

Adolescent Sexual Health Education Project: The Promotive Effects of Mindfulness, Relational Reflection, and Trauma-Informed Care on Psychological Empowerment

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Abstract. Depression and anxiety among adolescents have been growing rapidly in recent years, and this is especially pronounced within the LGBTQ younger people. This study is interested in how a sexual health education project (SHE project) affects adolescents' psychological empowerment and how it promotes adolescents' personal attention and emotional regulation through practices like mindfulness, relational reflection, and tension-educated care. The mindfulness part of the SHE project helps adolescents remain present in the moment, increasing understanding and rules of the emotions that arise during natural links. This encourages personal confidence, self-confidence, and a objective-oriented understanding of sexual thoughts. As part of the SHE project, relational reflection encourages adolescents to respect themselves in relation to their classmates. Teenagers are more likely to start up and share their experiences and feelings with a friendly peer group, which increases home consciousness and improves marriage development. The integration of Trauma-informed Care (TIC) into sexual health education can be used to effectively treat adolescent sexual trauma. By knowing problem signals and behaving properly to avoid re-traumatization, educators can support adolescents who have experienced physical tension in feeling secure and supported learning situations. This research emphasizes the value of integrating mindfulness, relational reflection, and trauma-informed training in sexual health education in order to enhance adolescents' psychological well-being.

Keywords: Sexual health education project, adolescent, mindfulness, relational reflection, trauma-informed care

1. Introduction

From 2012 to 2019, the onset of depression and anxiety was tremendously increasing among adolescents [1]. This issue affects both academic institutions and is typically extreme in LGBTQ youth [2]. Adolescence, and particularly significant character youth, is marked by a psychosocial crisis of constructing a consolidated sense of self essential for healthy character development. By this method, higher-worth comprehensive sexuality education can serve as a healthy component for the mental health and individual development of adolescents by facilitating better understanding, reducing stigma, and supporting social connectedness among adolescents.

Sexual health education project gives adolescents access to complete and specific bodily health information, as well as the necessary tools to create healthy sexual practices and prevent severe result [3]. The purpose of this study is to verify the methods that help adolescents control over their thoughts as part of the SHE site's investigation into psychological empowerment in adolescents. The SHE project's goal is to manage these operations by creating individual- regulation abilities, which are necessary for a healthy, youthful private development. According to reports on mindfulness and behaviour change, personal awareness and self-regulation are interconnected processes that contribute to psychological effectively- being [4]. These skills apparently been taught to adolescents to improve their ability to control their emotions. It is important because they are dealing with difficult social and sexual relationships.

Motivation of academic settings can even help in emotional regulation and personal awareness, highlighting the significant part that emotional regulation of ideas plays in the development of specific healing [5]. Through comprehensive sexuality education courses like SHE, which promote relational reflection and understanding, these problems does be created. These results correlate with those that demonstrate the significance of personal understanding and mental health in promoting mental empowerment [6].

This study clarifies that the effects of the SHE project on personal attention and emotional regulation in teenagers are operating through mechanisms that are founded on mindfulness, relational reflection, and Trauma-informed Care. All of these methods work in concert to develop psychological empowerment, which promotes healthier sexual attitudes and behaviors in adolescents.

2. Mindfulness

The SHE project's usage of mindfulness has been a vital part of increasing adolescents' mental health benefits. The existing literature underscores mindfulness as a powerful emotion regulation strategy that involves deliberate interest to the present day, something that adolescents learn and develop. Due to a full analysis of the effects of mindfulness on local well- being, mindfulness remedies usually involve paying attention to the present moment, which facilitates feeling guidelines [7]. Being aware of the present moment improves a person's ability to handle certain activities more efficiently.

Mindfulness perhaps be incorporated into sexual health education in addition to increasing adolescents' self-awareness and emotional regulation during actual sexual action. Mindfulness has been incorporated into sexual health education classes, with the large using existing ideas and methods in the field of sentiment rules.

The extended process model of emotion regulation mentioned by Gross emphasizes the stages of emotion regulation, beginning with the valuation system [8]. Education in mindfulness aids adolescents in getting these three goals more effectively in sexual health education. Mindfulness training can help adolescents become more conscious of their own emotional state so they can identify possible psychological problems in real do before through the verification and evaluation process. Next, mindfulness training can help adolescents choose the most appropriate regulation strategy based on the situation and desired benefits, such as choosing to take heavy breath when they are frightened. In order to achieve powerful experience rules during the implementation phase, mindfulness training can help adolescents in applying the legislation techniques they've chosen pragmatically in actual-world situations.

In the modeling of the emotion regulation process, attentional deployment is a key stage where mindfulness works, which refers to directing a person's attention and then influencing their

emotional response [8]. Specifically, mindfulness-based approaches have been shown to help individuals feel more comfortable and present during activities that may become more focused on thoughts during sex [9]. Through the practice of mindfulness activities, adolescents may be attuned to what they are going through in the moment the sexual act is happening, rather than letting anxiety, pain, or other damaging emotions enter and interfere. This increased knowledge not only makes the physical action more pleasurable but also enables adolescents to become more acutely aware of their physical needs and emotional boundaries.

Cognitive change is also an important part of the emotion regulation process. This is done by altering one's perception of an event and being able to change its impact on emotions [8]. Because of the SHE agency's ability to view intercourse-related activities and feelings in an objective and non-critical means, students can benefit from mindfulness training. For instance, their mindfulness exercise does help them recreate unpleasant or bad situations during sex rather than just as self- or partner-deprecation. This personal repair may reduce fear and shame from being caused by bad watches.

Furthermore, mindfulness knowledge can even aid in promoting self-esteem and confidence, which are essential building blocks for achieving positive sexual health results. By fostering a greater sense of self-awareness and emotional regulation, mindfulness may help adolescents maintain their sexual feelings with greater clarity and less anxiety [6]. This is in line with that mental health therapies that aim to boost self-esteem and minimize reliance on external validation can have a significant effect on psychological resilience and well-being [6].

Mindfulness has been associated with perspective and quality of life. For instance, Keng et al. highlight that mindfulness training is associated with improvements in depressive mood and overall quality of life. This suggests that training in mindfulness has the potential for mood regulation. Based on a declaration from the NIH, mindfulness-based treatments may help lower anxiety and depression [10]. These remedies improve the quality of life and decrease mental health symptoms. Moreover, the reduction of symptoms related to depression and anxiety through mindfulness-based approaches has been shown to facilitate better emotional regulation and resilience [11]. Overall, mindfulness methods have a beneficial effect on mental health, according to recent studies. Especially, they appear to reduce problems like depression and anxiety. Also, mindfulness enhances one's whole well-being. These benefits, cumulatively, increase a child's quality of life. Especially important can be the usage of mindfulness training in endorsing sexual health education. It encourages adolescents' greater personal authority over their physical conduct. This benefits in more satisfying and more pleasant real sexual experiences.

3. Relational reflection

The concept of relational reflection is introspection based on how people behave and think when they interact with others. This approach is crucial for understanding how social exchanges affect interpersonal understanding. Zonca et al. emphasized that cognitive reflection and other-oriented attention play a key role in strategic interactions, suggesting that reflection on social behavior can reveal levels of strategic maturity [12]. Their study found that relational reflection involves not only internal cognitive processes, but also awareness of others' perspectives during interactions.

Relational reflection is a vital part of sexual health education applications, facilitated through planned peer discussions and shared narrative exchanges. Sharing private experiences with others increases the value of personal reflection, and peer-to-peer interactions are an essential way to advance learning and encourage personal development. This coincides with the broader teaching that relational reflection is not only an exercise but is enriched through social connection. But, in a

sexual health education project, for example, when addressing sexual consent or natural restrictions, adolescents may share their views and emotions through group discussion while listening to the ideas from others. Engaging young folks in interactive and reflective learning methods is crucial in accordance with the comprehensive sexuality education advice [13]. Talking with other adolescents creates a welcoming environment where they can explain sensitive topics, which is in line with the goal of promoting health, well-being, and dignity. Another powerful way to encourage adolescents to show their biologically prone experiences and get feedback in a safe environment is peer education. Peer education is distinguished by its daily, volunteer-based find, where peers act as placement concepts and professional influencers rather than as reliable figures. In a non-critical environment, the method encourages young people to talk about problems they may prevent with adults or authority figures [14]. The lack of bureaucratic ties allows adolescents to express their emotions and experience more quickly, which is essential for addressing mental aspects of sexual health well-being.

Beyond the timely transfer of knowledge, peer-led interventions aid in the development of social and emotional competencies. Talking about sensitive topics down can help people find more self-informed and emotionally resilient [14]. In sexual health education, teens need both knowledge and emotional support to grow in healthy ways. Peer relationships play a key role here, as peers share similar experiences and communicate as equals (rather than in a teacher-student hierarchy). Peer support creates a space where teens feel safe to open up, express emotions, and understand each other. These elements are vital for effective SHE [14]. When teens share personal stories and get feedback from peers, they start to see their own behaviors and emotions through others' eyes. This pushes them to reflect more deeply on themselves. Strategic interaction training teaches adolescents to think critically and to be aware of others' ideas before responding. These skills can help them improve their communication and make more rational choices in relationships [15]. Social cognitive theory, for example, supports this idea. It suggests that paying attention to social signals and developing self-control can greatly help to change behavior [16]. So helping adolescents to think about how their behavior fits into a larger social group may lead to positive change.

Research on social cognitive correlations has shown that strategy proficiency is strongly and closely related to the process of cognitive reflection. And this process is related to an ability to adjust one's behavior based on the expected behavior of others [12]. This ability allows each individual to evaluate their responses more fully and to take other factors into account. This helps them in communication and decision making in interpersonal interactions. So, for teenagers, teaching them the right strategic interaction skills will help them to better understand situations related to sex. So, the purpose of this training is to help teens develop the ability to express their needs and limitations. This will help them make more informed choices and increase their safety. Relational reflection is important in helping adolescents to recognize their responsibilities in every relationship and to solve problems. This is similar to Erikson's theoretical perspective. The perspective emphasizes that addressing identity and role confusion is critical to adolescent development, and that developing and reinforcing identity can be accomplished by engaging in activities that involve reflecting on one's place and role in a relationship [17]. Additionally, the development of socio-emotional skills, like emotional intelligence and emotion regulation, are important for relationship reflection. Going to improve adolescents' emotional, intelligence can help them to better manage their emotions more effectively, which in turn promotes that they will have better interactions and stronger conflict resolution skills [18]. And healthy relationship dynamics are important in family relationships because it also provides a way to help adolescents learn how to manage their complex emotions [19].

Relational-reflective behaviors among adolescents are an important means of promoting mental health, which also reduces the risk of physical abuse and violence in sexual interactions. Comprehensive sexual education, especially when combined with the provision of access to sexual and reproductive health services, is important for adolescents to help them make informed decisions and develop healthy interpersonal skills [13]. One of the developmental goals for adolescents is to develop positive relationships. The American College of Obstetricians and Gynecologists believes that adult-led discussions and therapy can help adolescents learn to understand and respect relationships and reduce the incidence of sexual violence and harassment [20]. Sexual violence, child abuse, and partner violence, for example, are interpersonal traumas that are often associated with adolescents developing poor coping strategies. For these poor relationships adolescents can then use reflective skills to recognize it and develop the ability to be able to make beneficial connections. So by facilitating relationships, reflection may help adolescents to overcome these energies and develop their resilience to minimize long-term adverse effects. In summary, teaching the concept of relationship reflection in adolescent development and education can be beneficial to adolescents' mental and sexual health. It fosters healthy sexual relationships and enhances their ability to recognize and prevent uncomfortable situations. This can be effective in preventing sexual violence and abuse.

4. Trauma-informed care

Trauma-informed care (TIC) is an important approach to health and social services by increasing participants' understanding of and response to tragic experiences. TIC provides a supportive, inclusive environment to avoid secondary traumatization as much as possible [21]. This is why it is important to include trauma-informed care in sex education for adolescents, especially those who have experienced sexual trauma. Surveys show that many adolescents who have needed mental health services later realize that they didn't fully understand the experience and that it may have affected their ability to connect with schools and support systems [22]. Therefore, it is reasonable for victims and survivors to support each other in sexual education, because they themselves are the ones who know best how trauma affects them.

It is also important for educators to be able to recognize and respond appropriately to adolescents who are experiencing anxiety. Educators can use trauma-informed care to create a safe and supportive environment. This strategy helps the adolescent to feel understood and supported. It contributes to the adolescents' well-being [23]. Additionally, the use of TIC is particularly important in educational settings that serve adolescents who have experienced sexual assault, which is strongly correlated with poor mental health outcomes and poor academic performance [24]. Post-secondary institutions are also employing TIC strategies to better support students with traumatic experiences, recognizing that such support can enhance the well-being of students. Studies also showed that this support can improve student engagement and achievement [25]. Overall, it emphasizes that trauma-informed care in sexuality education is vital for understanding and addressing the unique challenges faced by adolescents who have experienced sexual violence or abuse. Educators can include TIC guidelines to improve their ability to support efforts to prevent sexual violence, promote a sense of security, and enhance these adolescents' mental and physical well-being.

5. Conclusion

This study discusses the effects of the sexual health education (SHE) project on adolescents' psychological empowerment, and focuses on the role that mindfulness, relational reflection, and

trauma-informed care play in this process. These mechanisms are vital in enhancing adolescents' self-awareness, emotional regulation, and mental well-being, thereby promoting psychological well-being of teenagers.

Mindfulness helps adolescents better deal with the emotional effects of sexual behaviors by creating a focus on the present. By integrating mindfulness into SHE project, teenagers would discover their emotions and limitations more easily, and also enhance their self-confidence and self-esteem.

Through relational reflection, adolescents express their feelings more when interacting with peers. Adolescents can express themselves openly and receive creative comments in several peer-led, non-structured activities. Consequently, relational reflection can enhance adolescent's emotional resilience by offering a supportive environment for discussing sensitive problems, and help them resolve conflicts and establish valuable relationships.

Also, SHE project combined Trauma-informed Care (TIC) to create a safe and supportive environment for adolescents. By providing educators with knowledge about recognizing signs of trauma and responding appropriately, the SHE project is effective in relieving trauma and reducing re-traumatization for teenagers.

The SHE project has been enhancing adolescents' psychological well-being through well-designed practices focusing on mindfulness, relational reflection, and trauma-informed care. This study combed through the specific practices in the SHE project, providing an overview of how SHE facilitates psychological well-being, and encouraging educators to apply this new method in various educational settings. By doing this, we can support adolescents' long-term development and mental health.

References

- [1] Fitzgerald, A., Mahon, C., Shevlin, M., Dooley, B., & Reilly, A. O. (2024). Exploring changing trends in depression and anxiety among adolescents from 2012 to 2019: Insights from My World repeated cross-sectional surveys. *Early Intervention in Psychiatry*, 1, 19.
- [2] The Trevor Project. (2022). 2022 National Survey on LGBTQ Youth Mental Health. The Trevor Project. Retrieved from <https://www.thetrevorproject.org/survey-2022/>
- [3] Pukall, C. F. (Ed.). (2020). *Human sexuality: A contemporary introduction* (3 rd ed.). Oxford University Press.
- [4] Schuman-Olivier, Z., Trombka, M., Lovas, D. A., Brewer, J. A., Vago, D. R., Gawande, R., Dunne, J. P., Lazar, S. W., Loucks, E. B., & Fulwiler, C. (2020). Mindfulness and Behavior Change. *Harvard Review of Psychiatry*, 28(6), 371–394.
- [5] Kohrt, B. A., Ottman, K., Panter-Brick, C., Konner, M., & Patel, V. (2020). Why we heal: The evolution of psychological healing and implications for global mental health. *Clinical Psychology Review*, 82.
- [6] Merino, M., Tornero-Aguilera, J. F., Rubio-Zarapuz, A., Villanueva-Tobaldo, C. V., Martín-Rodríguez, A., & Clemente-Suárez, V. J. (2024). Body Perceptions and Psychological well-being: a Review of the Impact of Social Media and Physical Measurements on self-esteem and Mental Health with a Focus on Body Image Satisfaction and Its Relationship with Cultural and Gender Factors. *Healthcare*, 12(14), 1–44.
- [7] Keng, S. L., Smoski, M. J., & Robins, C. J. (2011). Effects of Mindfulness on Psychological health: a Review of Empirical Studies. *Clinical Psychology Review*, 31(6), 1041–1056.
- [8] Gross, J. J. (2015). Emotion regulation: Current status and future prospects. *Psychological Inquiry*, 26(1), 1–26.
- [9] Figg, B. (2018) Substance Abuse and Mental Health Services Administration. *Health Care on the Internet*, 22(3):253-262.
- [10] Wein, H. (2021). Mindfulness for Your Health. Retrieved from <https://newsinhealth.nih.gov/2021/06/mindfulness-your-health>
- [11] Gkintoni, E., Vassilopoulos, S. P., & Nikolaou, G. (2025). Mindfulness-Based Cognitive Therapy in Clinical Practice: A Systematic Review of Neurocognitive Outcomes and Applications for Mental Health and Well-Being. *Journal of Clinical Medicine*, 14(5), 1703–1703.

- [12] Zonca, J., Coricelli, G., & Polonio, L. (2020). Gaze patterns disclose the link between cognitive reflection and sophistication in strategic interaction. *Judgment and Decision Making*, 15(2), 230–245.
- [13] UNESCO. (2024, November 19). Comprehensive Sexuality Education: For healthy, Informed and Empowered Learners. Retrieved from <https://www.unesco.org/en/health-education/cse>
- [14] Bilgic, N., & Gunay, T. (2014). A Method for Supporting Smoking Cessation in Adolescents: Peer Education. *Turkish Thoracic Journal/Türk Toraks Dergisi*, 15(3), 102–105.
- [15] Darling-Hammond, L., Flook, L., Cook-Harvey, C., Barron, B., & Osher, D. (2020). Implications for Educational Practice of the Science of Learning and Development. *Applied Developmental Science*, 24(2), 97–140.
- [16] Glanz, K. (2022). Social and behavioral theories. National Institute of Health. Retrieved from <https://obssr.od.nih.gov/sites/obssr/files/Social-and-Behavioral-Theories.pdf>
- [17] Ragelienė T. (2016). Links of Adolescents Identity Development and Relationship with Peers: A Systematic Literature Review. *Journal of the Canadian Academy of Child and Adolescent Psychiatry*, 25(2), 97–105.
- [18] Segal, J., Smith, M., & Robinson, L. (2025). Improving emotional intelligence (EQ). Retrieved from <https://www.helpguide.org/mental-health/wellbeing/emotional-intelligence-eq>
- [19] Paley, B., & Hajal, N. J. (2022). Conceptualizing emotion regulation and coregulation as family-level phenomena. *Clinical Child and Family Psychology Review*, 25(1).
- [20] Promoting Healthy Relationships in Adolescents. (n.d.). Retrieved from <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2018/11/promoting-healthy-relationships-in-adolescents>
- [21] Grossman, S., Cooper, Z., Buxton, H., Hendrickson, S., Lewis-O'Connor, A., Stevens, J., Wong, L.Y., & Bonne, S. (2021). Trauma-informed care: Recognizing and Resisting re-traumatization in Health Care. *Trauma Surgery & Acute Care Open*, 6(1), 1–5.
- [22] National Library of Medicine. (2014). Trauma-Informed Care: A Sociocultural Perspective. Substance Abuse and Mental Health Services Administration (US). Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK207195/>
- [23] National Child Traumatic Stress Network, Schools Committee. (2017). Creating, supporting, and sustaining trauma-informed schools: A system framework. Los Angeles, CA, and Durham, NC: National Center for Child Traumatic Stress.
- [24] Clarke, V., Goddard, A., Wellings, K., Hirve, R., Casanovas, M., Bewley, S., Viner, R., Kramer, T., & Khadr, S. (2021). Medium-term health and social outcomes in adolescents following sexual assault: a prospective mixed-methods cohort study. *Social Psychiatry and Psychiatric Epidemiology*, 58(58).
- [25] Davidson, S. (n.d.). Trauma-Informed Practices for Postsecondary Education: A Guide. Education Northwest.