator



A teen's collage depicting different influences on their sexuality.

S kagit Domestic Violence and Sexual Assault Services serves the Skagit County community, with our office located in Mt Vernon. Our Prevention and Education program prioritizes engaging youth in schools, after school programs, and community organizations to educate and empower the community to prevent domestic and sexual violence. In the past year, our prevention programming has emphasized healthy sexuality content. This focus on sexuality has given us the ability to delve deeper in to the root causes of violence and social and cultural norms, and given teens the opportunity to model skills and behaviors

that promote healthy sexuality and relationships. Because sexuality is intertwined with so many aspects of someone's identity, the content and discussions have given me the opportunity to foster relationships with teens and strengthen partnerships with key community organizations and stakeholders.

Following, are three of our prevention programs; providing information of the setup of the programs, insight in to some of our content, topics, and activities, and some reflection on the progress of the groups.

Concrete High School

One of our agency's goals in our strategic plan is to engage rural communities in Skagit county on the topics of domestic and sexual violence prevention, and there is no better place to begin that process than Concrete School District. Concrete is a small town, population of about 750, located at the base of the North Cascades National Park, about a 30-minute drive 'upriver' to the nearest city. Due to the geographical isolation and rural nature of the population, there are no after school or community based programs outside of the school day, so our opportunity to engage with youth is limited to school hours. Recognizing the lack of resources, education, and conversations around dating, sexuality, and relationships, we established a partnership with Ms. Thompson, the middle and high school health teacher. What began as guest presenting during the sexuality portion of the health class curriculum has flourished into an eight-session-program for all the middle and high school health classes.

The program centers around healthy sexuality content; including consent, defining and discussing sexuality, identifying healthy sexuality, and brainstorming individual, relational and cultural influences on sexuality. Despite the confines of the classroom, the sessions are interactive, and are centered around discussions and activities for each day's topic.

Oftentimes this is the first formal discussion of sexuality outside of conversations with family, so our discussions are full of a myriad of thoughts, opinions, and awareness on this topic. This sometimes presents a challenge to balance the content while still allowing for discussion and healthy disagreement. Nevertheless, I have consistently been impressed with the teens' engagement and excitement for discussing these vital topics.

To measure the effectiveness of the program, we facilitated a twelve-question pre-test on the content of the program at the start of the first day, and administered an identical post-survey at the completion of the last day. The average score for all five of the classes improved between the pre-and post-test.

PROGRAM EFFECTIVENESS 12-Question Test



15% Improvement

The three high school classes improved their score by an average of 1.76 points, or an average 15%.



30% Improvement

The two middle school classes improved their score by 3.55 points, or an average of 30%.



9-Point Improvement

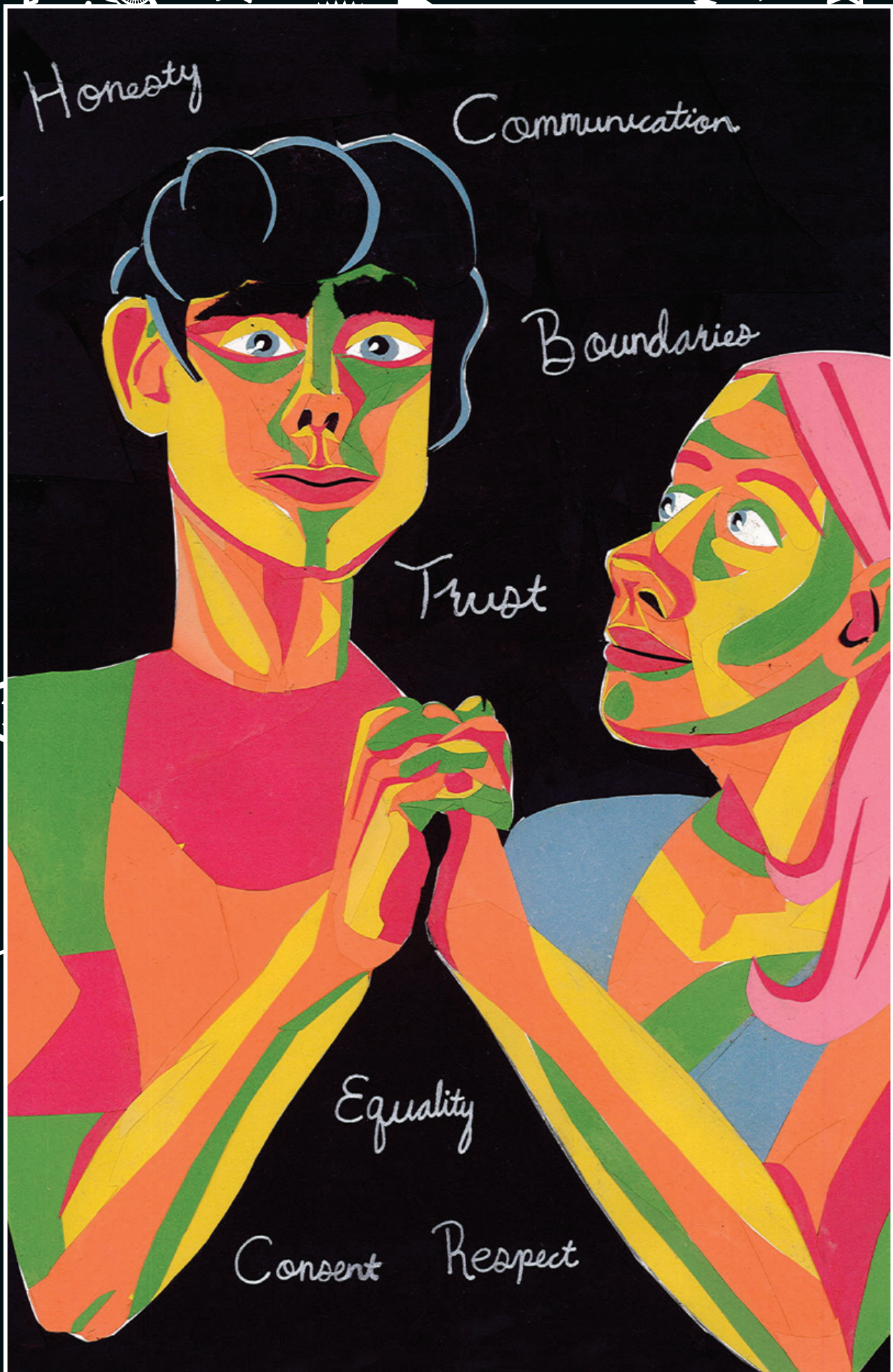
Out of all the classes, the largest improvement was a nine-point improvement, where a student scored a 0% on the pre-test, and scored a 75% on the post-test.



Post-test → Pre-test

All five classes had at least one student answer every question correctly on the post-test, whereas no student scored 100% on the pre-test.

The average score for all five of the classes improved between the pre-and post-test.



A poster handmade by a student illustrating what different characteristics they value in sexuality.

Oasis

Once a week I facilitate a prevention workshop at the Oasis Daylight Center, a free afterschool program ran through the Skagit YMCA. It is a weekly drop-in with an informal setup full of discussions and activities, allowing for flexibility depending on who attends the group each week. Many of the teens that spend time at the Oasis Daylight Center are from underrepresented identities in our community, so the discussions are drawn from their personal identities and experiences. Due to this, many of the lessons work on addressing the root cause of violence and shifting culture through identifying influences, norms, and stereotypes in our heteronormative culture that hinder people's ability to freely express their sexuality. Past discussions include focusing on the fluid nature of sexuality, educating one another on the different aspects of sexuality, and the intersectionality between sexuality and gender identity, sexual orientation, race, class etc.

One tool I have found extremely effective is the Sexualitree¹, an interactive tool to help us see how we experience sexuality in different ways. This tool has served as a great starting point for discussions on the root influences of an individual's sexuality. The teens have also created a Sexuality Jeopardy game and Sexuality BINGO, both of which I have used in other groups and lessons.

Juvenile Detention

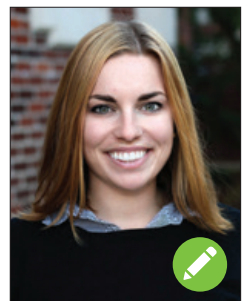
Bimonthly, I facilitate a one-hour program at the Skagit County Juvenile Detention Center. The program is centered on healthy sexuality, with a focus on addressing the root causes of violence and building skills. Due to the nature of the facility, I work to create an inviting atmosphere, where the participants can engage and ask questions with as little possible fear of discomfort or judgement. Because of that, most discussions are activity based, including Sexuality BINGO (developed by Oasis teens!), magazine exploration, and identifying media influences on sexuality through watching clips of music videos, movies, and shows.

There is an inherent power imbalance within the facility, so I allow the discussions to be teen led and peer driven, while the corrections officers and I are participants, not facilitators. Because of that, each day and discussion are different, and sometimes the content I want to cover never gets brought up-- but that's another day in the life of a preventionist!

¹ The Sexualitree and corresponding discussion guides can be found here: <http://sexualitree.org/>


Bio

Helena Schlegel is the Prevention and Education Coordinator for Skagit Domestic Violence and Sexual Assault Services. Prior to joining Skagit DVSAS, she has worked as a preventionist at a university, and has spent time in community organizing, politics, and energy and climate projects. She is passionate and energized to work with communities on issues of power, privilege, and equity; and believes the prevention of gender based violence begins with empowering our younger generations.



SEXUAL HEALTH PROMOTION IS Sexual Violence Prevention in Oregon

Megan Haggerty Foster
Oregon Attorney General’s Sexual Assault Task Force

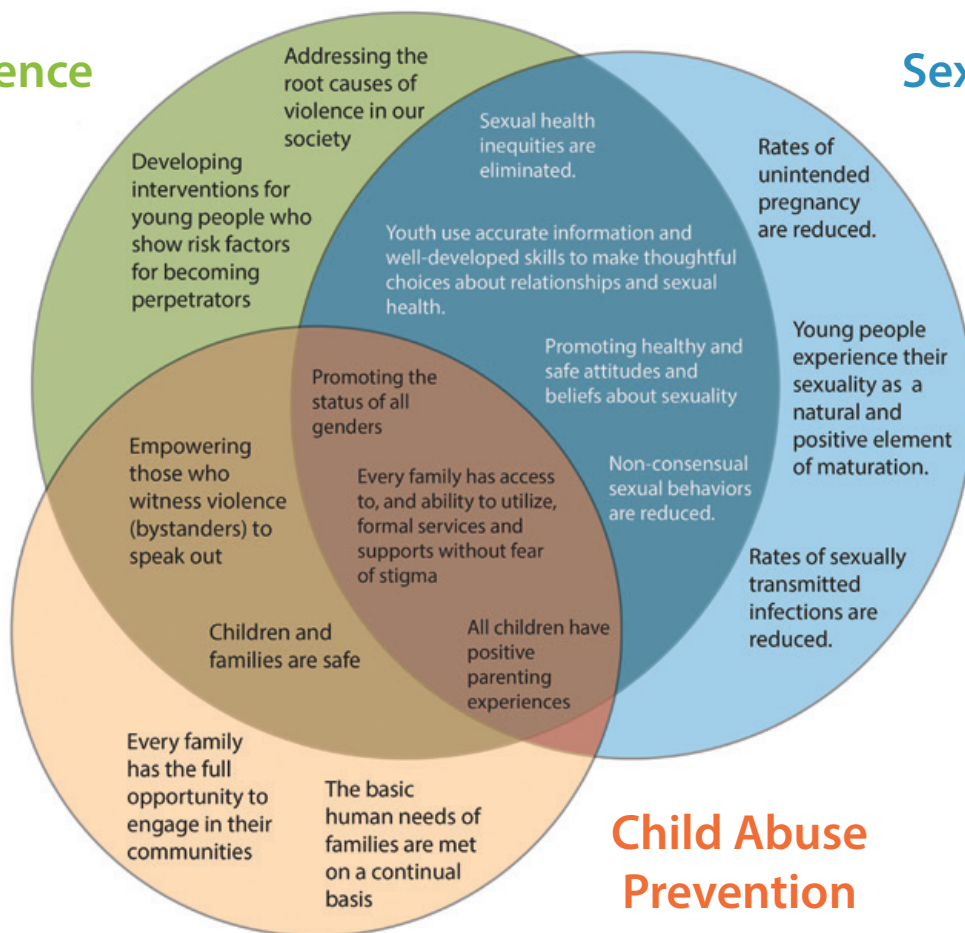
 ver the last several years, Oregon has focused its attention on aligning sexual health promotion and sexual violence prevention. We’ve done this through fostering multidisciplinary partnerships, promoting policies that reflect this alignment, highlighting the intersections of this work – specifically as it impacts Kindergarten-12th Grade education, and promoting skills development for all people.

The Oregon Attorney General’s Sexual Assault Task Force (SATF) is just one of the multidisciplinary partners contributing to and supporting this work throughout Oregon. We are a statewide nonprofit that provides training, technical assistance, and support for prevention efforts throughout our state.

Of Oregon’s most recent work, one of our starting places was looking at the ways in which our statewide efforts overlapped. We looked at Oregon state policies, including the Comprehensive Sexuality Education law 2009 (CSE), the Healthy Teen Relationship Act 2013 (HTRA), and Erin’s Law 2015 (Child Sex Abuse Prevention), and were able to highlight areas of convergence, and places where each sector could expand, learn from, and complement each other. This analysis helped us organize several key statewide efforts that helped us build momentum, including: Oregon’s first Statewide Summit on Sexual Health Promotion and Sexual Violence Prevention; an update to Oregon’s Health Education Standards and Performance Indicators¹ completed in 2016; and an ongoing Healthy Relationships Curricula Review² based on Oregon’s health education standards.

Sexual Violence Prevention

Sexual Health Promotion



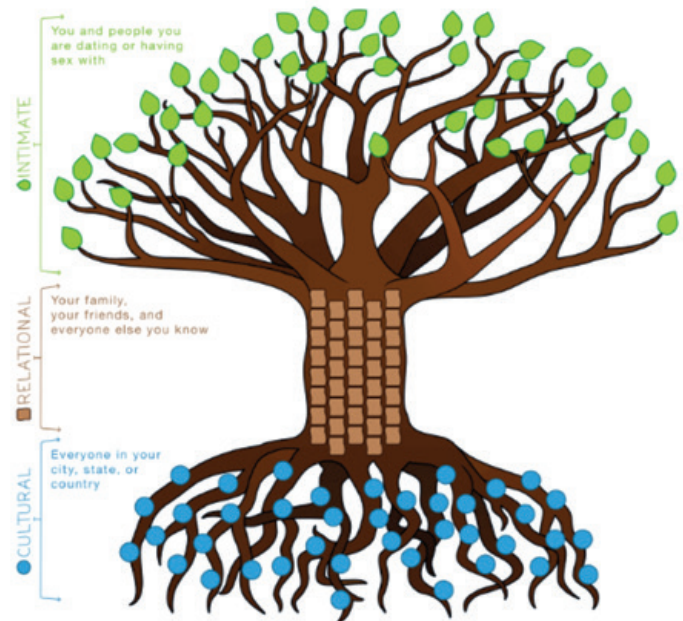
Skill-Building for Success

Critical to the implementation and follow-through of these efforts is fostering the skills to promote sexual health and prevent sexual violence. Health promotion is a critical part of our statewide violence prevention work, because it's not enough to tell people what not to do; we have to replace that with what we want them to do.

Knowing this, it is important to recognize that we're asking generations of people who were commonly taught to be uncomfortable talking about sex, sexuality, and sexual violence, to all of a sudden be comfortable talking about it. We're not only asking these folks to increase their comfort levels with these topics, we're asking each of us to talk about and understand sex, sexuality, and sexual violence using an anti-oppression framework and to support inclusivity and equity. For many of the folks in Oregon, this takes practice, ongoing learning, and expanding our own understandings of sex, sexuality, and sexual violence. For this reason, many of our trainings and alignment work incorporates skill building for practitioners.

One of the places that we often start is called The Sexualitree³ created by Karen Rayne – founder of 'UnHushed' and Sam Killerman of 'It's Pronounced Metrosexual'. We want to acknowledge that some of the materials found at 'It's Pronounced Metrosexual' have been marketed as theirs, without credit to the original creators. This is definitely a huge problem and should be a consideration whenever we utilize materials. We recognize that, if we are using tools that are meant to support inclusivity but erase the people who created them, we are often reinforcing the harmful norms we are working to dismantle. To the best of my knowledge at this time, The Sexualitree is not one of those pieces, but if someone knows more, we'd love to learn from you.

THE SEXUALITREE by **UNHUSHED** & **it's pronounced metrosexual**
The Sexualitree is a way to see how we experience sexuality in different ways. Sexuality affects us on different levels of our lives, and each person uniquely.



The Sexualitree is useful because it allows each of us to consider many (45 to be exact) of the components that may impact sexuality and how we learn about them, how they impact us, and how they inform us individually, in our definitions of healthy sexuality. When we start from this place, we're also starting by valuing autonomy, agency, and empowerment, instead of defining what is healthy for every person. This provides us many ways to practice improving our skills around promoting sexual health as critical to sexual violence prevention. Through this and similar activities, we can talk about what different words mean; how our answers, our understandings of sexuality usually change over time, as our culture changes, as our relationships change; and we are able to move towards practicing openness, honesty, and authenticity.

Practice Openness, Honesty, and Authenticity



Openness, honesty, and authenticity are such important skills when it comes to prevention; and because so many of us weren't taught to do this when it comes to sex, sexuality, and sexual violence, it is important that we practice these skills. We often talk about these three skills when having to answer the "tough" questions – the questions that usually don't seem to have a definitive answer.

One example is talking about substance use and sex. Many different responses to questions have come up during conversations about substance use and sex, including but not limited to; never drink and have sex, if you're too drunk to drive you're too drunk to have sex, and substances impair our abilities to both give and perceive the provision of consent. All of these answers are an important part of the larger conversation that we often miss when we limit ourselves to a simplified answer. How are we promoting skills to practice consent if we're not considering with openness, honesty, and authenticity, how sex may happen? What is the impact of our answers if we're not open, honest, and authentic? For example, what if we ourselves have had consensual sex after drinking?

Our goal is not that we are defining healthy sexuality for everyone else, but that we're fostering environments where people are successful in defining it for themselves. Asking questions like, "Why do people have sex?" is a great way to actually start practicing openness, honesty, and authenticity. One of the first answers seems to always be, "for pleasure." If that is an answer, how can we thoughtfully incorporate that into how we teach about and talk about sex?

Throughout the country and the world, we see really great examples of people aligning sexual health promotion and sexual violence prevention. There are a lot of national curricula that are evolving to better align sexual health promotion and sexual violence prevention. There are also a lot of phenomenal resources created by and for specific populations, like Take Charge⁴, a reproductive health guide for women with disabilities created by The Empowered Fe Fes, or the Women of Color Sexual Health Network's new sexuality curriculum called 'Communication MixTape: Speak On It Vol 1'⁵. The more tools we access, learn from, and support, especially those developed by and for specific populations, the easier it is to do this work.



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1 <http://oregonsatf.org/wp-content/uploads/2017/11/OR-Standards-Infographs.zip>

2 <http://oregonsatf.org/wp-content/uploads/2016/12/Curriculum-Review-Summary-Document-9.2017.pdf>

3 <http://sexualitree.org/>

4 <https://www.accessliving.org/1410ga304>

5 <http://www.wocshn.org/curriculum/>

6 <http://www.wcsap.org/designing-comprehensive-primary-prevention-strategy>

Practice in Oregon

One place we start in Oregon is considering how we are each meeting some of our key focuses of this work, including promoting:

- ▶ Access to comprehensive and medically accurate, age appropriate, information for all
- ▶ Information on health and gender equity
- ▶ Consent as pleasure focused and not fear-driven
- ▶ Language to talk about relationships and sex as both normal and pleasurable
- ▶ Recognition that not everyone experiences and expresses sexuality in the same way

This means we are constantly considering questions like the following:

- ▶ How can you model healthy boundaries, healthy relationships, and healthy communication in your work, whatever role you are in?
- ▶ How can you work to undo harmful norms and stereotypes?
- ▶ Do the materials you use incorporate health promotion?
- ▶ Are the materials comprehensive?
- ▶ Do you have materials that meet the needs of all members of your communities?
- ▶ How are you and your organizations talking about sex, sexuality, and sexual violence?
- ▶ Are you using language that promotes healthy norms?
- ▶ Are you providing resources and information to everyone who accesses your services, directly or indirectly?
- ▶ Are you present in your communities and your communities' events? Do you model any bystander intervention?
- ▶ Do you acknowledge when you have power, that others maybe don't have, and try to adjust accordingly?
- ▶ Are you modeling healthy behaviors? Modeling healthy relationships?
- ▶ Modeling an anti-oppression framework, including acknowledging when you say or do something that may be oppressive?

Sexual health promotion is sexual violence prevention, and sexual violence is preventable.

Everyone has a role and a responsibility in preventing it, but each of our roles may be different and they will probably change over time. What is your role today? What do you want your role to be in the future? How can we each practice our health promotion skills so we are better at preventing violence, and we can more effectively move this work forward? These are some of the questions we are still asking here in Oregon, and just like healthy sexuality, they have different and valuable answers for each and every one of us. This work looks different in each community, state, or territory. Many places have been doing creative and innovative work for a long time. Together we contribute to and make up a larger community of people working to align sexual health promotion and sexual violence prevention. We learn from practice. We learn from each other.



Bio

Megan Foster joined the Sexual Assault Task Force (SATF) team in 2015. Much of her work at SATF has focused on aligning sexual health promotion and sexual violence prevention efforts across the state. Meg has experience teaching violence prevention and healthy relationships classes in middle and high schools in Oregon. Prior to this, Meg spent two years in Rwanda as a community health and development associate for the United States Peace Corps. At the University of Oregon, she worked for an organization aimed at reducing the risk of sexual assault for students and staff, while she earned degrees in Public Policy, Planning and Management as well as Journalism and Communications.



Exploring the Connections Between Sexual Violence & Oppression

Use these questions to explore the connections between sexual violence and oppression with staff, volunteers, or board members. Try discussing one or more at a staff meeting, in-service, volunteer training, or board retreat. They may also be helpful when developing or redesigning prevention programming.

Attitudes and values about sex and sexuality are shaped by many things: friends, family, culture, community, pop-culture, etc. How can we encourage people to explore and examine sexuality norms and also honor cultural and community values?

Some messages and understanding of sex and sexuality may be very heteronormative. What language, key concepts, and examples can we use – and which should we avoid -- in our work to be more inclusive of those that are in non-heterosexual relationships?

Sexual identity and experiences intersect with race, disability, gender, and other forms of identity. Yet sometimes social messages aren't reflective of the diversity of representation. In what ways in your work can you be affirming of multiple identities and also recognize the lack of equity and access to resources that exist?

PREVENTION RESOURCES



WCSAP members have access to check out our library materials through the mail. Questions can be directed to library@wcsap.org.

WCSAP Resource Collection

<http://www.wcsap.org/prevention-resource-collection-healthy-sexuality>

Several healthy sexuality and sexual health resources that WCSAP has developed over the years. These resources share Washington State's Healthy Youth Act, various curricula and tools, guidance on sexual development, and much more.

FLASH Curriculum

<http://www.kingcounty.gov/depts/health/locations/family-planning/education/FLASH.aspx>

FLASH is a widely used comprehensive sexual health education curriculum developed by Public Health – Seattle & King County and designed to prevent teen pregnancy, STDs, and sexual violence. FLASH is available for elementary, middle, high school and special education classrooms.

Communication MixTape: Speak On It, Vol 1.

<http://www.wocshn.org/curriculum/>

Using gender-neutral language, avoiding ableist language and activities, centering bodies of color, and focusing on pleasure for bodies of color are some ways this curriculum is a radical addition to the sexuality education curricula available.

Healthy Sexuality for Sexual Violence Prevention: A Report on Promising Curriculum-Based Approaches

<https://tinyurl.com/yaj3kw6d>

The Virginia Sexual & Domestic Violence Action Alliance's distillation of and report on the top curriculum-based healthy sexuality programs.



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