# High School FLASH, 3<sup>rd</sup> edition Medical Accuracy

#### **FLASH Overview**

FLASH is a comprehensive, school-based sexual health curriculum for grades K-12 and special education, developed by Public Health – Seattle & King County. The FLASH curriculum is grounded in a public health approach to behavior change. The primary strategy used in the FLASH curriculum for preventing teen pregnancy, STDs and sexual violence, is to *address student behaviors and attitudes*. To this end, FLASH utilizes a harm reduction and behavior change framework; implements best practices as outlined in the research on effective programs; addresses risk and protective factors for program goals; and rests on the theory of planned behavior (CDC, 2012; Kirby, 2007; Teten Tharp 2013; Ajzen, 2010). FLASH employs key concepts in every lesson, enabling teachers to hone in on the risk and protective factors outlined in the curriculum logic model. Rigorous evaluation has shown that FLASH produces statistically significant positive impacts on students' behavior, knowledge and attitudes.

### **Medically Accurate and Complete**

HS FLASH, 3<sup>rd</sup> edition benefited from expert medical review and input in its development:

- Charissa Fotinos, MD, Deputy Chief Medical Officer, Health Care Authority of Washington, Clinical Associate Professor Department of Family Medicine, University of Washington
- Matthew Golden, MD, MPH, Medical Director, Sexually Transmitted Disease Clinic, Public Health –
  Seattle & King County, and Assistant Professor of Medicine, Center for AIDS and STD / Allergy and
  Infectious Diseases, University of Washington

High School FLASH, 3<sup>rd</sup> edition (2015) fully achieved medical accuracy and completeness standards in the federal Office of Adolescent Health's medical accuracy review in the fall of 2015. In 2016, the curriculum was successfully reviewed for medical accuracy and completeness by the Washington State Department of Health. In 2020, it was again successfully reviewed for medical accuracy and completeness by grantees of the Office of Population Affairs.

## **FLASH Approach to Medical Content**

- Less focus on medical details; greater focus on key concepts. (Links to detailed information are provided to students multiple times in the curriculum, if they wish to seek it out.)
- Medical content described in plain language to reach students with all literacy levels
- Greater depth of instruction on birth control methods and sexual health services that do not require prescription or clinic visit
- Attitudes, beliefs and norms emphasized over medical knowledge as a behavior change strategy
- Ease of instruction for teachers

## **Curriculum Development**

Selective use of medical content is a critical component of comprehensive sexual health education. In the development of FLASH, we have asked the following questions when determining the scope of medical information on different topics. Answers to these questions guide our selection or exclusion of medical content.

- Does it align or detract from the harm reduction and behavior change framework?
- How does it impact the risk and protective factors in the curriculum logic model?
- Does it help achieve the curriculum goals?

#### **More Information**

Please contact the lead authors of the FLASH curriculum at Public Health – Seattle & King County at FLASH@kingcounty.gov

### References

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Centers for Disease Control and Prevention, Division of Violence Prevention. <a href="http://www.cdc.gov/violenceprevention/sexualviolence/riskprotectivefactors.html">http://www.cdc.gov/violenceprevention/sexualviolence/riskprotectivefactors.html</a> Accessed 12/31/2014.

Centers for Disease Control and Prevention. *Health Education Curriculum Analysis Tool, 2012,* Atlanta: CDC; 2012. (p. 4 Characteristics of an Effective Health Education Curriculum)

Kirby, D. (2007). Emerging Answers 2007: Research Findings on Programs to Reduce Teen Pregnancy and Sexually Transmitted Diseases. Washington, DC: National Campaign to Prevent Teen and Unplanned Pregnancy (p. 22 Characteristics of Effective Curriculum-Based Programs)

Kirby, D., & Lepore, G. (2007). Sexual Risk and Protective Factors: Factors Affecting Teen Sexual Behavior, Pregnancy, Childbearing, and Sexually Transmitted Disease: Which Are Important? Which Can You Change? Washington, DC: The National Campaign to Prevent Teen and Unplanned Pregnancy.

Teten Tharp, A., DeGue, S., Valle, L., Brookmeyer, K., Massetti, G., & Matjasko, J. Centers for Disease Control and Prevention (2013). A systematic qualitative review of risk and protective factors for sexual violence perpetration. *Trauma Violence Abuse*, *14*, 2, 133-167.