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FOSTERING COMMUNITIES OF PRACTICE IN COMPREHENSIVE SEX EDUCATION:  
EVALUATION AND RECOMMENDATIONS ON THE FOUNDATIONS TRAINING

By

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Bachelor of Science, University of Portland, Portland, OR, 2013

Professional Paper  
presented in partial fulfillment of the requirements  
for the degree of

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Fostering Communities of Practice in Comprehensive Sex Education: Evaluations and Recommendations on the Foundations Training

Chairperson: Dr. Joel Iverson

Sex education is not contained to the classroom, rather, it is a lifelong evolving experience for both the individual and their community, which continually influence one another. More specifically, sexual health is understood through communication with others – exemplifying learning as a truly social process. As such, Communities of Practice theory (CoP) is a useful lens to better understand how a community can develop through social learning in sex education training. This paper evaluates the Foundations Training, a widely adopted Comprehensive Sex Education (CSE) practitioner training, using Wenger-Trayner’s (2015) list of CoP activities as a guide for qualitative coding. This evaluation identified which types of activities were present in the training that supported the creation of a CoP and made recommendations on how to improve and encourage this process. The evaluation revealed that the goals of CSE are well represented: social, communication, negotiation, problem solving, decision making, and goal setting skills. Prioritizing these goals will improve students’ experience and confidence in the topic of sexual health thus developing and empowering their relationship with the information. Ultimately, this evaluation supports approaching sex education using CoP theory as an innovative method to foster community building among students so as to socially learn about sexual health, for themselves and their community.

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## **Introduction and Rationale**

Sex: We come from it, we are consciously and subconsciously curious about it, we use it in a wide variety of ways, we are defined by it, we are judged and celebrated for it, and whether one has it or not, it is an unavoidable part of one's life. Alex Comfort, author of the infamous book, *The Joy of Sex* (1972), claimed sex could be reproductive, relational, or recreational. Sexual experiences are defined by the complicated overlap of these outcomes. In sum, sex can be just about anything. It can be the best most pleasurable experience, or a mundane and disappointing one, or the worst and most traumatic of one's life. It is hard to know where to start to break down this enormous and essential topic.

The goal of sex education, regardless of method, is to teach adolescents about sexual health and ways to avoid unwanted pregnancy and STIs. Sex education is far from universal in its source and application in the United States (Planned Parenthood Federation of America (PPFA), 2016). It differs in requirements, guidelines, goals, and curriculum, not only between distinct states, but distinct school districts (Santelli et al., 2006; Advocates for Youth, 2009; Future of Sex Education (FoSE), 2013; Szydlowski, 2015; PPFA, 2016; FoSE, 2018; Office of Adolescent Health, (OAH), 2018).

There are two main types of sex education: Abstinence Only Before Marriage (AOUM) education, and Comprehensive Sex Education (CSE). CSE is the more progressive of the two and includes a wider variety of topics founded in scientific evidence rather than puritanical and religious moralistic value systems. There was substantial fear of CSE, and its medically accurate and comprehensive information, based on the misguided belief that it would increase sexual risk-taking behaviors. It did not. In fact, it has been proven time and time again that CSE decreases sexual risk-taking behaviors while AOUM has shown no significant evidence of this (PPFA,

2016). Modernly, CSE is the standard and the norm and is the preferred curriculum by over 80% of Americans (PPFA, 2016).

Despite huge progressive strides made in sex education curriculum, systemically, it is still in great need of improvement. PPFA summarizes,

“Only 24 states and the District of Columbia mandate sex education, and even in those states there’s no guarantee that the sex education provided is of high quality, or covers the topics young people need to learn about to stay healthy. Fewer than half of high schools and only a fifth of middle schools are teaching the sexual health topics that the Centers for Disease Control and Prevention (CDC) considers “essential” for healthy young people. This is unacceptable.” (2019).

CSE curriculum guidelines from leading sexual and public health organizations such as the Center for Disease Control (CDC), Planned Parenthood Federation of America (PPFA), Sexuality Information and Education Council of the United States (SIECUS), and Future of Sex Education (FoSE), all emphasize the importance of teaching skills in communication, negotiation, goal setting, and decision-making. They see these skills as essential to accomplishing the other curriculum goals of CSE detailed in the literature review below.

Sex education does not stop at the boundary of a classroom. Discussing and understanding sexual health is a lifelong responsibility. By teaching students how to communicate and negotiate sexual health information and their experiences early on will positively serve them for the rest of their lives. Social learning plays a large role in how one understands sex, sexual health, its social and personal impacts (PPFA, 2018). Addressing any topic from a community perspective engages members to interact with one another. Because sexual health is both an individual and social topic, a community perspective will be a beneficial frame to learning and understanding the topic for oneself and for one’s community. Providing a structure within which social learning can occur in sex education classrooms is essential to its improvement. I argue that Communities of Practice (CoP), a social learning theory, can guide the

creation of this structure. Specifically, CoPs address topics of interest to the community and encourage the continued communication and negotiation of knowledge of the shared practice among members in order to learn and improve their skills. FoSE (2019) claims sex education must focus on “both information and essential skills that are necessary to adopt, practice, and maintain healthy relationships and behaviors.” It is essential to go beyond disseminating information and teaching skills distinctly and put them together. To me, this looks like students in a classroom CoP learning from their social interactions and sharing and negotiating information as they make sense of it for themselves and contextualize it within their community. For these reasons, I believe a sex educator training founded in CoP theory and its related communicatively enacted social learning behaviors can help accomplish the leading sex education guidelines.

Focusing on communication skill building will improve students’ experience and confidence in the topic of sexual health and develop and empower their relationship to that information. FoSE (2019) continues, “Students need opportunities to engage in cooperative and active learning strategies, and sufficient time must be allocated for students to practice skills relating to sexuality education.” SIECUS agrees that CSE is most effective when “young people not only receive information but are also given the opportunity to explore their own attitudes and values and to develop or strengthen social skills.” (2004). Creating a CoP environment in the classroom will provide those cooperative opportunities for active learning through communication. CoP theory will be used as a model of learning to help students have a testing ground in the center of their CoP within which they can wrestle with the topics of sex education.

In sum, I will evaluate an existing training program (Foundations Training) used by Planned Parenthood of Montana (PPMT) for sex educators. Using communication as a lens to



examine a training program for sex educators, I will provide recommendations that would infuse CoP qualities into the training and help achieve the guidelines for comprehensive sex education by leaders in the field. The recommendations from this evaluation can help instructors go beyond disseminating information and guide students to interact as a CoP to learn the material socially. This will empower students to both be owners of sexual health knowledge as they engage in the learning process through social interaction and negotiation with fellow classmates, or in this case community members. While this project is only an evaluation with recommendations of an existing training program, the information gathered here could ultimately set the stage to develop a new training focused even further on qualities of CoP and could help instructors leave with a superior understanding of how they can create a CoP in the classroom. This type of new training could enhance understanding of sexual health individually and within the context of a community, leaving students with an enhanced ability to communicate about sexual health with current and future partners and other CoP members.

## **Literature Review**

The following section includes a review of applicable literature concerning sex education, sex educator training, and Communities of Practice (CoP) theory. More specifically, I will cover the history and types of classroom sex education and informal sex education in the public sphere. It will then give an overview of Communities of Practice theory and its significant characteristics. Finally, I will outline what training for sex educators looks like in the United States and specifically in Montana. I will argue why CoP theory, used as a mode of social learning, could improve the experience and outcomes of sex education.

### **Sex Education**

The following is a detailed history of how sex education has come to be what it is today. The first sex education document was authored by Reverend John Todd, a minister from Massachusetts. The popular book was called *The Student's Manual* and mainly focused on discouraging masturbation explaining it was a secret vice that could lead to memory loss, depletion of energy, and death (1835). Driven largely by urbanization, the National Education Association (NEA) first passed a resolution to include “moral education” in schools in 1892 (Cornblatt, 2009). Although sex education fell under the umbrella of “moral education” it was not until 1913, Chicago superintendent Ella Flagg Young, created the first sex education course for public school students in response to the city’s high rates of prostitution and sexually transmitted disease (Moran, 1996). It was framed as a “sex hygiene” course to serve both moral and medical purposes. Unfortunately, the program only lasted one year before local Catholic leaders and conservative school-board members cut it.

On October 16, 1916 sisters Margaret Sanger and Ethel Byrne, and Fania Mindell opened the first birth control clinic in the U.S. (Gazit, Steward, & Klotz, 2013). The clinic was located in

Brooklyn, New York and offered birth control, birth control advice, and birth control information. All three women were swiftly arrested under the Comstock laws for distributing “obscene materials.” By 1921 this clinic was recreated into the American Birth Control League.

In response to rampant STDs from soldiers in World War I, Congress passed the Chamberlain-Kahn Act in 1918 which funded soldiers’ education about syphilis and gonorrhea (Hall, McDermott Sales, Komro, & Santelli, 2016). Americans began to see sex education as a public-health issue and sex education became required for military members. In 1914 the first sex-education film, *Damaged Goods*, was released to warn soldiers of the consequences of syphilis. The plot exemplifies the state of sex education at the time: largely moralistic but beginning to incorporate scientific information. The silent black and white film follows a man who has sex with a prostitute the night before his wedding, which gives him syphilis, which he then passes on to his newborn baby, culminating in the destruction of his life until he commits suicide (Ricketts, 1914). Despite the depressing storyline, the film was positively received particularly by the social hygiene/social purity movement supporters. Sex education in the 1920s remained largely based in moralistic values discouraging masturbation, premarital and extramarital sex, and was incorporated into about 20-40% of public schools (Cornblatt, 2009).

Over the next few decades sex education rapidly developed and became more ingrained in our education system. In the 1930s, the US Office of Education began to publish materials and trainings for instructors. In the 1940s and 1950s, human sexuality courses began to be offered at US universities. By 1941, the previously discussed American Birth Control League, were operating 222 centers and had served 49,000 clients. To appease critics claiming the name was “anti-family” the league was renamed as Planned Parenthood Federation of America (PPFA) in 1942 and continued to be the only source of information and services of this kind into the 1960s.

In 1964, physician and former medical director at PPHA formed a new organization, Sexuality Information and Education Council of the United States (SIECUS), in response to the leading conservative Christian sex education curriculum developers: the American Social Hygiene Association. Since its inception, SIECUS has played a vital role for the implementation and improvement of sex education. Further progress was made mainly driven by PPFA including the 1965 Supreme Court case *Griswold v. Connecticut* which ruled private use of contraceptives as a constitutional right (PPFA, 2016). By 1968, the U.S. Office of Education gave a grant to New York University to develop a graduate program for training sex educators (Cornblatt, 2009).

In 1975 the World Health Organization (WHO) defined sexual health as:

“the integration of the somatic, emotional, intellectual, and social aspects of sexual being, in ways that are positively enriching and that enhance personality, communication, and love. Fundamental to this concept are the right to sexual information and the right to pleasure.”

WHO also identified three basic elements of sexual health: 1) a capacity to enjoy and control sexual and reproductive behavior in accordance with a social and personal ethic, 2) freedom from fear, shame, guilt, false beliefs, and other psychological factors inhibiting sexual response and impairing sexual relationship, 3) freedom from organic disorders, diseases, and deficiencies that interfere with sexual and reproductive functions. “Thus the notion of sexual health implies a positive approach to human sexuality, and the purpose of sexual health care should be the enhancement of life and personal relationships and not merely counseling and care related to procreation or sexually transmitted diseases.” (1975). WHO’s definition was a progressive and clear departure from the conservative moralistic notions of sexual health and sex education.

After the sexual revolution of the 1960s and 1970s reciprocal pushback grew from conservative Christians well into the 1980s. Fortified by the fear from the AIDS epidemic, conservative opponents of comprehensive and medically accurate sex education argued for

Abstinence Only Until Marriage (AOUM) programs (PPFA, 2016, Stanger-Hall, & Hall, 2011). Despite the lack of statistical evidence to suggest that AOUM had any positive impact on behavioral outcomes, the government went on to pour money into these programs reaching its peak of \$176 million dollars a year under former President George W. Bush (Santelli et al., 2017).

SIECUS formed the National Guidelines Task Force in 1991 who created and published the first formal Comprehensive Sex Education (CSE) curriculum titled: *Guidelines for CSE-Kindergarten-12th grade* (PPFA, 2016). To give a sense of the state of sex education at the time, it was not until 1993 that the U.S. Supreme Court ruled that federally funded sex education programs must not directly reference religion. This meant instructors could no longer legally suggest to students that a good abstinence strategy was to “take Christ on a date as a chaperone” (PPFA, 2018). Unfortunately, in 1996 Congress added a provision to welfare legislation that made funding for sex education exclusively available to AOUM programs (National Coalition Against Censorship, 2001).

In 2010, funding for sex education was no longer just for AOUM programs. Former President, Barack Obama, started the grant program Teen Pregnancy Prevention Program (TPPP) the funds of which were allocated to evidence-based prevention initiatives such as CSE and included education on contraception, dating violence, and the value of healthy relationships. TPPP has been lauded for its success in decreasing rates of teen pregnancy with a record decrease of 9 percent between 2013 and 2014 (Martin, Hamilton, Osterman, Driscoll, & Drake, 2018). Unfortunately, on April 20, 2018, the U.S. Department of Health and Human Services announced that TPPP will only provide funding to organizations promoting abstinence-only approaches (Hellmann, 2018).

The latest improvement to CSE is the emphasis on teaching healthy relationships and consent. Researcher for K-12 Education, Shapiro, and vice president of Education Policy at the Center for American Progress, Brown, explain a mere 10 states and the District of Columbia mention the terms “healthy relationships,” “sexual assault,” or “consent” in their sex education programs leaving the majority of U.S. students without sufficient education (Shapiro & Brown, 2018). In 2009 Oregon lead the nation as the first state to legally require CSE in public schools. Currently, California, Oregon, and New Jersey lead the way by requiring educators to use materials that are medically accurate and include instruction related to healthy relationships or consent. Further, they “go beyond the technical components of sex education to encourage students to have more open conversations about sexuality.” (Shapiro & Brown, 2018). Oregon’s comprehensive statewide regulations ensure consistency among school districts. For all these reasons, unsurprisingly, California, Oregon, and New Jersey, have lower teen pregnancy rates than the national average. In 2016, Oregon progressed further by requiring the specific mention of consent and establishing personal boundaries, beginning in kindergarten. Other states are attempting to pass similar legislation with mild success.

Shapiro and Brown at the Center for American Progress summarize:

“State and local policymakers should modernize and rethink sex education programs in public schools to help better prepare students for the complex world in which they live. Through new legislation and updated state standards, policymakers should encourage sex education requirements that include instruction on healthy relationships, communication, intimacy, consent, and sexual assault prevention. Without formal and comprehensive sex education that includes this information, states are missing a prime opportunity to arm young people with quality information that would help them make safe, healthy choices. Such choices have the potential to have positive impacts on students’ emotional well-being and future relationships.” (2018).

Sex education goals have overall grown far beyond its once problematic past. Due to the efforts of those detailed above, social hygiene and moral purity, prevention of STDs through

discouragement of masturbation, and encouragement of the reservation of sexual expression to marriage, can be left behind.

**Abstinence only until marriage (AOUM).** Abstinence only education focuses on avoidance of sex and its related risks until marriage. Abstinence only education has also been called abstinence-centered, abstinence-only-until-marriage, sexual risk avoidance, and most recently and ironically, youth empowerment sex education. This curriculum typically rejects the teaching and value of contraception. Here are the legal guidelines of AOUM:

- (A) has as its exclusive purpose, teaching the social, psychological, and health gains to be realized by abstaining from sexual activity;
  - (B) teaches abstinence from sexual activity outside marriage as the expected standard for all school age children;
  - (C) teaches that abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems;
  - (D) teaches that a mutually faithful monogamous relationship in context of marriage is the expected standard of human sexual activity;
  - (E) teaches that sexual activity outside of the context of marriage is likely to have harmful psychological and physical effects;
  - (F) teaches that bearing children out-of-wedlock is likely to have harmful consequences for the child, the child's parents, and society;
  - (G) teaches young people how to reject sexual advances and how alcohol and drug use increases vulnerability to sexual advances; and
  - (H) teaches the importance of attaining self-sufficiency before engaging in sexual activity.
- (SSA - Social Security Administration, 2019).

While AOUM has been the norm in our puritanical American society, decades of effort from scientists, advocates, policy makers, non-profit leaders, and educators has resulted in shifting the method to a more comprehensive curriculum.

**Comprehensive sex education (CSE).** Comprehensive sex education has also been called abstinence-based, abstinence-plus, abstinence-plus-risk-reduction, or sexual risk reduction education. The goal of CSE is to set the standard that abstinence is the most effective form of preventing pregnancy and the spread of STIs; however, it acknowledges that everyone has a

choice and there are other methods and considerations to discuss when one is ready. CSE addresses more topics than AOUM including sexuality, age of consent, contraception, and STI prevention and has been proven to help young people make better decisions regarding sex resulting in fewer unwanted pregnancies and instances of STIs and HIV/AIDS (Julian, 2018).

PPFA (2019) explains CSE covers a variety of topics including:

Human Development (including reproduction, puberty, sexual orientation, and gender identity). Relationships (including families, friendships, romantic relationships and dating). Personal Skills (including communication, negotiation, and decision-making). Sexual Behavior (including abstinence and sexuality throughout life). Sexual Health (including sexually transmitted diseases, contraception, and pregnancy) Society and Culture (including gender roles, diversity, and sexuality in the media).

The future of sex education in the United States is unclear; however, research strongly shows over 80% Americans share a desire to improve sex education in the direction of CSE. A national poll executed by Planned Parenthood revealed that by and large sex education is supported by most parents to be taught in middle school and high school (Prudhomme, 2018). CSE is also supported by leading organizations such as: the American Psychological Association, the American Medical Association, the National Association of School Psychologists, the American Academy of Pediatrics, the American Public Health Association, the Society for Adolescent Medicine, and the American College Health Association (PPFA, 2016).

**CSE Guidelines.** As previously mentioned, several leading organizations have published guidelines for CSE. For the purposes of this paper, I will use guidelines from the following organizations to direct my evaluation and recommendations. Many of the guidelines are explicitly about communication and all are substantially related and affected by communication.

The Center for Disease Control offers 19 Critical Sexual Education Topics:

1. Communication and negotiation skills



2. Goal-setting and decision-making skills
3. How to create and sustain healthy and respectful relationships
4. Influences of family, peers, media, technology and other factors on sexual risk behavior
5. Preventative care that is necessary to maintain reproductive and sexual health
6. Influencing and supporting others to avoid or reduce sexual risk behaviors
7. Benefits of being sexually abstinent
8. Efficacy of condoms
9. Importance of using condoms consistently and correctly
10. Importance of using a condom at the same time as another form of contraception to prevent both STIs and pregnancy
11. How to obtain condoms
12. How to correctly use a condom
13. Methods of contraception other than condoms
14. How to access valid and reliable information, products, and services related to HIV, STIs, and pregnancy.
15. How HIV and other STIs are transmitted
16. Health consequences of HIV, other STIs and pregnancy
17. Importance of limiting the number of sexual partners
18. Sexual Orientation
19. Gender roles, gender identity or gender expression

Planned Parenthood Federation of America uses guidelines created by the Sexuality

Information and Education Council of the United States (SIECUS):

1. Human Development: Human development is characterized by the interrelationship between physical, emotional, social, and intellectual growth.
2. Relationships: Relationships play a central role throughout our lives.
3. Personal Skills: Healthy sexuality requires the development and use of specific personal and interpersonal skills.
4. Sexual Behavior: Sexuality is a central part of being human, and individuals express their sexuality in a variety of ways.
5. Sexual Health: The promotion of sexual health requires specific information and attitudes to avoid unwanted consequences of sexual behavior.
6. Society and Culture: Social and cultural environments shape the way individuals learn about and express their sexuality.

SIECUS argues that by following the above guidelines CSE will result in positive “life

behaviors” (2004). Life behaviors of a sexually healthy adult according to SIECUS will:

1. Appreciate one’s own body.
2. Seek further information about reproduction as needed.
3. Affirm that human development includes sexual development, which may or may not include reproduction or sexual experience.

4. Interact with all genders in respectful and appropriate ways.
5. Affirm one’s own sexual orientation and respect the sexual orientations of others.
6. Affirm one’s own gender identities and respect the gender identities of others.
7. Express love and intimacy in appropriate ways.
8. Develop and maintain meaningful relationships.
9. Avoid exploitative or manipulative relationships.
10. Make informed choices about family options and relationships.
11. Exhibit skills that enhance personal relationships.
12. Identify and live according to one’s own values.
13. Take responsibility for one’s own behavior.
14. Practice effective decision-making.
15. Develop critical-thinking skills.
16. Communicate effectively with family, peers, and romantic partners.
17. Enjoy and express one’s sexuality throughout life.
18. Express one’s sexuality in ways that are congruent with one’s values.
19. Enjoy sexual feelings without necessarily acting on them.

FoSE, an initiative created by a partnership between Advocates for Youth, Answer, and SIECUS published National Sexuality Education Standards: Core Content and Skills, K-12 in 2011 and offer the following guidelines:

**NATIONAL HEALTH EDUCATION STANDARDS**

|   |  |
|---|--|
| <b>Core Concepts<br/>CC</b>               | Standard 1 Students will comprehend concepts related to health promotion and disease prevention to enhance health.                             |
| <b>Analyzing Influences<br/>INF</b>       | Standard 2 Students will analyze the influence of family, peers, culture, media, technology and other factors on health behaviors.             |
| <b>Accessing Information<br/>AI</b>       | Standard 3 Students will demonstrate the ability to access valid information and products and services to enhance health.                      |
| <b>Interpersonal Communication<br/>IC</b> | Standard 4 Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks. |
| <b>Decision-Making<br/>DM</b>             | Standard 5 Students will demonstrate the ability to use decision-making skills to enhance health.  |
| <b>Goal-Setting<br/>GS</b>                | Standard 6 Students will demonstrate the ability to use goal-setting skills to enhance health.   |
| <b>Self Management<br/>SM</b>             | Standard 7 Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.                      |
| <b>Advocacy<br/>ADV</b>                   | Standard 8 Students will demonstrate the ability to advocate for personal, family and community health.  |

FoSE further declared effective CSE:

1. Focuses on specific behavioral outcomes.
2. Addresses individual values and group norms that support health-enhancing behaviors.

3. Focuses on increasing personal perceptions of risk and harmfulness of engaging in specific health risk behaviors, as well as reinforcing protective factors.
4. Addresses social pressures and influences.
5. Builds personal and social competence.
6. Provides functional knowledge that is basic, accurate and directly contributes to health- promoting decisions and behaviors.
7. Uses strategies designed to personalize information and engage students.
8. Provides age-and developmentally appropriate information, learning strategies, teaching methods and materials.
9. Incorporates learning strategies, teaching methods and materials that are culturally inclusive.
10. Provides adequate time for instruction and learning.
11. Provides opportunities to reinforce skills and positive health behaviors.
12. Provides opportunities to make connections with other influential persons.
13. Includes teacher information and plan for professional development and training to enhance effectiveness of instruction and student learning.

All this information above is to lay the foundation of what the leading organizations in sex education are trying to accomplish and the ways in which they have done so most effectively.

### **Communities of Practice**

Foundationally, what people have in common is what makes them a community.

Underwood and Frey explain how community and communication have shared linguistic roots (2007). “Co” suggests mutuality and “unity” suggests coming together. In concert community can be thought of as “communication unity” (2007). Additionally, beyond shared linguistic roots, community and communication are connected and intertwined. Communication can define, enact, and create communities. Community can inform, inspire, and evolve communication. Rhetoricians examine the relationship tracing back to Aristotle who viewed speech as a means by which private households were brought into a public community that both revealed and created commonality. Communities can offer a sense of belonging, opportunities for social bonding, sense-making, safety and protection, regulation of social order through institutional patterns of appropriateness, and sharing knowledge.

Communities of practice (CoPs) were first conceptualized by educational and social learning theorist Dr. Etienne Wenger and cognitive anthropologist Dr. Jean Lave. They coined the term in 1991 while studying learning theory between apprentices and their masters. During his research, it became clear to Wenger, that the apprentice's learning did not solely occur between the apprentice and master. Rather, it revealed "a more complex set of social relationships through which learning [took] place mostly with journeymen and more advanced apprentices." (Wenger-Trayner & Wenger-Trayner, 2015, p.4). "Communities of practice are groups of people who share a concern or a passion for something they do and learn how to do it better as they interact regularly" (Wenger-Trayner & Wenger-Trayner, 2015, p.1). More specifically, "communities of practice are formed by people who engage in a process of collective learning in a shared domain of human endeavor" (p.1).

CoPs is not just a label for certain types of groups, Iverson explains CoPs are "An exemplar of the social aspects of learning." (2011, p. 35). Zorn and Taylor further explain that using a communication lens and CoP as a framework allows scholars to examine how social learning happens through social and communicative interactions (2004). Some scholars critique CoPs stating that they are "vague and useless concepts" Iverson claims that this critique has merit when using CoPs to look at the entity of a group. He asserts that CoP theory comes in handy when examining the enactment of knowledge sharing through the practitioners (community members) communicative practices. Iverson emphasizes the importance of examining the larger organizational processes such as identification and belonging which foster an environment, both internal and external, within which learning (knowledge sharing) can better occur. According to Kuhn and Jackson, communicative processes in knowledge enactment reveal how knowledge is accomplished, essentially giving scholars language to describe the

“how” of CoPs (2008). It also serves as a connector between organizational knowledge and organizational processes (Kuhn & Jackson, 2008). Further, Iverson and McPhee contend that CoP theory is a good communication lens and reveals how a community is distinct from an organization, (2002, 2008).

Fundamentally, CoP theory is a learning theory founded on the idea that knowledge is not kept by one person or organization, rather it lives in a “constellation of CoPs each taking care of a specific aspect to the competence that the organization needs.” (Wenger-Trayner & Wenger-Trayner, 2015, p.4). CoP practitioners can address and contemplate tacit, dynamic, and or explicit aspects of knowledge creation and sharing. They are not limited by structure or formality because CoPs can cross organizational and geographic boundaries. CoPs have historically not been a good fit for traditional organizational hierarchies due to its more flexible characteristics.

CoPs do not necessarily have to be intentionally formed, and oftentimes they are not. Three elements make up the defining characteristics of a CoP: a shared domain, community, and a practice. A domain of knowledge creates common ground, inspires members to participate, guides their learning and gives meaning to their actions. The notion of a community creates the social fabric for that learning. A strong community fosters interaction and encourages a willingness to share ideas. While the domain provides the general area of interest for the community, the practice is the specific focus around which the community develops, shares and maintains its core of knowledge. Recent writing on CoPs these three fundamental characteristics are defined as a group of people who negotiate a shared enterprise (Domain), participate in mutual engagement (Community), and have a shared repertoire (Practice) (Iverson & McPhee, 2002, 2008). Each is explained below with examples of real-life CoPs to show what these characteristics look like in application.

**Domain/Negotiation of a joint enterprise.** Domain is the overarching topic of interest that brings people together. Think of the domain as an umbrella under which people who share a common practice or interest exist. Existing in the domain is not enough to be considered a CoP, which will be detailed further below. Through a communication lens, the domain looks like the negotiation of a shared enterprise. CoPs have their own identities which are created and defined by a shared domain of interest and the negotiation of that joint enterprise. Within the domain, membership is important and “implies commitment to the domain and therefore, a shared competence that distinguishes members from other people” (Wenger-Trayner & Wenger-Trayner, 2015, p.1). Sharing a domain does not necessitate that members have expertise (Iverson & McPhee, 2002, 2008). It does not mean they have outsider recognition, nor understanding, nor is their community of practice guaranteed being seen as valuable to outsiders. “Negotiation of the joint enterprise is the communicative enactment of the community through practices.” (Iverson, 2011, p.41).

**Community/Mutual engagement.** What makes a group of people a community is their mutual engagement. Community can be enacted in many ways including but not limited to sharing joint activities and discussions, helping each other solve shared problems, and sharing and negotiating information about their domain (Wenger-Trayner & Wenger-Trayner, 2015). Community members do not have to have “things in common” in terms of personality or identity. The practice can be, and often is, done alone. What makes a CoP unique is that it requires members to come together to collaborate, share information, etcetera, in order to be considered part of a community of practice.

**Practice/Shared repertoire.** A shared practice or shared repertoire is akin to having a similar set of skills and knowledge as others who are also part of the practice. CoP members

share a practice and are often identified as “practitioners”. Together they hold a practice-specific repertoire of resources, experiences, stories, tools, and ways to address recurring problems. Communication scholars choosing to further specify “practice” to “repertoire” is due in part by the emphasis on communication and its constitutive nature. One way to understand being part of a CoP is by looking at what might be a barrier to one’s membership. Have you ever tried something new and felt like you were hearing a different language? This was the case for me when I first started rock climbing. Existing members of the climbing community of practice had a shared repertoire. Repertoire is not limited to words, but applies as well to shared knowledge, culture, and behavior. “Send it!” is a common phrase in climbing meaning, “Go for it!” I did not know this term nor what to do when my belayer shouted it to me as I was trying to finish a challenging route. Rather than going online and searching for the definition of “Send it” I learned through social interaction and observation. I watched and listened to current community members and was able to learn, little by little, the practice and its shared repertoire. A shared repertoire allows for knowledge negotiation and meaning making.

CoPs can connect through similar professions, skills, vocations, or dissimilar skills in order to collaborate and generate new knowledge through addressing a common and complex problem. The things that tie a CoP together are varied, but they are always connected by their shared practice. Knowledge can be shared explicitly as well as working alongside members and observing them practice. Mutual engagement is key to making a CoP and it looks different from one community to the next. Mutual engagement paves the way for belonging. “Thus, mutual engagement can be encouraged, facilitated, and directed in attempt to ‘manage’ the way knowledge is communicatively enacted as well as impact the nature of the CoP” (Iverson, 2011, p.40).

Essentially, all three shared elements: domain, community, and practice, must be present and through the act of developing each part parallel to one another a CoP is built. Development happens through activities and communication. The following is a table of examples of activities and their communicative manifestations that develop a CoP from original CoP scholar Wenger (2015, p.3):

|   |  |
|---|--|
| <i>Problem solving</i>                        | "Can we work on this design and brainstorm some ideas; I'm stuck."   |
| <i>Requests for information</i>               | "Where can I find the code to connect to the server?"  |
| <i>Seeking experience</i>                     | "Has anyone dealt with a customer in this situation?"  |
| <i>Reusing assets</i>                         | "I have a proposal for a local area network I wrote for a client last year. I can send it to you and you can easily tweak it for this new client." |
| <i>Coordination and synergy</i>               | "Can we combine our purchases of solvent to achieve bulk discounts?"   |
| <i>Building an argument</i>                   | "How do people in other countries do this? Armed with this information it will be easier to convince my Ministry to make some changes."            |
| <i>Growing confidence</i>                     | "Before I do it, I'll run it through my community first to see what they think."   |
| <i>Discussing developments</i>                | "What do you think of the new CAD system? Does it really help?"  |
| <i>Documenting projects</i>                   | "We have faced this problem five times now. Let us write it down once and for all."  |
| <i>Visits</i>                                 | "Can we come and see your after-school program? We need to establish one in our city."   |
| <i>Mapping knowledge and identifying gaps</i> | "Who knows what, and what are we missing? What other groups should we connect with?"   |

The creation and development of a CoP involves many classroom-applicable activities that are easily translated into curriculum and learning outcomes. "Negotiation of a joint enterprise constitutes a collective response to external forces, such as staff or situational characteristics, that defines the nature and enactment of the enterprise. In addition, we must remember the orientation of a CoP toward knowledge learning, and mastery of the practice:



negotiation constitutes mastery and makes members knowers, and thus creators, of the enterprise." (Iverson & McPhee, 2008,.190).

### **CoPs in Education**

Many studies explore online CoPs in education (Kirschner & Lai, 2007; Hartnell-Young, E., 2006; Hung & Yuen, 2010); however, for the purpose of this project I will be focusing on in-person, communities of practice, specifically, of students interacting face-to-face in the classroom. Due to the gap in literature, there is room to enhance the efficacy of the CoP by incorporating online elements to curriculum where in-person interaction is the foundation, such as a sex education class.

Additionally, various scholars, including Dr. Etienne Wenger, have focused on how to foster CoPs in professional environments such as educator professional development groups, or corporate learning groups. For example, the organization Future Ready Schools (FRS) is helping to create online spaces that connect groups of individuals within an educational network to essentially create CoPs. FRS strives to “maximize digital learning opportunities and help school districts move quickly toward preparing students for success in college, a career, and citizenship.” (Dossin, L. (FRS), 2019). This organization has many school districts that use their services including the Baltimore County Public Schools (BCPS) where Future Ready Librarians (FRL) implemented a CoP model for its secondary-level library media specialists. As they continued their program asserted, “...exposure to other talented and passionate LMSs provides ways to transform instructional practice and professional growth, BCPS upholds this model as evidence [and] found the CoP model to be a perfect way to deepen the district’s work and build a sense of community.” (Dossin, L. (FRS), 2017).

As stated, CoPs have value in many different parts of the education system. This project narrows further and reviews what is known about CoPs specifically for students in the classroom. Norton (2001) used CoP theory as a lens to examine non-participation in second language classrooms focusing on marginalized community members and belonging. Haneda (2006) reviews the many studies that followed examining communities of practice in second-language classrooms mainly focusing on the role of legitimate participation and peripheral participation and belonging. Haneda (2006) reminded readers that there are so many variables in the classroom that this type of application of CoP theory requires further unpacking in order to be a useful theoretical framework. Iverson (2013) agrees with this assertion and the difference between using CoP as a measuring tool to judge if something is or is not a CoP is rarely successful.

Much of the literature of applied CoP in the classroom focuses on the act of participation and sense of belonging, including addressing barriers to participation that may correlate with feeling less belonging to the CoP of the classroom. Botha and Kourkoutas (2015) argued that adopting a CoP as an inclusive model supports often marginalized students, in this case students with social, emotional, and behavioral difficulties (SEBD). Brown (2007) found that higher levels of participation in the classroom encouraged the construction of new social positions within the CoP.

Brown and Campione (1990) have pioneered the creation of “communities of learners.” They use two teaching methods based in CoP theory to create this classroom environment: reciprocal teaching, and the jigsaw method. Reciprocal teaching involves students taking on the role of teacher and the teacher (temporarily) taking on the role of student. Land, Jonassen, and Jonassen explain that during this process students “appropriate their practices by watching more

experienced peers and teachers model the learning process.” (2014, p.49). The jigsaw method takes a different approach and aims to get students working collaboratively and developing expertise in specific components of a larger task or concept that are implemented collectively.

## **Conclusion**

In sum, the evaluation and subsequent recommendations will use communication as the focal point and CoP theory as a mode of social learning to help educators achieve the guidelines set forth by leading sex education organizations (CDC, SIECUS, FoSE). Altogether, communicating about sex and sexual health is a vital and lifelong responsibility. By teaching students how to communicate and negotiate this information and their experiences as members of a CoP early on will positively serve them, individually and socially, for the rest of their lives.

## Methods

This project uses a qualitative content evaluation approach to look at the “Foundations - Core Skills Training for Sex Education” using Wenger-Traynor’s list of activities that communities use to develop their practice and guidelines from leading sex education organizations (CDC, SIECUS, FoSE). The guidelines agree that focusing on communication, negotiation, goal setting, and decision-making are crucial to effectively teaching sex education. These guidelines combined with CoP theory guide this evaluation. Evaluating a training would be most effective if one could both review the curriculum, handouts, presentation materials, and then attend the training and collect observation and field notes. Unfortunately, there were no trainings available to attend during the execution of the project; however, through a partnership with the Director of Learning at Planned Parenthood of Montana (PPMT) Kate Nessian MHEd, I was able to collect the relevant materials and information needed to complete the evaluation. The Director of Learning at PPMT is a certified trainer of The Foundations Curriculum and during an in-person meeting shared the curriculum, handouts, activity descriptions with learning goals, and PowerPoint presentation while explaining how it works when used in the field, during which I took notes.

Due to the training’s comprehensive nature, only some of the materials specifically addressed social learning techniques. The most applicable portions of the training that directly addressed the social learning aspects of the training were evaluated in detail and given relevant recommendations. The three most applicable portions identified were: Introduction and Climate Building, Defining Sex Education and Exploring Policy, and The Experiential Learning Cycle.

## **Materials**

Materials were collected during a meeting with local CSE expert and Foundations Training leader, Director of Learning of Planned Parenthood of Montana, Kate Nesson MHEd. During this meeting, I collected the applicable materials for analysis as well as talked through them all discussing what the activities look like when presented in real time. I gathered a variety of materials comprising over 60 pages of curriculum, in addition to handouts and associated PowerPoint slides, as well as activity descriptions with learning goals.

## **Training Description**

The Foundations Training, being evaluated, was created by two organizations: Answer, and Cardea Services. Answer, a national organization based at Rutgers University, provided the sexual health content. For youth, Answers aims to provide access to age-appropriate and medically-accurate information about sexuality directly, and without interference. Additionally, for sex educators they provide the latest resources, most current information and best practices for reaching and teaching the youth in their lives. Cardea, an organization that specializes in organizational content, added their expertise in developing and delivering effective trainings (Foundations, 2016; Cardea Services, 2020). The Foundations Training, focused on comprehensive sex education, has been adopted by many other organizations including Planned Parenthood of Montana (PPMT).

The core of the Foundations Training focuses on developing comprehensive-based skills for sex educators and practitioners. The training is described stating,

“This one or two-day training will cover the foundational skills all educators need in order to effectively facilitate sex education. Core skills training is ideal for newer sexuality educators or more experienced teachers who want to enhance their skills and brush up on best practices. After completing this training, teachers will have the confidence to deliver sex education lessons, lead sensitive discussions, and respond to student questions with ease” (Foundations, 2016).

The short one-day training covers essential skills needed for facilitating sex education. These skills include climate building in the classroom, understanding state and local sex education policies, pedagogical approaches for experiential learning, values clarification, managing personal disclosure, and handling difficult questions and harassing comments. Optional half-day modules for a second day of training include cultural competency, LGBTQ inclusion, trauma-informed approaches and facilitation skills for common sex education strategies.

The Foundations Training was created based on best practice literature from adult learning and professional development. The training incorporates elements from core skills training designs from Answer, Cardea and numerous state-based organizations (Foundations, 2016).

“The training was piloted in California, Mississippi and New Jersey and evaluated using pre- and post-training surveys and three-month follow-up assessments. Immediately after the training, participants demonstrated increased knowledge, comfort discussing sex education topics and skill acquisition. Three months after attending the training, participants reported high levels of satisfaction with the training, high levels of implementation of strategies and skills learned during the training, and improved confidence in facilitating sex education” (Foundations, 2016).

The Foundations Training has proved worthy of evaluation when looking at better sex education for both practitioners and students.

## **Measure**

Remembering the table on page 19, Wenger-Trayner (2015) lists activities that communities engage in to develop their practice. These activities are used as a set of codes to evaluate the Foundations Training materials. In addition to the results of the evaluation, the subsequent recommendations will be grounded in the most effective curriculum available, and its related guidelines by leading organizations including the CDC, SIECUS, and FoSE. Goals articulated by these leaders in CSE are present in, and consistent with, CoP theory and concepts

of social learning. The CoP activities list framework is inclusive of these goals and by using it as a coding framework results in an evaluation and recommendations that aim to meet both current CSE and CoP goals.

### **Evaluation Procedure**

After gathering the Foundations Training materials, I first conducted qualitative closed-coding using the activities from Wenger-Trayner's (2015) list as a coding guide. Next, materials were evaluated through a process of qualitative analysis using Lindlof & Taylor (2012) as a framework. Once I entered the data coding process, I used CoP literature and guidelines for CSE. These frameworks serve as a foundation to examine how the Foundations Training is fostering the development of CoP in sex education for subsequent recommendations.

## Findings

Naturally, some of the eleven CoP activities from Wenger-Trayner (2015) were more present than others. The four CoP activities that were found to be most prevalent in the Foundations Training were: seeking experience, request for information, mapping knowledge and identifying gaps, and growing confidence.

During the “Introduction and Climate Building” section of the training, information was requested to orient practitioners and create clear group expectations. During the “Defining Sex Education and Exploring Policy” section, the group was asked to brainstorm key aspects of sex education. Together the group mapped their current knowledge, identified gaps, and built confidence around the topic and definition of sex education. The “The Experiential Learning Cycle” portion of the training focused on mapping knowledge through community member experiences to create a foundation for knowledge and problem solving to evolve. This section focused on future application of knowledge and continued to address gaps, bolstering confidence.

The remaining seven CoP activities were not found or were significantly less prevalent in the training: coordination and synergy, discussing developments, building an argument, visits, documenting projects, problem solving, and reusing assets.

While not all CoP activities were present in the evaluated materials, there is a possibility that other parts of the training or in-person interactions might foster different CoP activities unseen through the collected materials alone. Because CoP activities are grounded in social learning, without being able to witness the social interactions that happen outside of the planned training activities, it is likely that more CoP activities are present or emphasized depending on the participants in the training, among myriad influences.



## Evaluation and Recommendations

### Introduction and Climate Building

The *Introduction and Climate Building* section shows participants how they can create safe and supportive learning environments for teaching sex education. The program explains how instructors can set up their classroom and create an environment that is geared towards successful learning. The training starts out with a “preparation” section that lays out how the room should be set up and what tools to use when creating a variety of group activities. The section also explains how the training, for instructors themselves, will proceed and welcomes them by laying a common foundation amongst practitioners. Regarding CoPs, this section of the training focuses on the shared domain of sex education instruction and allows practitioners to negotiate their shared enterprise using common language.

This section of the training succeeds in initiating a culture of mutual engagement through a variety of strategies which aim to build avenues of connection between practitioners in order to get to a point of coordination and synergy. For example, the training recommends setting up chairs in a U-shape or circle. This section also succeeds in its attempt to welcome practitioners and create a sense of safety, community, and belonging. Part of the welcome includes a description of the training and its goals alongside an explanation of its efficacy and credibility. This aims to improve the reception of the training and begins to highlight the connecting element between practitioners, reminding and orienting them as a community of sexuality educators with a shared domain. Finally, they invite practitioners to introduce themselves which creates space for sharing, clarification, and the negotiation of the shared knowledge.

The introduction section previews the training, facilitates introductions, and is a time to develop rapport and create an inclusive and safe environment. The Foundations Training does so

through a few activities: *Introductions*, *Group Contract*, and *Expectations*. While those activities may be effective in accomplishing what they intended functionally, they can be strengthened in order to create opportunities for practitioners to mutually engage in behaviors responsible for creating and developing a CoP. The training suggests an activity where a participants pair up with others they are unfamiliar with to ask each other a set of simple questions and jot down the answers so they can introduce their partner to the group. This type of activity has the potential to help practitioners build confidence through requesting information but leaves room for improvement. One recommendation to enhance this activity would be to select a set of CoP-specific questions to ask one another. For example, in this specific training educators could start by asking one another what they thought a CoP was and about a time when they felt they were part of a CoP, or perhaps when they saw a CoP form in their classroom. Questions such as these would help to establish a rapport between members while simultaneously getting them in the mindset to discuss and strategize CoPs during the training and finally, having them practice some CoP building behaviors such as requests for information. Additionally, increasing the length of this activity would be beneficial for practitioners to have a little more time and go more in depth with the questions that will aim to orient students to one another within the shared domain of sex education.

After introductions the practitioners are asked to complete a few writing-based activities where they discuss and agree upon a *Group Contract* and *Expectations*. Using CoP as a lens there is a lot to praise about the *Group Contract* activity due to its emphasis on group-lead communication including, coordination and collaboration, negotiation, and goal setting. As explained, negotiation of a shared enterprise is definitive of CoPs, therefore, getting comfortable negotiating the shared topic with community members is essential to developing the CoP and

providing opportunities for practitioners to interact and improve their practice. Unfortunately, the *Expectations* section lacks many of these crucial group elements needed when hoping to establish and develop a CoP. From the perspective of a trainer discussing the expectations and outcomes of the training, while framed as a group activity, the expectations are predetermined. Understandably, trainers will guide practitioners, if only for the sake of time, clarity, and prepared materials which naturally leads to a more prescribed set of expectations. In the classroom, however, I argue that setting expectations could be utilized as a larger group activity to practice communication, negotiation, problem solving, and goal setting. This also informs the instructor of what state of domain the students share, which will likely be different from their own perspective. Student-shared information could be incredibly helpful to educators so they can tailor their activities, curriculum, and expectations where it is needed most.

### **Defining Sex Education and Exploring Policy**

The next section of the training, *Defining Sex Education & Exploring Policy* (see Appendix B) focuses on laying a foundation and building context around the topic of sex education in the United States. This section builds a general understanding of comprehensive sex education and why state and local policies are important to understand. Defining and redefining sex education is a key part of this training. Practitioners are asked to explore their own knowledge, identify gaps, and map their understanding of comprehensive sex education. With CoPs in mind, this section of the training highlights the creation of a shared repertoire and negotiation of current knowledge and experiences to build a shared definition and understanding.

During this section of the training, practitioners are asked to brainstorm what they consider to be key components of sex education. As a group they are asked to critique different

definitions of sex education, finally landing on a comprehensive definition that has been articulated prior by experts in the field. When looking at this training through the lens of CoP theory, this section seeks to map and identify knowledge gaps among practitioners but fails to structure the practice in a way that allows practitioners the space, time, and negotiating power needed to solidify and own their shared practice.

Negotiating and criticizing a definition as a group showcases many positive attributes present in CoPs and models comprehensive sex education guidelines of communication and negotiation. The facilitator and the training itself pull on shared knowledge that exists within the domain of sex education when offering different versions of definitions. When understanding a CoP, it is important to remember that shared knowledge often extends past the classroom walls and involves stakeholders such as experts, leaders, and policy makers. In this way, the training does a good job of fostering the evaluation of a CoP as practitioners are asked to pull on expert knowledge to understand a growing definition of sex education. With an open floor for discussion, communication and negotiation tactics are used to bolster knowledge and build a shared repertoire that the group can use together, moving forward in their practice. Shared understandings, especially of commonly used definitions, become critical to the development and maintenance of CoPs.

When looking at this section as a whole, there are still negotiation and decision-making gaps worth addressing. Improving strategies could greatly benefit the classroom student community. Specifically, while the format of this section might be appropriate for educators, it is less transferrable to students. For students, criticizing definitions and sex-related topics without proper introductions to the community might be unsuccessful due to differing perspectives and levels of knowledge. To better foster that, more time and space should be given for students to

connect prior knowledge and past experiences to what is being discussed in the present. Since sex is a sensitive topic for many, providing them an anonymous approach to map knowledge and identify gaps could help them define sex education more effectively. I pose that students anonymously send their definitions of sex education via an online format to the instructor before classroom time. Instructors could compile ideas, noting which elements of the collaborative definition were repeated and at what frequency. This gives both the student and instructor more time to privately map knowledge before negotiation happens in a group setting. As homework or as a self-reflection activity, students could reflect on and write about the group definition, negotiating it, allowing space and time for the students to practice and own their place in the community within their new shared domain.

Making decisions about knowledge is another key aspect of CoP development and can be fostered within a classroom setting. Once students have started defining sex education, a living, visible definition can live somewhere in the classroom. The instructor can then use it as a tool to continually refocus students, engaging them in their own shared repertoire and domain. Students should be encouraged to constantly contest this living definition as they learn new information about new topics. Over the course of the semester, they could revise the definition as they saw fit. A visual representation of learning serves as a point of reference that keeps the domain alive and the community practicing knowledge development. This practice also keeps the class coming back to CoP skills which can grow confidence. As the definition evolves, it will enhance investment and belonging within the shared domain of sex education. This mutual engagement of a definition has the potential to boost negotiation, decision-making, and ultimately ownership of new knowledge.

## The Experiential Learning Cycle

Another social learning theory similar to CoP theory is David A. Kolb's Experiential Learning Theory (ELT). ELT, developed in 1984 takes a more holistic approach than cognitive or behavioral learning theories by emphasizing the influences of emotions, environment, experiences, including cognition. Kolb defines learning as, "the process whereby knowledge is created through the transformation of experience. Knowledge results from the combinations of grasping and transforming the experience" (Kolb, 1984). ELT and CoP theory differ when it comes to how information is gained. ELT focuses on the psychological elements and the individual experience of learning while CoP theory offers insight into how organizational members impact and enhance learning through practices that further develop shared knowledge. ELT has two parts: The Experiential Learning Cycle, and a set of four Learning Styles. Kolb argues that learning happens through the four stages of the Learning Cycle: concrete learning, reflective observation, abstract conceptualization, and active experimentation. In this training they have simplified the four stages into: *Experience or Activity, What?, So what?, and Now what?*

While this part of the training utilizes Kolb's (1984), Experiential Learning Theory as a framework, it unintentionally fosters the development of a CoP focused on learning. The *What* section of the training encourages practitioners to map current knowledge building a foundation which establishes a common domain and begins to reveal a shared repertoire. The *So What?* section of the training pulls on CoP strategies focused on problem solving while continuing to map knowledge and experiences of individuals. These tools can be used to create space for negotiation of knowledge to blossom once the practitioner understands how the topics can apply to their life. The *Now What?* section of the training focuses on future application of knowledge

and builds on CoP theory through mutual engagement. Practitioners are asked to negotiate their new knowledge and explain how and when they can apply it outside the training. While this training is not currently CoP focused, it is already reaching multiple CoP development goals worth highlighting.

Furthermore, activities in this training could be effective when used with a classroom of sex education students. First, the training successfully highlights the importance of learner-focused education and frames learning as a process that the learner goes through rather than a delivery of knowledge or skills from the instructor or a performance of knowledge by the student. Questions in the training such as “What images/words/scenes stood out to you?” or “What feelings did you have during the exercise?” could be used to probe students to connect their personal experiences to the curriculum and therefore, domain. To enhance the creation of a CoP, teachers could have students reflect on answers individually first and then have them share as a group. When students process knowledge in these ways, they could better understand both what the domain and dynamics of the CoP are, and how they see and fit into it. With this as the foundation, students could reveal and develop their shared repertoire as they find words to express how they are feeling and experiencing the knowledge. By allowing students to express questions and ideas that inspire further conversation, they may become empowered by the knowledge and can take responsibility over their education.

Secondly, the training encourages that students make connections between learned experiences and the practice of sex education, further clarifying the domain. Questions like, “Has this experience affected the way you view the topic?” could engage students to understand their growing knowledge of the new domain of sex education. Students could pair with a peer and discuss topics through the act of reciprocal teaching to both increase participation and practice

sharing knowledge. By explaining new information starting from the students' perspective, knowledge will naturally resonate more with them as they tie old concepts to new ideas. As they are developing a CoP, students could pull on community knowledge and language to more effectively discuss sex education. This comes with time, but the training models how to allow students to find their own links between past experiences and new knowledge well. In this way, students will be encouraged to both create and negotiate knowledge of the CoP through communication.

### **Overview and Conclusion**

With the values of CoP theory as a learning method in mind, the following are overall recommendations to improve this training as it would be applied to a classroom of future students. I recommend educators foster the following: practice creating a CoP in the classroom; increase participation and offer many avenues to do so; understanding that knowledge is negotiated, kept by many, and is a collaborative experience of social and individual efforts. Establishing a CoP in the classroom would add complexity, eliminate exclusive boundaries to knowledge, foster a sense of belonging and inclusion, and make learning more accessible for marginalized students.

To foster CoP in a classroom, students and instructors alike must first experience the practice of knowledge sharing and creating in a community setting. Creating space to develop a CoP in the classroom would allow students to habituate the cycle of community learning by asking questions to their community with more skill, grace, and respect for others' experiences leaving them with a more holistic understanding of the domain. Ultimately, giving students the chance to practice these CoP skills in the classroom would encourage critically participating in future knowledge development even when they leave the classroom. CoP theory, used as a



foundation for sex education classrooms, would foster the investment into the community they are already a part of and allow for the practitioner to reap the benefits of membership within the CoP. Using CoPs as a model for sex education moves the focus of learning back to the students. As they get older and have more experiences that lead to further questions, they will be better equipped to find good information, make sense of it for themselves and make better decisions more aligned with their personal understanding and values.

As Wenger (2015) explained, encouraging high levels of participation, especially in a collective group way, would help to establish a CoP in the classroom. To achieve this, I recommend employing strategies that could provide many collective and multi-modal opportunities to practice the behaviors and skills necessary to create and be part of a sex education classroom CoP. Through these high-participation methods students could understand and handle personal topics, such as sex, more easily. Improving social skills such as communication, problem-solving, negotiation, decision making, teamwork, self-confidence, and ability to accept and learn from criticism may lead to other latent positive effects such as making topics less taboo. With less resistance towards the materials, students would be more likely to discuss and negotiate information interpersonally, and in the public sphere.

Knowledge continually ebbs and flows because it is owned and shared by many individuals and organizations. Seeing knowledge as an evolving site of negotiation, has the power to change how educators and students share knowledge. Knowledge is a living “constellation of CoPs each taking care of a specific aspect to the competence that the organization needs” (Wenger, 2015, p.4). Understanding this may take pressure off students who feel like they need to “know it all” before they can participate. It will also train them to look to and call upon their fellow CoP members if they lack some knowledge regarding the practice.

Being a part of a CoP eliminates exclusive boundaries and increases access to information, thus empowering students and making them proprietors of knowledge. This transfer of power allows students to take responsibility for the knowledge themselves, making them more adept and prepared to handle misinformation in and outside of the classroom. Furthermore, empowerment of knowledge sharing allows diversity and growth within the CoP to thrive. As each student seeks information from the shared domain based on what is applicable and important to them, they will find more specialized information. For example, a queer student may have questions that a heterosexual student would not consider. Regardless of larger distinctions such as sexual orientation, all children develop at different rates which will naturally spark different questions over time.

Even though CoPs are community-focused, individuals still need to understand their experiences and how they feel about the topic, so they are able to effectively participate in group discussions and negotiations. Students would likely benefit from engaging in self-reflection to identify and further understand their own gaps in knowledge, recurring problems, and questions. This would allow them the opportunity to find their place within the community. Taking self-reflection time could help students to understand how to improve and better understand themselves as practitioners. In a cyclic way, after reflection, students can practice bringing their thoughts to the community for further engagement with specific topics in mind. Using anonymous methods for participation such as a comment/question box or confidential journaling would allow students to safely bring reflections to a group conversation until they are ready for open floor discussion. Because self-reflection and self-expression are practices in and of themselves, giving students many different avenues to explore that in a safe way would likely support their overall understanding of sex education.

All in all, it is important to remember that one's understanding and use of sex education is not contained to the classroom. It is a lifelong evolving experience for both the individual and their community, which continually influence one another. It is useful to consider that sex education becomes a larger part of a life-long communication process about sex. For that reason, CoP is a useful lens to understand that learning is a truly social process. Focusing on social skills, specifically communication skill building such as negotiation, problem solving, decision making, and goal setting, will improve students' experience and confidence in the topic of sexual health developing and empowering their relationship with the information. Overall, approaching sex education using CoP theory could provide an innovative method allowing students to better understand sexual health, for themselves and their community, while effectively accomplishing comprehensive sex education goals.

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