



Oakland Unified School District

Located in Alameda County, California, the Oakland Unified School District (OUSD) serves almost 37,000 K-12 students in 87 schools. Over 2,300 teachers work with a diverse student body that is 41.8% Latinx, 25.4% African American, 14.1% Asian, 11.4% White, 4.0% multiracial, and .5% Native American.¹ OUSD's Health and Wellness Unit within the Department of Community Schools and Student Services coordinates sexual health education (SHE). OUSD identified 20 priority schools to serve with CDC DASH funding, but has been able to support all of its 34 high and middle schools to implement sexual health education.

“I love the curriculum. The activities are similar to what we do in English. For example, when we read the scenarios, there is analysis, discussion and critical thinking. Students have to come to their own conclusions and defend their point of view. This is what we do when we read a novel.”

OUSD 9TH GRADE
ENGLISH TEACHER



In March 2018, Healthy Teen Network conducted face-to-face interviews with OUSD high school and middle school teachers, health education leaders, and Department of Community Schools and Student Services staff to learn about how the District has used CDC DASH funding to advance and strengthen their implementation of sexual health education.

OUSD's Foundation for Implementing Sexual Health Education

With strong state laws pertaining to sexual health education, OUSD has found it relatively easy to secure support from administrators and teachers for sexual health education. At the start of the project, the California Education Code included a wide range of requirements for sexual health education, including topics that should be covered and instructor training that should be delivered. In 2015, the California Healthy Youth Act was signed into law which updated and strengthened the previous Education Code.² This legislation mandates that all California students in grades 7-12 receive comprehensive sexual health education and HIV prevention education. This instruction must be developmentally appropriate, medically accurate, and inclusive of all races, genders, sexual orientations, and ethnic and cultural backgrounds, students with disabilities, and English learners. Instruction must include education on human development and sexuality, pregnancy, contraception, sexually transmitted infections, HIV, healthy relationships that are free from violence and coercion, communication skills, healthy decision-making skills and other topics. In addition, teachers who implement sexual health education must receive training.

Previous Sexual Health Education Experiences. Prior to CDC DASH funding, OUSD schools invited community-based organizations to teach sexual health education to students.

Topics and quality varied, and not all students received this education. Some students received an evidence-based curriculum, but it did not cover foundational topics such as anatomy and puberty. OUSD's observations of implementation revealed that the content was not well matched to the developmental stage of the students, and that the content was not implemented consistently—not surprising in light of the lack of training offered to teachers. From this experience, OUSD learned about the need to design developmentally appropriate lessons and support teachers in achieving mastery of the curriculum's content and pedagogical methods.

CDC DASH funding has allowed OUSD to build on previous experiences, enact the requirements of the California Healthy Youth Act, create a standardized, high quality, and evidence-informed curriculum, deliver comprehensive teacher training, and establish a system for institutionalizing sexual health education.

What strategies helped OUSD implement high quality sexual health education?

Strategy 01.

Develop a comprehensive sexual health curriculum for OUSD middle and high school students.

Development of the Curriculum. After reviewing dozens of evidence-based and evidence-informed sexual health curricula, and not finding one that met all the needs of OUSD

students, the Program Manager for SHE and her team decided to develop a customized curricula for middle and high school students called Healthy Oakland Teens. With guidance from OUSD's curricula review team, they used the National Sexuality Education Standards³, Health Education Curriculum Analysis Tool (HECAT)⁴, student focus group data, and discussions with teachers, to develop knowledge and skills-based learning objectives, prioritize content, and design interactive activities for its curriculum.

Ultimately, the team developed five 6th grade lessons, ten 7th grade lessons, and ten 9th grade lessons. The 50-minute scripted lessons build upon each other and are highly interactive. The curriculum covers a comprehensive array of sexual health topics including puberty, reproductive anatomy and physiology, healthy relationships, sexual consent, communication, contraception, prevention of sexually transmitted infections, gender identity, and sexual orientation.

OUSD considers the Healthy Oakland Teens curriculum to be a living document. Throughout the implementation process, teachers have provided feedback to the SHE Program Manager, who has incorporated it into the curriculum. As a result the curriculum has become stronger and teachers feel invested in its implementation.

Finding a Home for the Healthy Oakland Teens Curriculum.

Given that most OUSD schools do not have health education classes, the Department of Community Schools and Student Services sought to integrate the curriculum into science classes. The District's Science Department Manager welcomed the idea, but could dedicate only five classes to sexual health for 9th grade. The District then turned to the English Language Arts (ELA) Department Manager for class time. In the end, Healthy Oakland Teens was divided between the two subjects.

The curriculum is offered at both the middle school and high school level. Students in sixth grade receive five lessons in science class, 7th grade students receive ten lessons in science, and 9th grade students receive five lessons in science and five lessons in English class. The topics covered in science are those that lend themselves to science-based discussion such as sexual risk behavior, contraceptive methods, and sexually transmitted infections. The other five lessons reinforce core skills learned in English class such as critical analysis and values clarification (e.g., healthy relationships, legal rights and gender identity).

Teachers like the Healthy Oakland Teens Curriculum.

Teachers appreciate the scripted, easy-to-follow instruction, the emphasis on establishing a comfortable and safe learning environment, relative ease in integrating lessons into their existing curriculum, and guidance for using an anonymous question box. OUSD has received very little, if any, resistance from schools or parents. Very few parents have chosen to

Student Impact



Improved student-teacher relationships

Teachers told us repeatedly that their relationships with students play a key role in implementing Healthy Oakland Teens effectively. One teacher said: “Students want to know that they can trust us and that they won’t be judged. They want to know you are being real.” Teachers like the emphasis that the Healthy Oakland Teens curriculum puts on creating a safe and comfortable environment through the posting of ground rules during each session, the anonymous question box, and tips for dealing with disruptive students. They believe these techniques have helped to strengthen student-teacher relationships. Moreover, teachers share that the quality of student-teacher relationships developed during the facilitation of Healthy Oakland Teens has had an overall positive impact on the classroom and student engagement in general.

“The support we get from [name of Health Education Leader] and the District is great. She responds right away and gives us what we need. I don’t think we could do this work without their support.”

OUSD HEALTH EDUCATION LEADER



opt-out their children. Rather, teachers, students, parents, and community partners have welcomed the opportunity to implement quality sexual health programming—especially with the support and materials made possible by CDC DASH funding.

Teachers noted a few challenges but have been able to identify ways of overcoming them. For example, some

“Before we start the curriculum, we will have already taught about other body systems. So it doesn’t feel like an interruption when we start talking about reproductive health. It flows.”

OUSD 6th Grade Science Teacher

activities can take more than the allotted time especially when there are a lot of student questions. Most teachers we interviewed shared that they use additional class time to complete their five assigned classes. They are willing to do so because of student engagement and interest in the activities. Another challenge is working with newcomer students who are just beginning to learn English. In some schools, there are bilingual teachers who can facilitate the lessons. The student workbook has been translated into Spanish but other language translations are still needed. Some of the curriculum’s concepts and reading materials can be dense

for students with cognitive or other learning disabilities. In addition, some of the curriculum topics have triggered strong emotions in students with histories of trauma. Special education teachers are working on adapting these aspects of the curriculum for their students.

Strategy 02.

Staff high schools with a Health Education Leader.

Each high school is staffed with a Health Education Leader who may be a teacher or student counselor. The Health Education Leader receives a stipend to manage multiple tasks that support the implementation of Healthy Oakland Teens at their school. These tasks include:

- Ensuring that all ten Healthy Oakland Teens lessons are taught to all 9th graders through science and English classes.
- Ensuring that all new English and science teachers receive curriculum training.
- Obtaining from the District and distributing all the materials that teachers will need to implement lessons effectively (i.e., curriculum manual, safer sex kit, and student workbooks).
- Providing technical support to teachers, as well as mentoring to new teachers (e.g., debriefing after lessons, helping teacher with answering questions from the anonymous question box, troubleshooting classroom management issues) when needed.
- Attending two planning meetings at the District to receive updates on the project, review their roles, obtain curriculum materials, and problem solve as needed.
- Explaining to science and English teachers how Healthy Oakland Teens lessons fit with their existing curricula.
- Communicating with the school’s Referral Coordinator (e.g., mental health services, sexual and reproductive health services, etc.) and other school service providers, as needed.

“Sex Ed Week creates a buzz. I wear my Sex Ed Week t-shirt and try to get people excited! It’s predictable. I think having this dedicated week helps us to better focus on what we need to do.”

OUSD HEALTH EDUCATION LEADER



Strategy 03.

Schedule a dedicated time for implementing sexual health education.

Rather than implementing Healthy Oakland Teens lessons throughout the year, OUSD schedules a dedicated time for implementation called “Sex Ed Week.” Sex Ed Week usually occurs in February for middle school students and right before Thanksgiving break for high school students.

OUSD reports being able to organize, coordinate, communicate, create excitement about, and manage logistics more effectively when there is a concentrated period of time for curriculum implementation. The SHE Program Manager first focuses on high school implementation. In September, they send a letter signed by the Deputy Superintendent to high school principals about Sex Ed Week. In October, with support from their principals, teachers attend the curriculum training or refresher training—just a few weeks before they will implement the curriculum. The training is still fresh when teachers implement the curriculum the following month. Monitoring activities (described below) are also scheduled and conducted at the same time.

Strategy 04.

Ensure that all teachers assigned to implementing Healthy Oakland Teens receive professional development and curriculum materials.

Curriculum Training. The Program Manager for SHE, along with the consultant curriculum developer and consultant trainer, have developed a comprehensive set of professional development activities for SHE teachers, offering separate

trainings for 6th, 7th, and 9th grade teachers. They offer an option to attend a full one-day training or two evening trainings. Teachers who attend the full day training are provided compensation for a substitute teacher, and those choosing to attend in the evening are compensated directly for their time. OUSD has found that the full day training appeals to more experienced teachers who feel comfortable leaving their classroom for a day, while the evening training appeals to newer, younger teachers who prefer the extra compensation.

The training is aimed at building skills, comfort and enthusiasm for teaching about sexual health, as well as reviewing content and facilitation tips. Teachers receive a briefing on the California Healthy Youth Act requirements, a detailed overview of lessons, and guidance on how to create a safe and comfortable learning environment in the classroom. Trainers also model selected curriculum activities (e.g., condom demonstration) and provide opportunities for teacher practice. In addition, trainers have developed and implemented adult versions of some of the curriculum activities to help teachers better empathize with students. Time for discussion and peer-to-peer support related to teachers’ comfort is integrated into the training.

The training also aims to build support for sexual health education by sharing findings of student outcomes from pre- and post-data (described below). The data show how student knowledge, attitudes, skills, and comfort in communicating about sexual health topics increase after participating in Healthy Oakland Teens. This presentation has been effective at gaining teacher support—even among teachers who walk into the training with little enthusiasm for the topic.

Refresher Training. A refresher training, informed by teacher feedback collected through an online survey (described below), is also offered each year.

Student Impact

Value added to other subjects.

English teachers talked about how lessons addressing gender, consent, and healthy relationships add richness to their discussions about other reading assignments. For example, one teacher assigned a novel that includes a storyline about a woman being sexually assaulted. The discussions from the Healthy Oakland Teens lessons gave students a more sophisticated ability to analyze the relationship described in the story. Other teachers talked about being inspired by the effectiveness of the interactive teaching methods used in the curriculum and adapting them to use with their subject matter. The guidance on classroom management has helped some teachers improve upon their skills to deal with disruptive student behavior in general.

Student enthusiasm and openness.

Teachers shared that students enthusiastically anticipate Sex Ed Week, get to class on time, are engaged, and are more open during sexual health education classes. They also report increased attendance in their classes during this week, because ‘no one wants to miss Sex Ed Week’. Several teachers talked about students who came out during class about their gender identity and sexual orientation, and others who are more open in talking about their personal relationships.

Support from the Health Education Leaders. As described above, Health Education Leaders are available at each high school to provide teachers with support in implementing the curriculum, materials, referrals, and monitoring. In some cases, when a teacher has a challenge in teaching a particular lesson, Health Education Leaders have made themselves available to co-teach a lesson.

Support from the SHE Program Manager. The Program Manager of SHE visits teachers to let them know that she is also available for support. She conducts class observations and provides coaching on ways to engage students and deliver lessons with fidelity. She is currently working on developing a more formal rubric to provide feedback to teachers on their performance and training other district staff and partners to conduct observations.

Easily Accessible Resources. All teachers are provided with hard copies and electronic copies of the curriculum and workbooks for each of their students, and a safer sex kit that includes condoms, condom demonstration model, and contraceptive samples. A dedicated webpage has been created where teachers can download the curriculum, PowerPoint slides that accompany some activities, videos, training documents, and other materials. Teachers repeatedly shared how much they appreciate having all materials needed to facilitate the lessons so easily accessible.

Strategy 05.

Monitor Student Outcomes and Implementation.

Student Impact. OUSD implements an anonymous pre- and post-test to assess the impact Healthy Oakland Teens has had on student knowledge, skills, and attitudes. Time for administering the pre- and post-tests is included in the first and last lesson plans. Students complete the survey online using tablets.

Assessment findings have been overwhelmingly positive. For example, in 6th grade, statistically significant gains were found in: 1) all six knowledge items, 2) comfort in talking with adults about sexual orientation, and 3) acceptance of being gay, lesbian, bisexual, or transgender. Examples of statistically significant changes in 7th grade were: 1) increased knowledge about methods to reduce sexually transmitted infections (STIs) and where to get free condoms, 2) increased likelihood of using a condom if sexually active, and 3) increased comfort in talking about multiple sexual health topics. In 9th grade, examples of statistically significant changes were found in almost all knowledge items and level of comfort in discussing multiple sexual health topics. OUSD plans to compare this student data to data from the Youth Risk Behavior Survey and California Healthy Kids Survey⁵, a statewide survey that examines the relationship between student health behavior and academic outcomes.

“Some teachers are really nervous to teach about sexual health. One new teacher told me that she has never learned about sexuality and now she is expected to teach it. She didn’t know where to start. They worry about how they are going to respond to student questions and how to deal with students who act out or make homophobic remarks. They are not sure how to handle it. Some teachers worry about what they are supposed to say if the students ask them personal questions. The training really helped. I also hold debriefing sessions with them and help them process their feelings and troubleshoot.”

OUSD Health Education Leader



Teacher Experience and Curriculum Implementation. In addition to examining the impact on students, OUSD also looks for ways to improve implementation through teacher discussions, an online survey, and lesson observations. Teachers are asked to complete an online survey after Sex Ed Week. The survey asks for their feedback on the curriculum, implementation challenges, and professional development needs. Teachers are provided with a small incentive to complete the survey. The data collected from this survey help to inform the agenda of future refresher trainings. To complement this survey, the Program Manager for SHE visits classrooms to observe teacher facilitation and student engagement. She uses this opportunity to support teachers with their implementation of the curriculum.

Strategy 06.

Nurture relationships.

The SHE program manager places a high priority on relationship building. She communicates regularly with health education leaders, teachers and administrators at middle and high schools, as well as her district-level colleagues. She also leverages her colleagues’ relationships with other stakeholders in the District to maintain support for Healthy Oakland Teens implementation.

Establishing a School Health Advisory Council (SHAC) comprised of District-level curriculum specialists, teachers, parents, and community partners has also helped in cultivating relationships and support for Healthy Oakland Teens through SHAC members and their networks. For example, parents have increasingly become more involved with sexual health education by raising money for supplies. Several SHAC members have offered to support the Program Manager for SHE with lesson observations. Staff from

OUSD’s school-based health centers teach or co-teach the curriculum’s lesson about accessing sexual and reproductive health services, and teach youth how to use OUSD’s app for identifying youth-friendly clinics. National Sexuality Education Standards.



References and Resources

1. For more information about Oakland Unified School District, see: https://drive.google.com/file/d/18vKVTDdbTxKOTlnQGSZmlTiyuNI-1Am_R/view
2. CA Healthy Youth Act: https://leginfo.ca.gov/faces/billNavClient.xhtml?bill_id=201520160AB329
3. National Sexuality Education Standards: <http://www.futureofsexed.org/nationalstandards.html>
4. Health Education Curriculum Analysis Tool: <https://www.cdc.gov/healthyyouth/hecat/>
5. For more information about the Healthy California Kids Survey, see: <http://chks.wested.org/>

The Upshot

Oakland Unified Public Schools improved sexual health education by taking these key actions:



Developing a comprehensive, scripted, easy-to-follow curriculum, student workbook and safer sex kit.



Providing guidance on how to establish a comfortable and safe learning environment, how to develop trusting relationships with students, and how to manage disruptive student behavior.



Providing everything the teacher needs to implement the curriculum in hard and electronic copies.



Promoting the California Healthy Youth Act and sharing student outcomes data to build support for Healthy Oakland Teens.



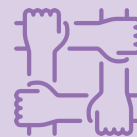
Actively soliciting teacher feedback on the curriculum and incorporating it into the curriculum and teacher training.



Staffing high schools with Health Education Leaders that coordinate logistics, support teachers, and promote curriculum training.



Providing a comprehensive curriculum training and offering it during the day and evening.



Identifying and building relationships on the District level, individual school level, and community through ongoing communication, follow-through on requests, and sharing of resources.



Healthy Teen Network

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