Introduction

uVoice, a youth philanthropy board facilitated by Community Youth Concepts, consists of a group of twelve students who live in the Des Moines metro area. Bimonthly, these students come together to identify issues facing youth in their community and to combat the identified issues through a grant-making process. uVoice members research community needs, develop a grant application, review responses to their request for proposals, and allocate dollars to non-profit organizations they believe are addressing the health-oriented issues prioritized by uVoice through their community needs assessment.

In previous years, uVoice has focused on topics relating to mental health, stress, suicide prevention, and substance use and abuse. This year, uVoice members chose to focus on two separate but related topics, mental health and sexual health.

Background

uVoice students agreed that a lack of knowledge about sexual and mental health was present among their peers, and agreed that their schools had a lack of adequate resources to address this issue. The group felt current resources were often outdated, not useful, not engaging to youth, and sometimes not present at all. Knowing that the experiences and opinions of their small group was not representative of all youth in Polk County, they expanded their reach through a twenty-seven-question survey distributed to high school students in their respective school districts. As a result, 366 students from fifteen different high schools in the Polk county area completed the survey. These schools represented a variety of ages, sexual orientations, and geographic locations around Central Iowa.

Community Needs Findings

Survey questions focused on both students’ mental and sexual health and their knowledge of where to find help and additional resources to improve their mental and sexual health. Questions on students' level of comfort with discussing and reaching out for help in both areas were also included. Some prominent survey results included:

- 84% (284) of respondents indicated that school has caused them significant stress in the past six months, 56% (190) indicated that “thinking about the future” caused significant stress in the past 6 months, 42% (142) indicated relationships/friendships, 39% (131) indicated sleeping patterns, and 37% (125) indicated home life as significant stressors in their life.
● 35% (119) of respondents said that they do not feel comfortable discussing mental health related issues with a parent or guardian. When asked why they do not feel comfortable, students indicated that, “They wouldn’t understand,” “It's not discussed in my household,” “The world is a lot different now than it was when they were my age,” and a variety of other responses.

● 25% (77) of respondents indicated they are currently sexually active, 16% (50) indicated that they have been sexually active in the past, but are not currently sexually active, and 59% (182) indicated they have never been sexually active.

● When asked, “How effectively has your school taught sexual health education?” 62% (183) indicated their sexual health education was ineffective, very ineffective, or that they have not received sexual health education.

● Many respondents indicated several areas that are currently missing in their mental and sexual health education that they wish had been included, such as:
  ○ Topics related to LGBTQ individuals
  ○ Depression, anxiety, coping mechanisms
  ○ Birth control and practicing safe sex
  ○ Consent

**Discussion**

The board was seriously troubled by the fact that 17% (52) of respondents stated that they have felt forced to participate in sexual activity without full consent. This becomes even more concerning when the board considered the question in the context of the number of students who have ever participated in sexual activity. In an earlier question, 127 respondents indicated that they are either currently involved in sexual activity or have been involved in sexual activity in the past (with 182 participants indicating that they have never participated in sexual activity). This would mean that 41% of students who have ever participated in sexual activity have, at some point, felt forced to participate in sexual activity without full consent. The board concluded that addressing consent should remain a high priority in any program awarded uVoice funding.

More broadly, the board expressed significant concerns regarding student knowledge about mental health and sexual health concepts, as well as about resources that are available to students. Significant numbers of respondents indicated a lack of knowledge in both mental and sexual health: 28% did not feel informed to make decisions about their mental health; 62% rated sexual health education they had received as “inadequate”, “very inadequate”, or nonexistent. Combined with the opinions of local experts, these survey results indicated that access to existing resources and education is grossly inadequate. Practically speaking, we identified two large gaps: students are unaware of or uncomfortable using resources currently available to them, and even when the resources are properly utilized, the capacity of those resources is insufficient to support anything close to every student in Polk County. The board determined that expanding universal education of both sexual and mental health, together with practical programs designed to
help students actually access available support services, should be a high priority for funded projects.

The student community’s lack of access to comprehensive education about mental and sexual health is an urgent public health issue. Student knowledge gaps are not simply an academic or theoretical problem – this lack of knowledge directly contributes to ongoing adverse outcomes for students. For example, the survey results indicate that 78.8% (52) of students who had participated in a sexual activity without full consent did not seek any kind of support after the incident, indicating a troubling disconnect between the experiences students have and the tools they are equipped with to deal with their experiences. By being forced to deal with the consequences of these traumatic experiences on their own, these students are at an increased risk for substance abuse, sexually transmitted infections, depression, and suicide.¹ Improving students’ knowledge and comfort in reaching out to mental and sexual health resources is crucial to the health and well-being of our communities.

Projects Funded

The board published a Request for Proposals seeking to fund a nonprofit with programs emphasizing improving education, resources, and communication regarding mental and sexual health. Such a program might include mental/sexual health education for middle and high school students, education for parents and teachers about discussing these topics with students, resources and support for youth (such as a peer-to-peer opportunity), promotion of self-care and safe coping mechanisms, and/or student-led advocacy regarding mental and sexual health.

The board awarded $1,500 to the Young Women’s Resource Center to support the Center’s After School Empowerment Groups, which provide free education for young women on body image, cultural diversity, sexual and reproductive health, healthy relationships, self esteem, self care, resilience, goal setting, and empowerment. Additionally, the board awarded $1,000 to Planned Parenthood of the Heartland to support their Askable Adult Program, which coaches professionals that serve youth in the community to be trustworthy, safe resources for youth seeking information about relationships, sexuality, and sexual health. In funding two separate organizations, the board aimed to expand capacity both in programs that directly target youth and in programs that facilitate training for adults that interact with youth, building sustainable, long-term systems for ongoing impact.

Conclusion

The After School Empowerment Groups and Askable Adult Program will be a valuable addition to Polk County’s resources for improving youth mental and sexual health, and these programs are a significant step forward in improving the level of access to guidance and information about these topics. More broadly, our community needs

assessment has demonstrated the systemic gap between the areas students identified as important to their mental and sexual health education and the education they actually receive. We identified the dual goals of expanding capacity and broadening awareness of the available mental health and sexual health programs as priorities for any public health body in the county.

Ultimately, schools are the first line of defense when it comes to educating our young people. No nonprofit organization or after-school program can ever impact every student in the county – as the institutions that interact with the most students on a daily basis, schools bear responsibility for the well-being of youth in the county. K-12 schools have grown to be more than simple educational institutions – they also serve social purposes ranging from enforcing immunization policy to providing healthy lunches. Public health problems are educational problems, and schools, with their community partners, must provide the comprehensive mental health and sexual health programs that students themselves have called for and currently lack.

Students, parents, educators, community members, and stakeholders should ensure their schools and community institutions are equipped with comprehensive programs and curricula. The insufficiency of these essential programs has tangible consequences for students, and students themselves have called for an expansion of current resources. Addressing these priorities must involve both a strong foundational education from schools and a complementary set of programming from outside community organizations.