

**Health Priority: High Risk Sexual Behavior  
Objective 1: Adolescent Sexual Activity (Logic Model)**

**Long-term (2010) Subcommittee Outcome Objective:** By 2010, 30 percent or less of Wisconsin high school youth report ever having sexual intercourse.

Long-term outcome objective updated as of: Sept 2004

Inputs	Outputs		Outcomes		
	Activities	Participation/ Reach	Short-term 2002-2004	Medium-term 2005-2007	Long-term 2008-2010
<p>Note: <i>All inputs apply to all activities and groups to be reached, thus applying to all outcomes.</i></p> <p>Parents, siblings, extended families, foster, and adoptive families. "There is wide agreement that parents are the primary sexuality educators of their children, providing them with guidance on the particular values and morals subscribed to by their spiritual beliefs and cultural norms."</p> <p>Policymakers, community leaders, youth leaders, government agencies, etc.</p> <p>Monies (both public and private) and in-kind services (e.g., buildings, staff, training, materials, etc.).</p>	<p>Educate and train the groups we are trying to reach about healthy adolescent sexual development and relationship skills and <u>why</u> delaying and/or abstaining is important. Give them the skills on <u>how</u> to achieve this decision and <u>teach</u> others the same. Provide educational programs to improve adult/parent/child communication. Training/information can be in the form of conferences, programs, pamphlets, etc. "We must provide access to developmentally and culturally appropriate sexuality education, as well as sexual and reproductive health care and counseling."</p> <p>Individuals are multi-faceted and programs that take a holistic approach will more likely have an influence over individuals. Generally speaking, short-term curricula-whether abstinence-only or sexuality education programs-do not have measurable impact on the behavior of teens. Increasingly, programs to prevent teen pregnancy concentrate on helping young people develop skills and confidence, focus on education, and take advantage of job opportunities and mentoring relationships with adults - thereby helping them create reasons to</p>	<p>Parents/families</p> <p>Adolescents</p> <p>Males</p> <p>At-risk populations</p> <p>Youth leaders/mentors</p> <p>General public</p> <p>Health care educators/health care providers</p> <p>Community leaders</p> <p>Policymakers</p> <p>School professionals/school boards/parent-teacher organizations</p>	<p>An increase in perception that delaying initiation of sexual activity or abstinence during teen years is a positive strategy for personal health.</p> <p>People will understand that abstaining from and delaying sexual activity are positive for adolescent physical and mental health.</p> <p>An increase in the promotion of positive evidence-based relationship skills.</p> <p>Various forms of media and curricula will reach the general public promoting positive relationships skills, how to practice them, and why they are important in developing and maintaining a healthy relationship.</p> <p>An increase in social support for communication</p>	<p>An increase in knowledge, skills, and assets for promoting healthy sexual development, healthy relationships, delaying sexual activity and abstaining. People will have evidence-based information to make and affirm the decision whether to delay sexual activity or abstain. They will have and use skills to support and maintain their decision when in a relationship (e.g., how to say "no" in a positive way without the other person feeling rejected).</p> <p>An increase in knowledge and use of positive evidence-based relationship skills. People will know and apply evidence-based skills necessary for a An increase in knowledge</p>	<p>A decrease in the proportion of high school youth who report ever having sexual intercourse to 30 percent by the end of 2010.</p> <p>Through the Centers for Disease Control Youth Risk Behavior Survey, implemented biannually in Wisconsin by the Department of Public Instruction, data will be collected regarding the sexual behaviors of Wisconsin youth. The tool measures such data as:</p> <ul style="list-style-type: none"> <li>• whether or not youth report ever having had sexual intercourse</li> <li>• abstinence goals of youth (e.g., until marriage, engagement, long-term relationship)</li> </ul>

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<p>Both public and private groups who come together to form a group to work on delivering and supporting the message of abstaining from or delaying initiation of sexual activity.</p> <p>Laws, coalitions, and collaborative adolescent pregnancy prevention plans supporting this message (e.g., funds for new and existing programs, consistent prosecution of sexual abuse cases).</p> <p>Training for groups and individuals to learn skills and how to reach youth. Programs to provide examples of and practice with communication, negotiation, and refusal skills.</p> <p>Materials necessary to learn and teach skills (e.g., books, videos,</p>	<p>make responsible decisions about sex. These efforts include service learning, vocational education and employment programs, and youth development programs, broadly defined.</p> <p>One-to-one counseling, mentoring, or simply time spent together provides another support for an adolescent. Adolescents may lack close relationships with parents or other caring adults. This one-to-one relationship may meet the need for love, attention, etc., that a young person may otherwise seek in a sexual relationship.</p> <p>Information on effective programs, web sites, speakers, curricula, media materials, etc., need to be provided for those promoting the delay of sexual activity or abstinence.</p> <p>We need a clear picture of how much money is supporting various approaches and from what sources it comes from. Efforts must be made to coordinate these resources and programs and fully evaluate strategies.</p> <p>Television, radio, posters, advertising "gimmicks," and others are needed both</p>		<p>about healthy sexual growth and development, including the decision to abstain from or delay sexual activity among adolescents.</p> <p>The community will support adolescents who have decided to abstain from or delay sexual activity.</p> <p>An increase in training and support for teaching skills about healthy sexual growth and development and relationships, including the decision to abstain from or delay sexual activity. People (parents, teachers, health professionals, peer mentors, etc.) will find the support necessary to teach these skills.</p> <p>Development or modification of surveillance tools (e.g., Youth Risk Behavior Survey, Family Health Survey) to measure the impact of healthy sexual growth and development,</p>	<p>and use of positive evidence-based relationship skills. People will know and apply evidence-based skills necessary for a positive, healthy relationship in their personal relationships.</p> <p>An increase in the number of parents, professionals, and youth leaders who effectively teach youth about healthy sexual development and relationship skills, including to delay sexual activity or abstain.</p> <p>Implementation of surveillance tools for measuring healthy sexual development, relationship skills, the initiation of sexual activity and abstinence. The surveillance tools that have been designed or modified will be used to collect data.</p>	<ul style="list-style-type: none"> <li>• age at which youth experience first episode of sexual intercourse</li> <li>• number of sexual partners youth have had in their lifetime.</li> </ul>

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<p>curriculum).</p> <p>School boards, teachers, etc. Another key group in educating the public as they have direct access to families and youth and can use this opportunity to teach delaying or abstaining as a healthy choice.</p> <p>Nurses, doctors, mental health professionals, social workers, etc. A key group in educating the public as they have direct access to families and youth. They can use their opportunities to teach about healthy adolescent sexual development and relationships providing support for delaying or abstaining as a healthy choice.</p> <p>All media have the potential for providing sexuality information and education to the public.</p>	<p>at the state and local level to educate and inform people about healthy sexual development and the healthy choices of abstaining from or delaying sexual activity. Media needs to portray the real consequences of sex and show responsible behaviors and healthy relationships.</p> <p>Rallies, media campaigns (e.g., posters, radio, television), special events during "high risk" times (e.g., prom, summer, graduation) are all activities that local communities can do to promote the delay of sexual activity or abstinence.</p> <p>Data needed to evaluate strategies for preventing teen pregnancy. There are still many important unanswered questions. Research findings need to be translated into concrete ideas that people can use.</p>		<p>relationship skills, the delay of sexual initiation, and abstinence.</p>		

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<p>Youth, parents, civic and other community based organizations, churches, and businesses can all contribute to abstinence education for Wisconsin youth. All of these are included as stakeholders in The Wisconsin Plan to Prevent Adolescent Pregnancy.</p>					