



Welcome!

You Put What Where?!
Answering Difficult Questions
& Adolescent Sexual Health

Ebony Section BS, CHES

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Objectives

- ❑ In this session, participants will
 - ❑ Increase their knowledge of common STDs including HIV
 - ❑ Learn the current trends of infection for adolescents;
 - ❑ Gain insight to youth's access to care and
 - ❑ Leave with tools to answer difficult question and enhance facilitation.

Ground Rules

1. Keep Questions and stories anonymous. Please do not use names when describing other people or situations, including yourself.
2. Please respect the different opinions and beliefs of others
3. The questions and content is from real life experiences with youth. Language used is to educate--not to be offensive.
4. Parking Lot

Energizer

- ▶ Think back to when you were a teen...
- ▶ Turn to the person next to you and share one behavior that could be described as “risky”
- ▶ Share what you are comfortable with

Adolescent Sexual Health

“Adolescence is a critical transitional period that includes the biological changes of puberty and the need to negotiate key developmental tasks, such as increasing independence and normative experimentation”

-Healthy People 2020



Youth Risk Behaviors

- ▶ Youth 15 to 24, represent 25% of the sexually experienced population, but account for 50% of all new STD infections!
- ▶ 47% had ever had sexual intercourse.
- ▶ 34% had had sexual intercourse during the previous 3 months, and, of these
- ▶ 41% did not use a condom the last time they had sex.
- ▶ 15% had had sex with four or more people during their life.
- ▶ Only 22% of sexually experienced students have ever been tested for HIV.
- ▶ Low perception of risk

Social Determinants of Health

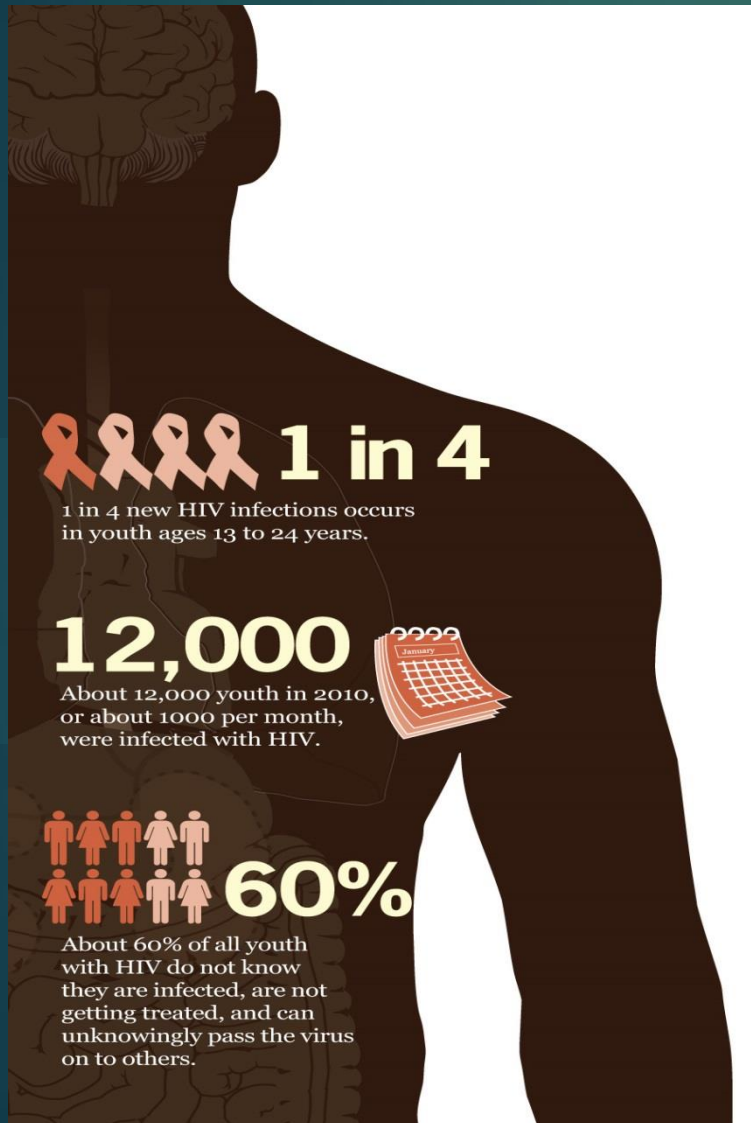


Social determinants of health are the elements in the environment in which youth live, learn, and play that shape their long-term physical, mental, emotional, and social health and well-being

Trend: Teen Pregnancy

- ▶ U.S. teen pregnancy rate is substantially higher than in other western industrialized nations.
- ▶ Black and Hispanic teens comprised 57% of U.S. teen births in 2013
- ▶ Socioeconomically disadvantaged youth of any race or ethnicity experience the highest rates of teen pregnancy and childbirth
- ▶ The proportion of **adolescents** who have **ever had sex** has **declined** since the early 1990s
- ▶ Rate of teen pregnancy dropped 44% from 1991 through 2010

Trend: Youth & HIV



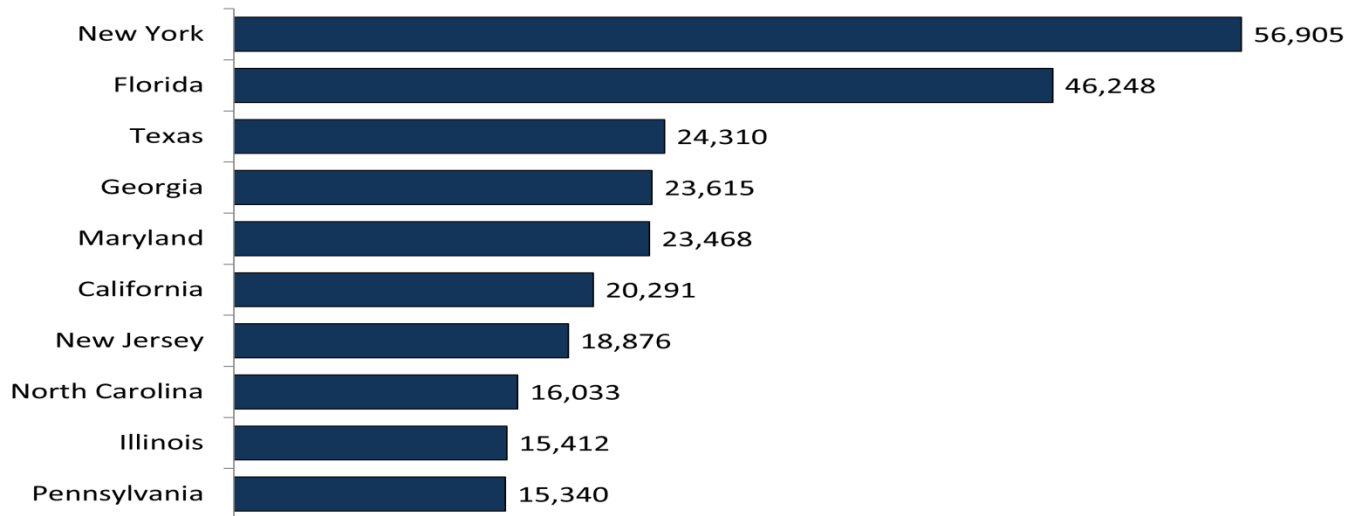
- **In Florida**, 2012-2014, 548 new HIV infection cases were reported among those ages 13-19 and 2,117 among those ages 20-24
- Of the 3,768 of youth living with a diagnosis of HIV through 2013, **24%** were from Miami-Dade County, **15%** from Broward County, **8%** from Palm Beach County, **8%** from Duval, **8%** from Orange County and 7% from Hillsborough County.

Trend: HIV among African American Youth

- ▶ In 2010, Black teens and young adults, ages 13-24, represented more than half (**57%**) of new HIV infections in that age group.
- ▶ Young black males aged 13 to 24 are 4x as high as that of young Hispanic males and **11x** as high as that of young white males of new infections
- ▶ The rate of new infection among young black females is **6X** times as high as that of you Hispanic females, and **20x** white females.

Trend: HIV Among African American Youth

Number of Black Adults/Adolescents Estimated to be Living with an HIV Diagnosis, Top 10 States, year-end 2010



NOTES: Data are estimates for adults/adolescents aged 13 and older in all 50 states, the District of Columbia, and Puerto Rico.
SOURCE: CDC, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention Atlas.



*Lack of awareness

*Stigma

*Socioeconomics

Trend : Special Populations Young MSM

- ▶ In 2011, among adolescent males aged 13–19 years, approximately **93%** of all diagnosed HIV infections were from male-to-male sexual contact.
- ▶ In Florida, 49% of youth(ages 13-19) living with HIV was exposed by MSM contact
- ▶ **Prevention Challenges**
 - ▶ Low perception of risk
 - ▶ Low rates of testing & condom use
 - ▶ Substance use & Homelessness
 - ▶ Rejection & Isolation
 - ▶ Inadequate health education



Trends: Special Populations

Youth in Corrections

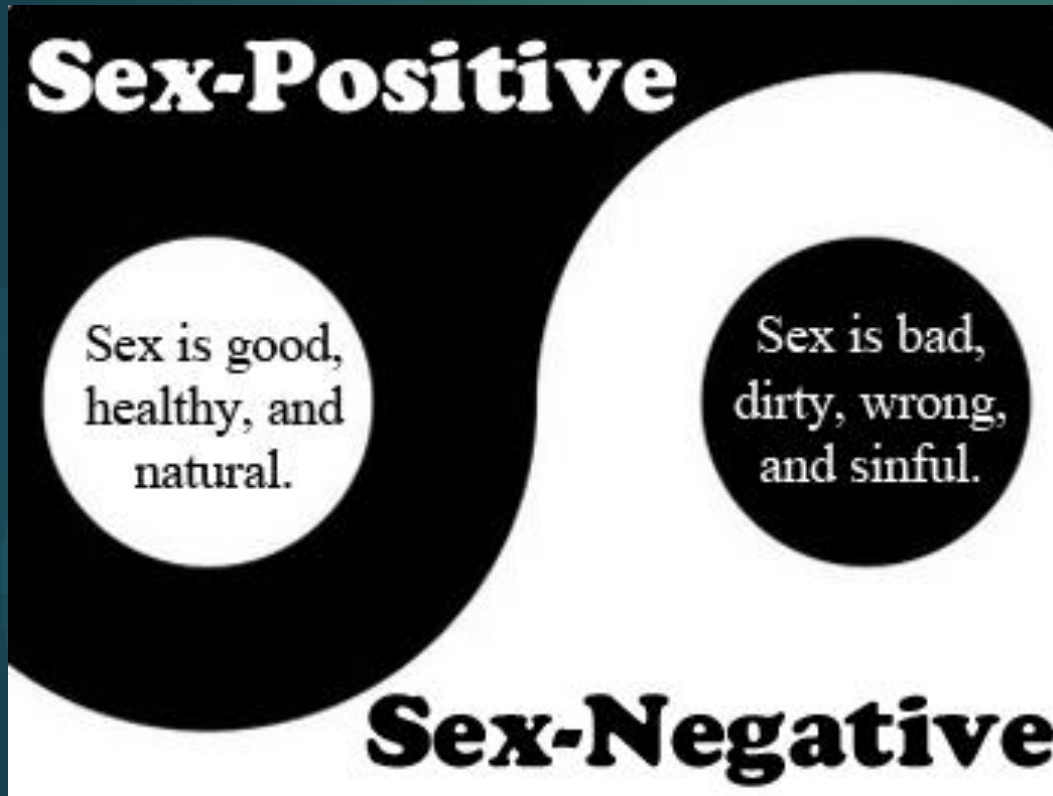
- ▶ Youth involved in corrections initiate sexual activity at earlier ages, have more partners and use condoms less reliably



Solutions

- ▶ Adolescents need accurate, age-appropriate information about sexual health education.
146.1M of federal funding was released from OAH and FYSB to provide evidence based programming
- ▶ U.S. Taxpayers save \$7 for every dollar the government spends on family planning
 - ▶ 2010, \$13.6 billion net government savings
- ▶ Increased access to care
 - ▶ Staying on parent's health insurance until **26**
 - ▶ **NO** Co-pay for Birth Control
- ▶ What can you do at your level?

A Trauma Informed Approach is a Positive Approach



Monica Faulkner, PhD,
Lisa Schergen, MA
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Photo: <http://ublushmagazine.com/what-it-means-to-be-sex-positive/>

Sexually Transmitted Infections

Common STIs

- ▶ Chlamydia
- ▶ Gonorrhea
- ▶ Syphilis
- ▶ Genital Warts (HPV)
- ▶ Herpes
- ▶ HIV
- ▶ Hepatitis B

Transmission

- ▶ Vaginal sex
- ▶ Oral Sex
- ▶ Anal Sex
- ▶ Intimate skin to skin contact of the genitals (Herpes, HPV)
- ▶ Sharing objects that enter the body without using condoms among partners
- ▶ Mother to child
- ▶ Sharing needles

Sexually Transmitted Infections

Caused by **Bacteria**

- Chlamydia
- Gonorrhea
- Syphilis

Treated & Cured
with Antibiotics

Caused by a **Virus**

- Herpes
- HIV
- HPV
- Hepatitis B

Treated, but NOT
Cured

Signs & Symptoms

- Burning when urinating
- Sores, blisters, warts or pimples near the genitals or mouth
- Unusual discharge from penis or vagina
- Rash or itching in the genital areas
- Frequent urination
- Abdominal pain
- Sometimes there are no symptoms at all

Prevention

- Using a latex or polyurethane condom or dental dam EVERY time you have vaginal, oral, or anal sex
- Abstain from vaginal, oral and anal sex



HIV Risk Continuum

Place each card under the heading that you feel identifies the level of risk for HIV infection

Red Light/HIGH RISK

Contact with

- **BLOOD**
- **SEMEN,**
- **VAGINAL FLUID**
- **BREAST MILK**

Yellow Light/LOW RISK

BARRIER such as a **condom** or **dental dam** used during activities that exchange blood, semen, vaginal fluid that might create some danger of transmitting HIV

Green Light/NO RISK

NO exchange of blood, semen, or vaginal fluids = no risk of transmitting HIV

Florida State Laws Statutes 381.0051 and 381.004

It is best to involve parents/guardians/trusted adults/faith leaders in life decisions like having sex, but if a minor is sexually active he/she/they is legally able to access reproductive health services on his/her/their own.

At what age can a person obtain a prescription for birth control without parent/guardian consent?

- **Minors** who are 12 years old or older may obtain reproductive health services, birth control and information about contraception from health clinics **without parental/guardian permission.**
- **Emergency contraception** can be purchased over the counter without a prescription

Can a minor be tested without parent/guardian consent?

- **Minors** may go to a health clinic and obtain STD, including HIV, testing and treatment **anonymously and confidentially.**

Access to comprehensive medical knowledge, **assistance** and **services** relating to the planning of families and maternal health care must be made available to **citizens who are of child-bearing age.**

Answering Difficult Questions

What Makes A Question Difficult to Answer?

- Specific training has not been received
- Falls outside of Standards & Guidelines
- Is not addressed by an existing policy

Key Considerations Before Answering A Question

- Acknowledge that it is not your role or within your expertise to answer every question
- Be mindful of adolescent development and the client's age
- Remember the “Nevers”

General Guidelines for Handling Difficult Questions

▶ **Never...**

- Never answer questions or offer information about your own personal choices or experiences.
- Never provide advice about how to perform any sexual behavior
- Never impose personal values on clients by encouraging or stigmatizing particular sexual behaviors.

▶ **Always...**

- Be alert and screen for possible concerns (e.g., manipulation, abuse or coercion) that require follow-up.

Framework for Answering Difficult Questions

Step 1:

Pause

Step 2:

Acknowledge
and Validate
the Patient's
Question

Step 3:

Ask Clarifying
Questions and
Find Out What
the Patient
Thinks

Step 4:

Decide
Whether or
Not It's Your
Role to
Answer

Step 5:

Provide Age
Appropriate
Messaging

Step 6:

Check for
Understanding
and Confirm
Next Steps

“For Some”
“For Others”
“For Us”
End with a Fact

Answering Difficult Questions: Reactive Response

- ▶ 1. Clarify what is being asked.
- ▶ 2. Determine the type of the question.
 - Information/knowledge seeking
 - “What does oral sex mean?”
 - Am I normal?
 - “What is the average size of a penis?”
 - Permission-seeking/Advice
 - “What is the correct age to have sex?”
 - Personal beliefs and experiences
 - “How old were you when you had sex for the first time?”
 - Shock questions
 - “My partner smells like stinky fish, what should I do?”

**STOP
DROP
AND ROLL**

Answering Difficult Questions

- ▶ Your note card has a question that has been asked by a real teen
- ▶ Ask the question to your partner
- ▶ Have the partner determine what type of question is being asked (refer to your worksheet)
- ▶ Have the partner answer the question
- ▶ Remember to STOP DROP and ROLL

**STOP
DROP
AND ROLL**

“For Some”
“For Others”
“For Us”
End with a Fact

Remember...

- ▶ The audience won't remember every fact you communicate, but they will remember if they felt comfortable, validated, and/or reassured.

Sources

Answer by Rutgers University

<http://answer.rutgers.edu/>

Center for Disease Control and Prevention

<http://www.cdc.gov/nchs/data/databriefs/db89.htm>

<http://www.cdc.gov/healthyouth/sexualbehaviors/>

<http://www.cdc.gov/vitalsigns/HIVAmongYouth/>

The Center for HIV Law and Policy

<http://www.hivlawandpolicy.org/states/florida>

Florida State Statutes

www.flsenate.gov/statutes/index.cfm

Guttmacher Institute

http://www.guttmacher.org/statecenter/spibs/spib_MASS.pdf

Health and Human Services, Office of Adolescent Health.

<http://www.hhs.gov/ash/oah/resources-and-publications/info/parents/just-facts/adolescent-sex.html>

Healthy People 2020

<https://www.healthypeople.gov/2020/topics-objectives/topic/Adolescent-Health>

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THE MEANING BEHIND A QUESTION

INFORMATION-SEEKING

These are basically very straightforward questions that have specific, factual answers.

Examples:

How does a condom work?

What does oral sex mean?

Can you get an STD from a toilet seat?

SAMPLE RESPONSE – *Since most STDs are caused by germs and bacteria that are very fragile, it is not possible to get a disease from a toilet seat, because the bacteria or virus could not stay alive there.*

AM-I-NORMAL

These questions are often about something a person worries about and needs reassurance about. So while there may be a factual response, the person needs to know that wanting to know the answer is normal.

Examples:

Is it possible to masturbate too much?

What is the average size of a penis?

Why are boys horny all the time?

SAMPLE RESPONSE – *It really does seem as though all boys are horny all the time, but we know that not only are some boys not at all interested in sex, but girls can be very interested in sex and we don't often hear about that. It is really normal for teens to think about sex a lot, be curious and even masturbate a lot. It is also normal for those feelings not to be very strong at all. People develop at different times and so a person's interest in sex is a really individual thing. Why do you think we have this stereotype that all guys are horny?*

PERMISSION-SEEKING/ADVICE

These questions are really about something that a teen is trying to make a decision about and needs permission to make a decision. Sometimes they are looking to be talked out of something, and sometimes they really want to know the steps to figuring out the answer for themselves.

Examples:

What is the correct age to have sex?

How do you give a blow job?

What are the consequences of dating someone who is older than you?

SAMPLE RESPONSE – *Dating an older person can be wonderful, but there are certainly some cautions to keep in mind. In some situations, an older person will try to control a younger person, or may keep the younger person from doing things that someone his or her age might wish to do. An older person may expect sex when a younger person may not be ready. Depending on the age differences, sex between the older and younger person might be considered illegal.*

PERSONAL BELIEFS OR EXPERIENCES QUESTIONS

These questions are again a test of how much you are willing to share about yourself. Most of the time, sharing personal information is not appropriate, but generally explaining that your experiences happened at a time very different from today, and therefore are not relevant to them, is a safe way to avoid answering those questions.

Examples:

How old were you when you had sex for the first time?

Do you think abortion is wrong?

If you were me, what would you do?

SAMPLE RESPONSE – *Since I am NOT you, and I do not have to live with the consequences of the choice, it does not make sense for me to give you an answer. We can talk together about the choice you have to make, and then maybe it will be easier for you to make a decision that is right for you.*

SHOCK QUESTIONS

These questions are asked to test the facilitator. This is a check of your sense of humor, your ability to think on your feet and your ability to not get flustered or upset by a question. Sometimes it is best to ignore the question, but other times, it helps to give a serious answer.

Examples:

I want to f--k you.

If I have sex with 300 guys does that make me a slut?

My girlfriend smells like dead stinky fish, what should I do?

SAMPLE RESPONSE – *This question has two parts to it. In one part, it is asking about something we often hear - that a girl's vagina smells dirty or bad, but the way it is asks is part of the problem. It is true that all girls and women's vaginas have a scent and that some scents are stronger and more noticeable than others, this is very normal. It is not right to make a girl or woman feel bad about her body since the scent is normal and natural. A strong scent could be a sign of infection.*

HIV Disease among Adolescents (ages 13-19) and Young Adults (ages 20-24)

United States

- ✘ HIV disease continues to have a significant impact on adolescents and young adults in the U.S. At least 21% of the estimated HIV Infection cases diagnosed in 2011 were under the age of 25. Many teens who are infected don't know it.
- ✘ Although blacks represent only 17% of U.S. teenagers in 2011, they account for more than two-thirds (67%) of the new HIV infection cases diagnosed among teens that year.
- ✘ Of the newly diagnosed HIV cases among males in the U.S. in 2011, 93% of the adolescent and 91% of the young adult cases were attributed to male-to-male sexual contact.
- ✘ In 2011, 23% of the newly diagnosed adolescent and 14% of young adult U.S. HIV infection cases were female.
- ✘ Of the newly diagnosed HIV cases among females in the U.S. in 2011, 93% of the adolescent and 91% of the young adult cases were attributed to heterosexual contact.
- ✘ At the end of 2010, 8,631 adolescents and 30,404 young adults were estimated to be living with HIV in the U.S.
- ✘ Other than HIV, an estimated 12 million cases of STDs are reported annually. Those younger than 25 years of age account for about two-thirds of those infections.

Florida

- ✘ In Florida 16% of all new HIV infections reported in 2014 were among persons under the age of 25.
- ✘ 2012-2014, 548 new HIV infection cases were reported among those ages 13-19 and 2,117 among those ages 20-24.
- ✘ A total of 3,768 persons aged 13-24 were living with HIV disease through 2013, as of 06/30/2014.

Adolescents and Young Adults Living with HIV Disease by Selected Demographics through 2013		
Sex	No.	Percent
Female	1,219	32%
Male	2,549	68%
Total	3,768	
Race/Ethnicity	No.	Percent
White	502	13%
Black	2,550	68%
Hispanic	640	17%
Other	76	2%
Current Age Group	No.	Percent
13-19	717	19%
20-24	3,051	81%
Exposure Category	No.	Percent
MSM	1,844	49%
IDU	45	1%
MSM/IDU	43	1%
Heterosexual Contact	780	21%
Other confirmed Risk	11	0%
Perinatal Risk	1,045	28%

- ✘ Of the 3,768 persons living with a diagnosis of HIV through 2013, 24% were from Miami-Dade County, 15% from Broward County, 8% from Palm Beach County, 8% from Duval, 8% from Orange County and 7% from Hillsborough County.
- ✘ Of the sexually transmitted diseases reported in Florida, in 2013, 26% of Chlamydia, 19% of Gonorrhea and 6% of Primary and Secondary Syphilis cases were among persons aged between 13-19.

- ✘ **Most people diagnosed with AIDS before the age of 30 were infected with HIV in their teens or early twenties. This illustrates the importance of advocating prevention to young people so they have the information and resources to protect themselves from HIV when they make decisions about experimentation with drugs and sex.**
- ✘ **Adolescents need accurate, age-appropriate information about HIV infection and AIDS. Topics should include, but not be limited to: how to talk with their parents or other trusted adults about HIV and AIDS, how to reduce or eliminate risk factors, how to talk with a potential partner about risk factors, how to use a condom correctly and where to get tested for HIV. Information should also include the concept that abstinence is the *primary* way to avoid sexually transmitted infection.**
- ✘ **According to CDC's Youth Risk Behavioral Survey (YRBS), many young people begin having sexual intercourse at early ages: 46.8% of high school students have had sexual intercourse, and 5.6% of them reported first sexual intercourse before age 13.**
- ✘ **The prevalence of having had sexual intercourse with four or more people was higher among younger males (16.8%) than females (13.2%) in the U.S. and in Florida (18% and 8.7%, respectively).**

Data sources:

- Florida data: FL Department of Health, Bureau of Communicable Diseases, HIV/AIDS Section
- For more Florida data, go to <http://floridaaids.org/>, then trends and statistics, then slide shows to find the slide set on adolescents and young adults
- U.S. data: HIV Surveillance Report, 2013 (most recent available) Vol. 25 (HIV data for all 50 states) <http://www.cdc.gov/hiv/topics/surveillance/resources/reports/index.htm>
- For national facts, go to: <http://www.cdc.gov/hiv/resources/factsheets/index.htm> or <http://www.kff.org/hiv/aids/>
- CDC. (2014, June 13). Youth Risk Behavior Surveillance – United States, 2013. *MMWR*, 63(4), 1 - 172. Retrieved from <http://www.cdc.gov/mmwr/pdf/ss/ss6304.pdf> on June 27, 2014.
- The Henry J. Kaiser Family Foundation, Sexual Health Statistics for Teenagers and Young Adults in the United States. September 2011
- Age specific U.S. data: HIV Surveillance among Adolescents and Young Adults (Microsoft PowerPoint format), go to: <http://www.cdc.gov/hiv/library/slideSets/index.html>

