

IT'S TIME TO BREAK THE SILENCE

Sexual assault survivors and other community members believe the limited consent education in the SMSD health curriculum leads to increased sexual violence

*Names changed to

by rose kanaley

T H E N - SOPHOMORE

JANE Rogers*

re m e m b e r s walking to his house, down his basement steps, then being pressured to smoke marajuana. After that, her memory goes blank. The drug's reaction with her previously taken prescribed medication caused her to black out — she was unconscious, and unable to consent.

The next thing she remembers is stumbling home down the road. Her mother started crying when she saw her come in the front door, and immediately drove her to t h e

THE FACTS BREAKDOWN

Kansas and SMSD policy call for

ABSTINENCE-BASED sexual education curriculum



81% OF WOMEN



43% OF MEN

will experience sexual assault or harassment in their lifetime

sexual assault cases in K-12 schools increased 50% from 2015-2018, likely because people were more willing to open up about their experiences as more awareness is being brought to the subject



hospital. Propped up in a hospital bed, doctors spent hours performing examinations with the rape kit. They took pictures of the bruises and bite marks all over her body, then collected samples of the hair and semen they found in her.

The truth was clear: Rogers was raped.

As national Sexual Assault Awareness Month starts April 1, East students like Rogers are desperate to advocate for the struggles victims of sexual assault endure, and what schools can do to prevent incidents like this. In

SEX EDUCATION CURRIC

4th GRADE receive instruction on family sexuality by the end of fourth g

*Information from National Education Department, NPR and SMSD

an Instagram poll of 339 votes from primarily East students, 94% thought consent education and setting sexual boundaries should be more emphasized in the high school sex education curriculum. Rogers, among other students, feels that including more consent education within the high school health curriculum is imperative. Without it, she believes students aren't prepared for the seriousness of sexual relationships, and potential dangers that come with it.

Consent is when both parties consciously and enthusiastically agree to partake in activity together. Rogers explains it's not saying yes after saying no seven times, it's not being unsure and it's not being black-out drunk or unconscious — but other students, who have missed out on consent education, may not have the same clarity as they've never been taught in school.

According to the Guttmacher Institute, a sexual health research organization, an effective consent education should include information on the prevention of sexual violence and emphasizes consent in sexual relationships, along with establishing what makes a healthy relationship and how to avoid unhealthy ones.

"What sex is about is consent," Rogers said. "If there's no consent, then it's not sex. It's rape. So if you're going to teach sex, you have to teach consent, because I feel like no kids are ever taught that, or they're not taught enough about it."

East's current sex education unit is a two-week unit within the semester-long required health course.

It's one of the

things.

The standards of the sex education curriculum taught emphasizes abstinence, according to Barney. Parents are also given the option to excuse their children from the sex education unit for personal reasons per board policy. Barney stated that the importance of consent and refusal skills are included in the units with coverage on sex education. But according to Henton, these skills still aren't currently being taught in the classroom.

Although health teachers meet once a year with other teachers across the district to suggest and discuss changes to the curriculum, Henton finds that the content is restricted to the given requirements. The only room for teachers to make individualized decisions within their classroom is how they choose to teach the required content, whether it be with presentations, lectures or projects.

Henton believes that including a consent education within the health curriculum is important, and hopes one will be added in the future, whether by Barney or through meeting of the East health teachers.

"It's definitely a necessary thing that needs to happen because we're seeing every single day that there are issues with [sexual assault] and whenever we have our meeting again, I think that'll be something that's brought up to add into the curriculum to make sure that we are teaching that," Henton said.

In the state of Kansas, schools are not required to follow a specific curriculum, but are required to meet the minimum "performance and quality criteria" guidelines the Kansas State Board of Education establishes for the

helping other victims, posting to her Instagram story and letting those following her know she's there to talk about their experiences and share support.

She hopes more awareness will be raised on sexual assault, including the physical and mental effects — and believes that begins with talking about it in classrooms. She hopes boys and girls will leave health with an understanding of the physical and mental toll sexual violence can take.

For example, Rogers' assault left her in the hospital for three days with her organs ruptured so brutally that still, when she urinates, blood comes out.

"The bleeding got so bad that [my doctors] thought I had a tumor," Rogers said. "I didn't, I just was bleeding."

According to RAINN, the world's largest anti-sexual violence organization, victims of sexual assault and violence often experience depression, flashbacks, PTSD, panic attacks and dissociation following the acts.

Junior Sarah Williams*, another sexual assault survivor, agrees with Rogers, hoping other students will be informed of the mental effects sexual violence can lead to after experiencing them firsthand. After drinking too much and blacking out one night during the summer, a friend raped Williams while she was unconscious, and unable to consent.

The emotional trauma weighed on her — she pushed people away, pushed her feelings down and blamed herself. To cope, she turned to drinking and smoking to the point where it became almost an every day occurrence. She didn't know of an available support system for assault victims, and it wasn't for months that she finally realized the magnitude of the problem and stopped her habits.

"That just put me into an awful state where I was like, 'Oh my god, let's [drink every night]," Williams said. "It's just a normal thing."

She hopes the incorporation of what to look out for in potential sexual experiences and the effects sexual assault and harassment can have on people will eventually be included in the sex education curriculum, and provide other students in similar scenarios resources so they don't have to go through it alone.

Rogers entire life changed after her assault. She wishes no one has to experience that, and that schools provided more resources to those who do. Then, maybe her friends wouldn't wear only baggy clothes to shield their bodies from any attention or possible harassment. Maybe she would feel comfortable walking alone at night. Maybe she would trust the men in her life.

"It affected the way that I view the world and the way that I view people," Rogers said. "[Women] shouldn't have to feel afraid to walk

down the street. I shouldn't have to bring one of my guy friends with me every time I go to the mall alone. I want to be able to do things by myself without having someone near me 24-seven because I'm scared I'm going to get assaulted, or robbed or something worse."

For Williams, the in-school health unit on sex education was lacking relevance and lasting impact due to the little information provided. After taking the class, she barely recalls what content was included — and wouldn't be surprised if others couldn't either.

"If I don't even remember it, clearly there's something that needs improvement within the school," Williams said.

East alum and University of Kansas junior Isa Fimbres helped start KU's first support group for victims and survivors of sexual assault and harassment, Support for Survivors KU. She believes students should receive a consent education before entering college as well as have resources like support groups for victims who have experienced sexual assault, and that the lack of one is harming students.

KU and many colleges across the country require all students to take a virtual sexual harassment education and prevention training course annually before the school year begins. However, Fimbres finds that the course provides more of an awareness on what sexual harassment is than prevention education, and would be more effective if students had exposure to this education from an earlier age.

She doesn't view the current standards at colleges or schools as effective, as she sees many peers dealing with sexual assault and harassment on campus.

"Everyone [on the Support for Survivors Exec Board] knows someone who has been assaulted, if they aren't that someone," Fimbres said. "That is enough for change to need to happen."

Fimbres would feel safer in her college environment if she knew students were receiving a consent education in high school, and she believes students would be safer going into college if they had as well.

"Lots of times when kids come to college, they aren't ready for all the things that are about to happen," Fimbres said. "They don't see the signs, when you're meeting all these people who could potentially be a threat or have behaviors that would be off putting, if you had had better training."

To Williams, boundaries need a place in high school curriculums, and until more sexual assault awareness and education is brought to light in the district and state education, teens will feel less safe.

"I feel like a consent education is the first step to solving this problem," Williams said. "Or even just making it better."



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jane rogers* | junior

shorter units of the class, according to health teacher Alexander Henton. He says that there is no current inclusion on consent in the unit partially due to time constraints.

The current curriculum follows the Kansas Health Standards for Human Sexuality and Relationships, according to Kim Barney, SMSD's Assistant Director of Curriculum and Instruction and the curriculum coordinator in charge of health. It includes information on adapting to changes in puberty, behaviors of a relationship such as communication and abstinence and potential outcomes of sexual activity like STDs and pregnancy, among other

curriculum. This criteria mandates that schools teach students the "importance and benefits of abstinent behavior and risk-reducing strategies" by graduation, and currently does not include information regarding consent, according to Melanie Haas, District Two and Johnson County school districts' representative for the Kansas State Board of Education.

But many who've experienced sexual assault recognize that the lack of formal education about consent and safe sex leaves young people to figure out how to facilitate sexual relationships themselves — an undertaking many teens aren't ready for alone. Rogers, now a junior, has taken to her own efforts of raising awareness and

CURRICULUM PROGRESSION *Information from Kim Barney, the assistant director of curriculum and instruction at SMSD

8th GRADE have an understanding of how to reduce risks related to adolescent growth and development, male and female reproductive organs and the risks and preventions of STIs

12th GRADE must know about the importance and benefits of abstinent behavior and risk-reducing strategies by graduation

