

## Using Credible Statements to Promote Women's Health in Education

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### Abstract

Preliminary results from a school-based peer education program on sexual health for high school students are discussed in this article. The young people's responses to the participants are described. Qualitative data were gathered over the course of a semester in two waves of participants (N 14 4 schools) through participant observations of program activities, in-depth interviews with key stakeholders, focus groups with youth participants (N 14 62 peer educators and 60 ninth graders), and brief surveys of youth participants (N 14 678). Information assortment and examination were directed by grounded hypothesis approach. The Adolescent Counteraction Training System (Youngster Enthusiasm) was imitated in secondary schools in North Carolina while keeping up with model loyalty. All of the program's "inputs" and five fundamental model components were utilized. The main change that was made was putting the entire program into action. Utilizing the same amount of instructional time, but only for half of the school year as opposed to the entire year.

**Keywords:** Health; Training system; sexual health; STDs

### Introduction

The young people who took part in the event gave it good marks because they thought the information they learned about sexual health was new and important to them in the long run. They also thought they learned it better from their peers than from professors in a traditional health class [1]. The majority of participants claimed that the training had improved their sexual and social well-being in a number of ways. Teen PEP developers were able to successfully modify and replicate it in North Carolina due to the demand for teenage sexual health education services and the lack of programs in many locations [2]. and as a result of risk factors such as the high prevalence of STDs like AIDS and the human immunodeficiency virus among young people between the ages of 15 and 19. Numerous aspects of social and sexual health improved, according to youth [3].

Does peer pressure affect teens' opinions about sexual behavior? Teens frequently believe that most of their friends engage in sexual activity. Redirecting peer pressure to promote healthy and informed sexuality choices through a peer education model has the potential to be more effective than conventional adult-delivered sexual health education [4]; however, there are risks involved, requiring careful planning and training of peer educators. The following section examines how young people respond to messages about sexual health from older peers as part of the Teen Prevention Education Program (Teen PEP) that is carried out in schools in North Carolina [5].

### Result

Teen PEP is currently being implemented in North Carolina as a research and demonstration initiative funded by the Office of Adolescent Health's Teen Pregnancy Prevention (TPP) program. Part of the purpose of this grant is to investigate potential strategies for reducing teen pregnancy and the risky behaviors that go along with it. Teen PEP is one of only three of the 19 programs funded by this competition that have a peer education component. The authority execution review [6], which was funded by the TPP award, is utilized in this paper to examine early discoveries, like the benefits of the program as seen by 10th grade studio members in the initial two companions of the review. Teen PEP was developed in New Jersey by the Center for Supportive Schools (CSS) and HiTOPS Adolescent Health and Education Center (HiTOPS2) [7].

### Discussion

The New Jersey Department of Health and are utilized in fifty schools, primarily urban and suburban. The program was replicated in North Carolina, primarily in rural towns, as part of the TPP, with a few adjustments to account for structural factors<sup>3</sup> that had no effect on the basic program logic model [8]. Teen PEP is implemented through the following three steps: Stakeholders and program advisors are assembled and trained as a team; A group of 11- and 12-year-old peer educators is chosen, recruited, and trained; furthermore, a gathering of 10th graders participates in studios on sexual wellbeing drove by peer teachers. Albeit the second and third levels are the subject of this article, it's essential to perceive what makes Youngster Enthusiasm novel: It integrates with the school day, makes use of a school's existing resources (staff, students, and space), creates a team of stakeholders dedicated to the success of implementation, uses interactive workshops with skits and small-group learning activities to positively influence younger peers' attitudes and behaviors, gives program advisors and student peer educators thorough training, and focuses heavily on sexual health. The program model is discussed in depth on the Teen PEP website, which is beyond the scope of this article.

### Conclusion

Compares the birth rates in the United States, including the state where Teen PEP was developed (and is currently being replicated), as well as in New Jersey and North Carolina. North Carolina's teen birth rates have been falling, in line with national trends, despite the fact that one participating county's rates of teen pregnancy and birth were rising prior to study participation. There was a wide range in the accessibility of sexual health resources in the participating counties,

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ranging from reasonably comprehensive programming to total lack of support for children in school. Teen PEP is a comprehensive sexual health education program offered in schools that aims to improve students' knowledge, abilities, and behaviors related to preventing unwanted pregnancies, HIV, STIs, and other health problems. Youth repeatedly stated in our study's focus groups that they did not receive information about Teen PEP. Furthermore, it expects to cultivate a climate in schools that urges youngsters to use sound judgment. Teen PEP uses a peer education approach to hold workshops for ninth-graders during the school day. In their schools, between 15 and 20 junior or senior high school students are chosen to mentor and serve as role models for younger students. A structured Teen PEP course that was developed by CSS and HiTOPS involves peer educators over the course of a semester. Two qualified adult program advisors co-facilitate it. Peer educators receive credit toward graduation requirements and a grade in the course.

By empowering positive companion pressure, expanding information about sexual medical problems, and allowing youngsters the opportunity to rehearse correspondence and different abilities that will assist with bringing down the probability of them participating in unsafe sexual ways of behaving, the program plans to foster employees and friend teachers who can assist with changing the school's environment.

## References

1. Koh D (2020) Migrant workers and COVID-19. *Occup environ med* 77(9): 634-636.
2. Holmes EA (2020) Multidisciplinary research priorities for the COVID-19 pandemic: a call for action for mental health science. *The Lancet Psychiatry* 7: 547-560.
3. Salas-Nicás S (2018) Cognitive and affective insecurity related to remaining employed and working conditions: their associations with mental and general health. *J Occup Environ Med* 60: 589- 594.
4. Ozamiz-Etxebarria N (2020) Psychological symptoms during the two stages of lockdown in response to the COVID-19 outbreak: an investigation in a sample of citizens in Northern Spain. *Front Psychol* 11: 21-16.
5. Qiu J (2020) A nationwide survey of psychological distress among Chinese people in the COVID-19 epidemic: implications and policy recommendations. *Gen Psychiatr* 33(2): 100-213.
6. Capano G (2020) Policy design and state capacity in the COVID-19 emergency in Italy: if you are not prepared for the (un) expected, you can be only what you already are. *Policy and Society* 39: 326-344.
7. Yuki KM, Fujiogi S, Koutsogiannaki (2020) COVID-19 pathophysiology: A review. *Clin Immunol* 215:108-427.
8. Fofana NK (2020) Fear and agony of the pandemic leading to stress and mental illness: An emerging crisis in the novel coronavirus (COVID-19) outbreak. *Psychiatry Res* 291:113-230.