

# WISE IN GA:

## WORKING TO INSTITUTIONALIZE SEX EDUCATION IN GEORGIA

### CASE STUDIES:

UNDERSTANDING THE PROCESS  
OF INSTITUTIONALIZING SEX  
EDUCATION IN GA



*Submitted to:*

The Georgia Campaign for Adolescent  
Pregnancy Prevention, Inc.

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# TABLE OF CONTENTS

		PAGE NO.
	<i>Overview of Approach to Case Studies</i>	3
	<i>Summary of the key strategies and core objectives</i>	4
1.0	The Rome City School System Case Study	5
2.0	The Bartow County School System Case Study	9
3.0	The Clarke County School System Case Study	12

# OVERVIEW OF APPROACH TO CASE STUDIES

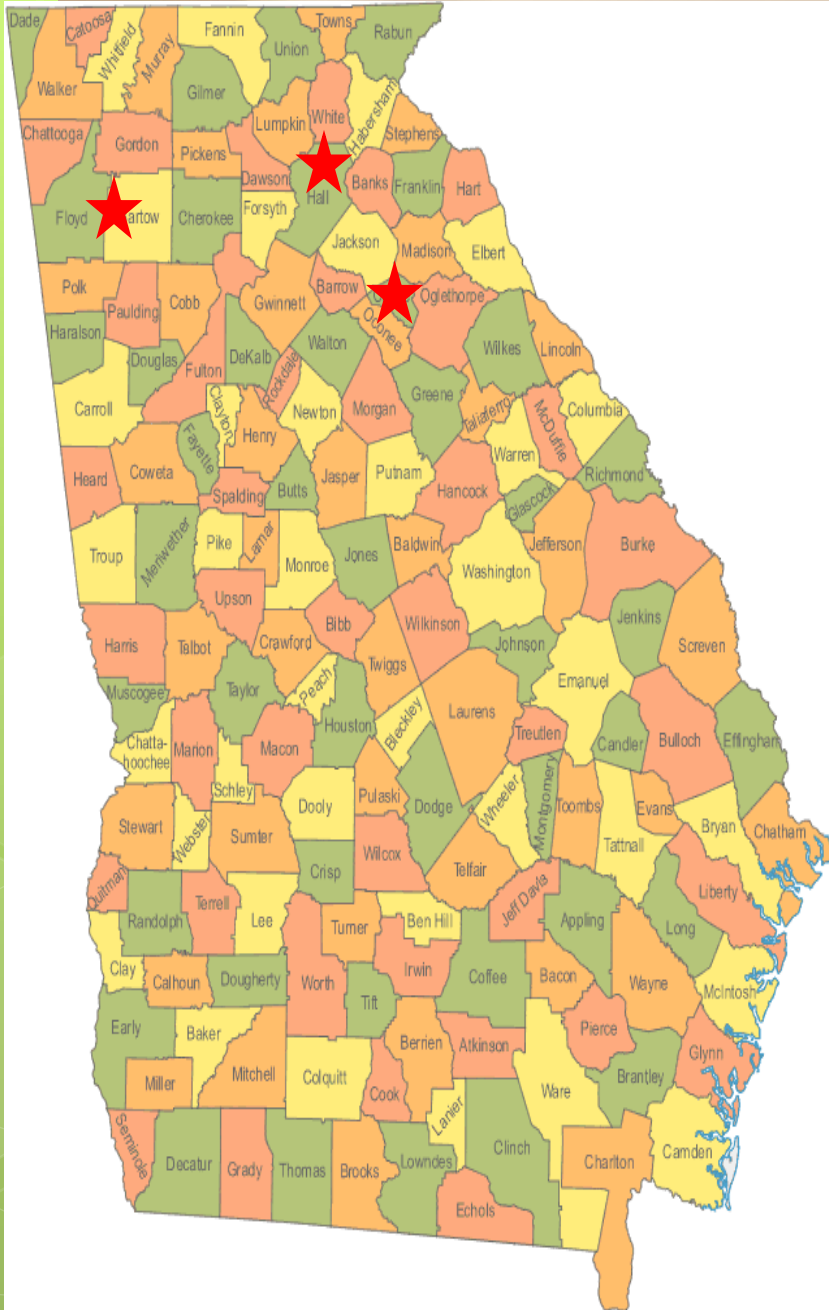
This report summarizes the three (3) case studies underway to document the process of mobilizing communities around selecting, implementing, and institutionalizing comprehensive sex education (CSE) in Georgia. As this is a project grounded in advocacy and capacity building, process monitoring and participant observation served as the primary data collection methods for learning how communities mobilize around comprehensive sex education. Over a two-year period, Messages of Empowerment Productions, LLC, in collaboration with The Georgia Campaign for Adolescent Pregnancy Prevention, generated some 30 different sets of process notes from WISE 1.0 convenings.

These cases studies highlight G-CAPP's work to institutionalize sex education in Georgia" by pursuing four (4) strategies and seven (7) objectives (see next page for a quick review of the strategies and objectives). The strategies for the case studies primarily are grounded in strategy one (1) of community mobilization. However, the goal of community mobilization is to get communities towards move on curriculum selection and implementation.

For organizational purposes, the three (3) case studies have been summarized into core themes that provide an overview of the main strategies, lessons learned, key accomplishments, and work that needs to continue in order to effectively implement and institutionalize CSE in key counties disproportionately impacted by teen pregnancy in the state of Georgia. As these case studies represent work in progress, each ends with a theme that highlights the work to be pursued in WISE 2.0 if funding is secured.

# SUMMARY OF THE KEY STRATEGIES AND CORE OBJECTIVES

4 KEY INITIATIVE STRATEGIES	CORE OBJECTIVES
<p><b>1) Community Mobilization</b></p>	<p><b>OBJECTIVE 1:</b> Increased knowledge, and support of CSE among parents, youth serving professionals, community members, school board members, sex education curriculum committee members</p>
<p><b>2) Strategy Development and Curriculum Selection</b></p>	<p><b>OBJECTIVE 2:</b> Increase school districts' ability to develop an effective strategy to implement CSE curriculum</p> <p><b>OBJECTIVE 3:</b> Increase school district/sex education committees' ability to select sex education curriculum</p>
<p><b>3) Teacher Training and Implementation</b></p>	<p><b>OBJECTIVE 4:</b> Increase knowledge, attitude and skills of teachers to implement sex education curriculum</p> <p><b>OBJECTIVE 5:</b> Implement CSE in 18 elementary, 7 middle and 4 high schools</p>
<p><b>4) Evaluation and Dissemination Plans</b></p>	<p><b>OBJECTIVE 6:</b> Increase knowledge, awareness, skills and public will to sustain effort in Georgia</p> <p><b>OBJECTIVE 7:</b> Increase knowledge and awareness of WISE initiative, lessons learned to field of sexuality, teen pregnancy, education</p>



# 1.0

## **THE ROME CITY SCHOOL SYSTEM CASE STUDY**

## **DOMINANT THEME FOR THE ROME CITY SCHOOL DISTRICT CASE STUDY:**

### **ESTABLISHING AND BUILDING UPON BROAD-BASED SUPPORT FOR EVIDENCE-BASED SEX EDUCATION**

#### **1. Building upon previous efforts to mobilize key champions around implementing evidence-based sex education**

The Rome City Teen Pregnancy Prevention Task Force (TPPTF) was formed around 2007 as part of a Kellogg Foundation-funded initiative known as “Taking Time for Teens.” Through this Initiative, G-CAPP assisted Rome City’s (TPPTF) in developing a strategy for exploring best-practices in selecting age-appropriate evidence-based sex education curricula. After the Taking Time for Teens Initiative ended, there was ample momentum and interest to further pursue opportunities to actually implement and ultimately institutionalize sex education in Rome City Schools.

#### **2. TPPTF comprised of advocates with “skills” and “will” to advocate for evidence-based sex education**

Key community partners who had been trained in selecting age-appropriate evidence-based curricula indicated high levels of confidence in their ability and willingness to advocate for what works as it relates to selecting and implementing evidence-based sex education curricula. In addition, the key partners indicated an increased in their knowledge of the theory behind why evidence-based curricula worked, as well as the conditions that lead to greater fidelity among teachers involved in implementation.

#### **3. Building upon strong foundation of diverse youth-serving professionals by integrating high-ranking school officials into the TPPTF**

The lead key champion developed and pursued a strategy to include buy-in from school officials with decision-making power, and influence at multiple levels of implementation.

## **DOMINANT THEME FOR THE ROME CITY SCHOOL DISTRICT CASE STUDY:**

### **ESTABLISHING AND BUILDING UPON BROAD-BASED SUPPORT FOR EVIDENCE-BASED SEX EDUCATION**

#### **4. High-ranking school officials presented as “open to change”**

The school superintendent appointed an assistant superintendent to attend the TPPTF. After about six months of engagement in the process of learning about evidence-based sex education, the assistant superintendent moved from “complying” with the request from the superintendent to “committing” to the process of selecting and implementing evidence-based sex education.

#### **5. Lead champion remained proactive and assertive at every phase of building community support for evidence-based sex education**

The lead champion was very instrumental in following up to address all barriers and concerns that could possibly derail efforts and gains to date towards implementing and institutionalizing evidence-based sex education. Specifically, her strategy was to meet with key school-level administrators and engage them in “open” and “honest” discussions about their concerns with selecting and implementing evidence-based sex education curricula.

## **DOMINANT THEME FOR THE ROME CITY SCHOOL DISTRICT CASE STUDY:**

### **ESTABLISHING AND BUILDING UPON BROAD-BASED SUPPORT FOR EVIDENCE-BASED SEX EDUCATION**

#### **6. TPPTF empowered school administrators to lead the conversation for engaging health education teachers and sex education committee.**

School administrators were in a better position than others on the TPPTF to use their points of influence to convene and engage health education teachers in discussions about implementing evidence-based sex education curricula. In addition, the school administrators took the lead in bringing the new curriculum director into the process of reviewing relevant and appropriate evidence-based sex education curricula. The new curriculum director was instrumental in working with the school district's sex education committee to gain buy-in. Moreover, the sex education committee consisted of a diverse mix of new and existing members, including youth and parental representation.

#### **7. Implemented a parental survey.**

A parental survey was administered as a way to formally document parental support for evidence-based CSE.

#### **8. Curriculum selection achieved**

Based on the themes and strategies discussed, Rome City Schools in collaboration with the TPPTF, selected Reducing the Risks for 9<sup>th</sup> graders and the FLASH curriculum for middle schools. Implementation strategies currently are in the planning stages.

#### **9 WISE in GA WAVE 2 focus: Must revisit the school-level “buy-in phase”**

The key champions will need to re-engage school-level implementers due to changes in personnel at the principal and counselor levels at several schools that had committed to implementation during the 2011-12 school year.





# 2.0

## **THE BARTOW COUNTY SCHOOL SYSTEM CASE STUDY**

## **DOMINANT THEME FOR THE BARTOW COUNTY SCHOOL DISTRICT CASE STUDY:**

### **THE BEST LAID MOBILIZATION PLANS MUST BE MATCHED WITH BEST PRACTICES IN PARTNERSHIPS**

*“Bartow was very different. We started the same way with educating our partners. We had a task force that had been in existence since 1995...We met with the school system and it was like, ‘We already met with Choosing the Best we’re going to stick with that.’ We were like ‘where do we go from here?’ ”*

#### **1. Bartow County School System has long-standing contract with developers of “Choosing the Best - an abstinence only curriculum**

Bartow County teen pregnancy prevention task force is organized through the local Family Connection, and has been in place since 1995. However up until the WISE in GA Initiative, the task force had made little progress towards replacing the abstinence only curriculum (Choosing the Best) with a science-based sex education curriculum.

#### **2. Missing key alliances and champions**

The Bartow County Teen Pregnancy Prevention Task Force lacked representation from two key groups: (1) the faith community, and (2) school board officials/administrators.

#### **3. No success in engaging “authentic voices” to explain why abstinence-only curricula are not effective.**

A member of the youth counsel attempted to represent the view from 9<sup>th</sup> graders that abstinence-only approaches are not effective. In addition, a school social worker who has direct experience in working with girls at greater risk for pregnancy, as well as parenting teens, tried to approach key school officials. However, she was not successful.

## **DOMINANT THEME FOR THE BARTOW COUNTY SCHOOL DISTRICT CASE STUDY:**

### **THE BEST LAID MOBILIZATION PLANS MUST BE MATCHED WITH BEST PRACTICES IN PARTNERSHIPS**

#### **4. A political window of opportunity**

During the first wave of WISE in GA, the Bartow County School Superintendent who had presented as a barrier to evidence-based sex education became the state of Georgia school superintendent. At the same time, the assistant superintendent for the state of Georgia is a champion for evidence-based curriculum, and was formerly of Rome City Schools prior to his state-level appointment. Thus, the Bartow County task force has an opportunity to gain support at the state level if the assistant superintendent continues to support evidence-based sex education.

#### **5. Redefining who represents the “community” as a first step in addressing community readiness for embracing evidence-based sexual health curriculum**

The key champions for Bartow County began working from the “inside out” in terms of first changing the attitudes among long-standing members of the task force to be open to evidence-based sex education.

#### **6. Broadened the approach to community mobilization**

The task force conceptualized a process by which to broaden its support among four (4) additional groups that have influence and interest in pursuing evidence-based sex education. These groups include: (1) concerned parents with at least one child at the middle school level, (2) more practical and progressive pastors who could reach out to the faith community, (3) representatives from the business sector, and (4) teachers who work within the school system.

#### **7. WISE in GA WAVE 2 focus: Building better broad-based support for evidence-based sex education**

The key champions will continue to establish and build upon the increased broad-based support for evidence-based sex education.



# 3.0

## **THE CLARKE COUNTY SCHOOL SYSTEM CASE STUDY**

## **DOMINANT THEME FOR THE CLARKE COUNTY SCHOOL DISTRICT CASE STUDY:**

### **MOVING THE NEEDLE FROM IMPLEMENTATION TO INSTITUTIONALIZATION**

#### **1. Efforts to locate the ideal place for institutionalizing implementation**

Clarke County was already working in the schools and viewed the WISE in GA grant opportunity as a way to gain support and buy-in from a broader base of partners. As such, key champions leveraged this initiative to explore ways to integrate evidence-based sex education into the 9<sup>th</sup> grade health class as a first step towards institutionalization. The biggest barrier associated with this strategy is that some students may opt out of a health class in the 9<sup>th</sup> grade, thus they would miss comprehensive sex education.

#### **2. Public health providing support, but still some limitations**

Clarke County made great strides in terms of building upon a strong and long-standing partnership between the district public health and the school system. In this regards, the public health educators were able to teach sex education to the upper-grades and in subjects other than health. However, key champions understand that this is not a long-term solution due to staffing and scheduling issues that make it difficult to use this model as a basis for institutionalization. Specifically, there is one full-time public health educator assigned to all of Clarke County schools.

#### **3. Continued lack of capacity among teachers to effectively institutionalize sex education**

Key champions used G-CAPP's training and technical assistance to train teachers in comprehensive sex education. However, when it came time to actually implement, teachers confided that they were not as comfortable at the point of implementation as they felt they needed to be for a project of this nature.

**DOMINANT THEME FOR THE CLARKE COUNTY SCHOOL DISTRICT CASE STUDY:****MOVING THE NEEDLE FROM IMPLEMENTATION TO INSTITUTIONALIZATION****4. Middle school remains “in the middle” as it relates to implementation**

In Clarke County, implementing sex education in middle schools presented as a school by school strategy.

Moreover, implementation is even more difficult as teachers are empowered to determine whether or not they can fit sex education into their overall lesson

**5. WISE in GA WAVE 2 Focus: Need more formal protocols and implementation planning to implement with fidelity**

The Clarke County key champions are working on solidifying more detailed protocols on how, when, and what to implement over the course of a semester or a school year to be sure that all the core lessons are implemented. The team is also working on issues of more accountability for consistent and correct implementation among teachers.



For more information about GCAPP's

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