

*Bridging the Gaps: Eliminating Disparities in
Teen Pregnancy and Sexual Health
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Trauma Informed Sex Education

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Agenda

- Sexual health stats for foster youth
- Impact of trauma on sexual health
- Negative/Positive sexual health messaging
- Integrating positive messages in conversations with youth

Learning Objectives

After this workshop, participants will be able to:

- Articulate the impact of trauma on sexual health behaviors
- Understand the impact of positive/negative sexual health messages on teens who have experienced trauma
- Integrate trauma informed sexual health messages in discussions with youth

Sexual Health Stats for Foster Youth

Pregnancy Rate

- By age 19, 50% of females are pregnant
- By age 21, 70% of females have been pregnant
- By age 21, 50% of males have gotten someone pregnant



Photo: <https://www.aclu-nm.org/whats-wrong-with-blaming-teen-parents/2012/08/>

The National Campaign to Prevent Teen and Unplanned Pregnancy. (2009, July). *Fast facts: reproductive health outcomes of youth who ever lived in foster care*. Retrieved February 27, 2012, from http://www.thenationalcampaign.org/resources/pdf/FastFacts_FosterCare_Reproductive_Outcomes.pdf

The National Campaign to Prevent Teen and Unplanned Pregnancy. (2010, August). *Why it matters: teen pregnancy and child welfare*. Retrieved February 27, 2012, from http://www.thenationalcampaign.org/why-it-matters/pdf/child_welfare.pdf

Why the higher rates?

- Variety of different settings
- Multiple moves
- Caregiver disruption
- Lack of stable adult relationships
- Inconsistent access to sexual healthcare
 - restricted access
 - pressures from foster parents
 - lack of education in school

Photo: http://www.huffingtonpost.com/2012/11/24/teen-pregnancy-study-stud_n_2185062.html



Our Current Work: The Connections Project

Examining the impact of evidence based teen pregnancy prevention programs with youth in non-traditional settings:

- Foster youth
- Youth in juvenile detention
- Youth in substance use treatment
- Youth in homeless shelter



Preliminary Findings

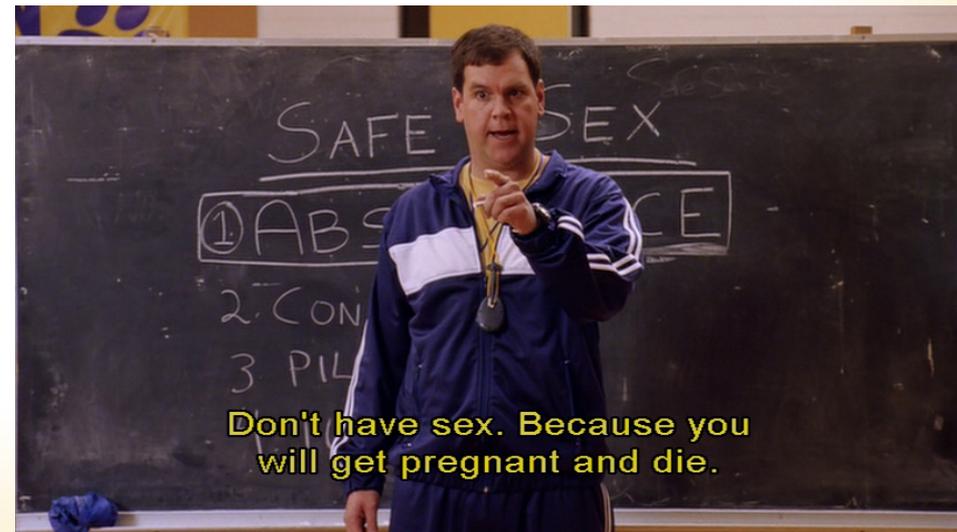
Staff/professionals who work with youth in these settings

- Are anxious about talking with youth about sexual health
- Are uncomfortable discussing sexuality
- May use shaming and/or focus on the negatives

Realities of these youth are intense

- Sexual abuse
- Sex trafficking/prostitution
- Early sexual activity
- Previous STI

Photo: <http://www.pinterest.com/danielthomas3/everything-mean-girls-d/>



Impact of Trauma on Sexual Health

Trauma

Physical and emotional responses of a child to events that threaten the life or physical integrity of the child, or someone critically important to the child (i.e. parent or sibling)

- Acute Trauma
- Chronic Trauma
- Complex Trauma

Trauma Impact

- Early sexual debut
- Unprotected sex
- Sex with multiple partners
- Sex while using drugs/alcohol
- Sex for money
- Teen pregnancy

Components of Trauma Informed Child Welfare Systems

- Address impact of changes in youth's behavior, development, relationships
- Support and promote positive stable relationships in the youth's life
- Help youth make meaning out of their trauma history and current experience

Specific for trauma informed sex education

- Authentic relationships
- Honest, judgment-free discussions

What is trauma informed sex education?

Applying the Theory

Trauma-informed sexuality education: recognising the rights and resilience of youth

Nicole M. Fava a & Laina Y. Bay-Cheng , School of Social Work, University at Buffalo, Buffalo, NY

In **Sex Education: Sexuality, Society and Learning**

Where We Are

- Trauma not considered in the design of sex ed programming/resources
- Our current approach to teaching/talking about sexuality with youth is steeped in discourses of danger and risk
- Potential for positive sexual development among trauma-affected youth overlooked by clinical practice

Where We're Going



CIRCLES OF SEXUALITY

Where We're Going

Need a more **comprehensive, positive, and normative** approach to adolescent sexuality

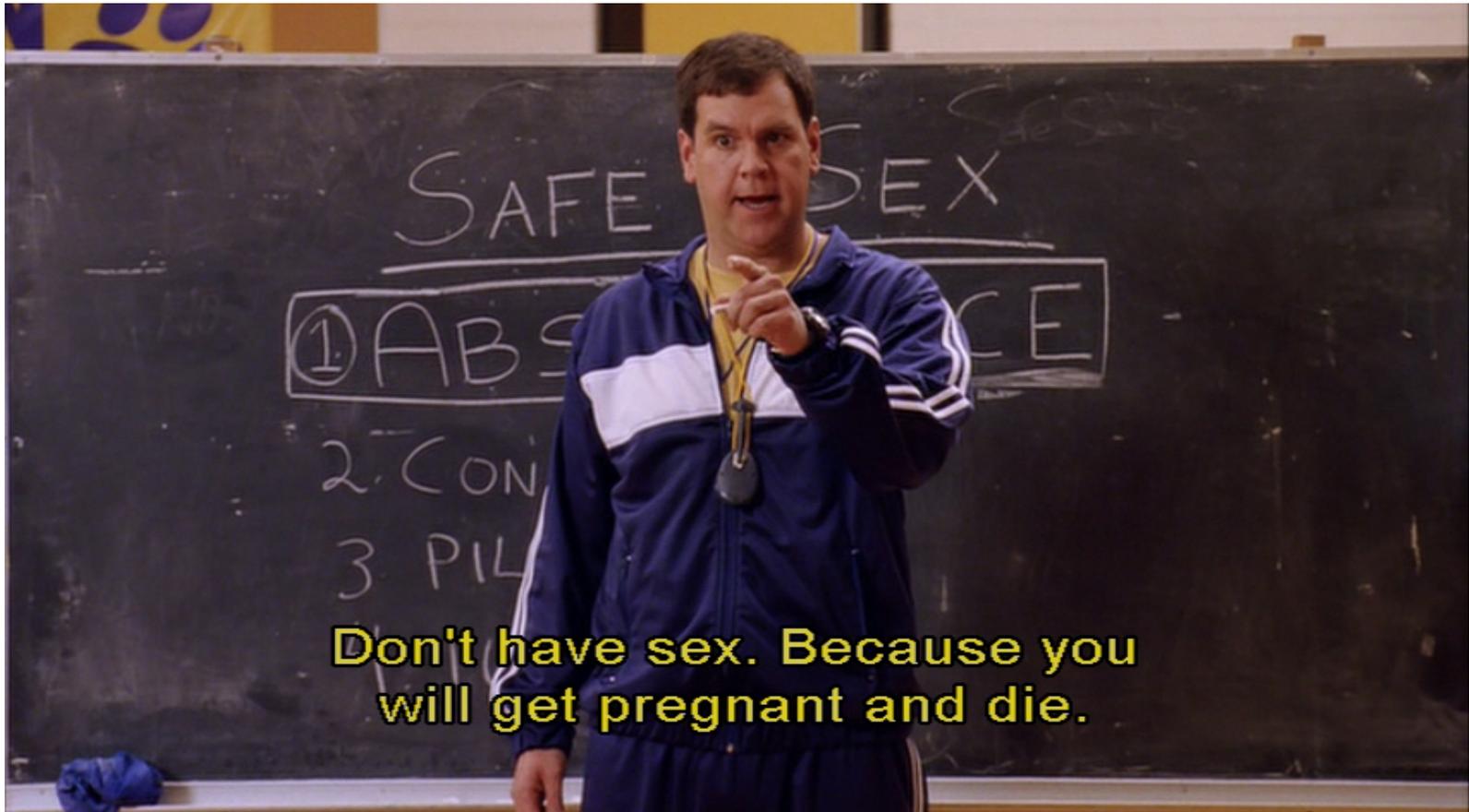
- Discuss more than danger and risk
- Consider the gender and sexual diversity of the youth you work with
- Minimize judgment and shaming

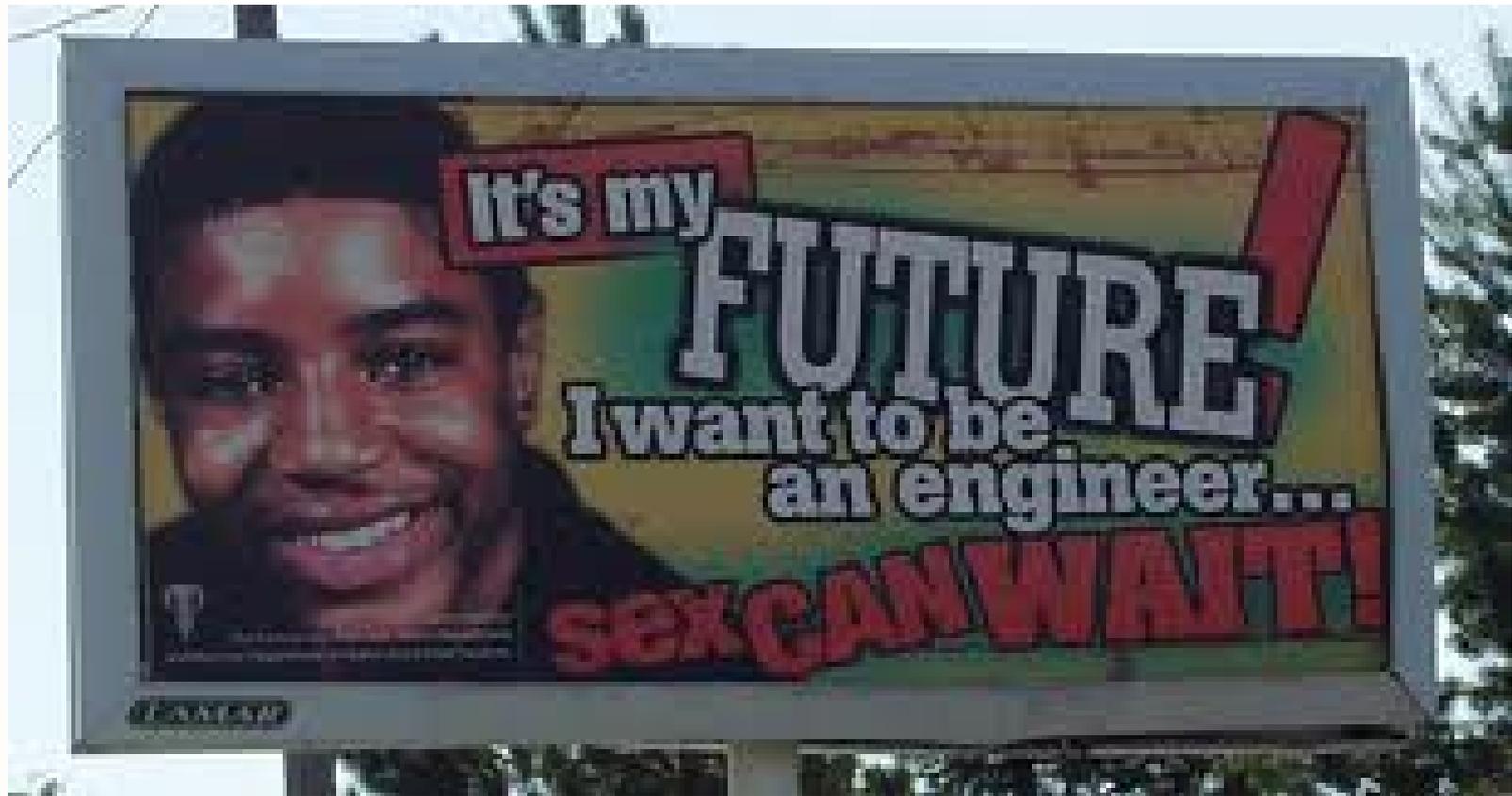
Where We're Going

- See and treat youth who have experienced trauma as whole people, not only as victims of trauma
- Talk with youth about the ways sex can be a positive force in building healthy relationships

Where We're Going

- Remember that risk-taking and mistake-making are a potentially universal part of adolescence
- Recognize youth as experts on adolescent sexuality





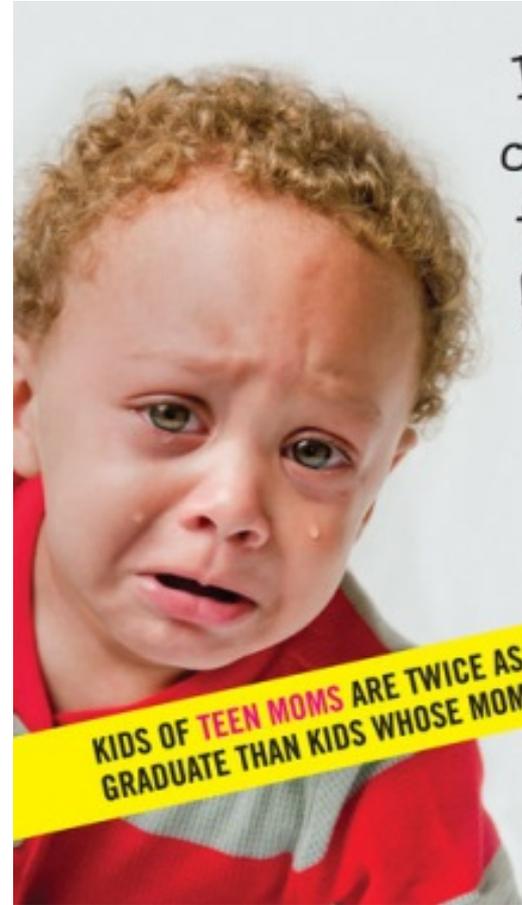


Honestly Mom...
chances are
he won't
stay with you.
What happens
to me?

**ARE YOU READY TO RAISE A CHILD BY YOURSELF?
90% OF TEEN PARENTS DON'T MARRY EACH OTHER.**

Text 'NOTNOW' to 877877 for
the real price of teen pregnancy.
Standard text messaging rates may apply. Check with your service provider.

NYC
Human Resources Administration
Department of Social Services
Michael R. Bloomberg
Mayor

I'm twice
as likely **not**
to graduate
high school
because
you had me
as a **teen.**

**KIDS OF TEEN MOMS ARE TWICE AS LIKELY NOT TO
GRADUATE THAN KIDS WHOSE MOMS WERE OVER AGE 22.**

Text 'NOTNOW' to 877877 for
the real price of teen pregnancy.
Standard text messaging rates may apply. Check with your service provider.

NYC
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Mayor



 /CandiesFoundation
 /CandiesOrg



Carly Rae Jepsen

**YOU'RE SUPPOSED TO BE
CHANGING THE WORLD...
NOT CHANGING DIAPERS.**



Nearly 750,000 teenage girls
will become pregnant this year.

Change it! #NoTeenPreg

thecandiesfoundation.org



HILARY DUFF

thecandiesfoundation.org

"YOU THINK BEING IN SCHOOL SUCKS?"

You know what sucks a whole lot more? A baby — almost every 2 hours for feeding time. And breast feeding isn't always easy, so if you choose to use formula, you're looking at about \$1,500 a year.

Guess school doesn't suck that badly, huh?



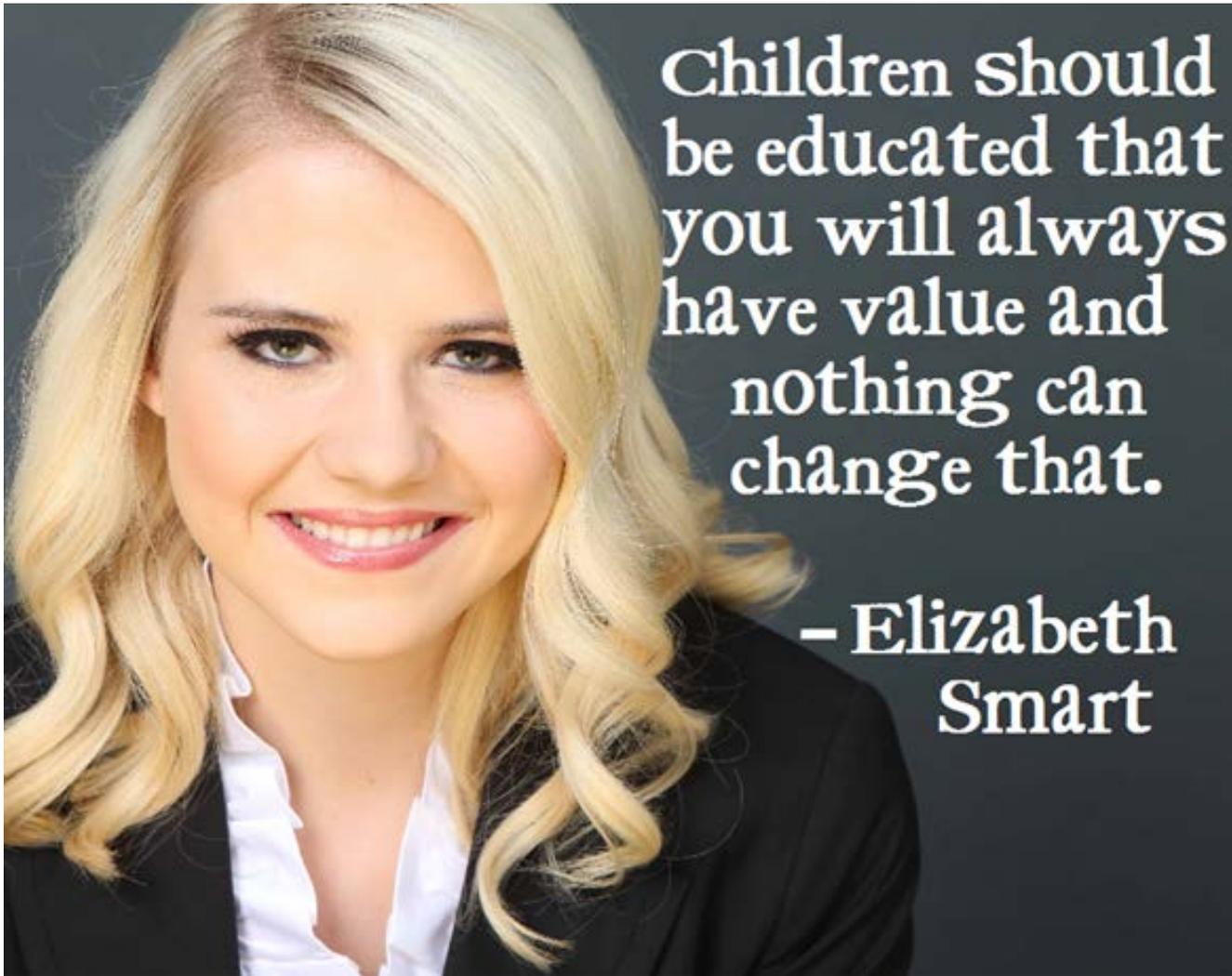
THE CANDIE'S FOUNDATION
Providing information about the devastating
consequences of teen pregnancy.



Congratulations! You beat teenage pregnancy!



your  cards
someecards.com



Children should
be educated that
you will always
have value and
nothing can
change that.

– Elizabeth
Smart



“Yet our age kept us from having the freedom to openly share our mamahood with the world. The shame we felt from our families, our friends, healthcare providers, school staff, our community, and our peers deeply affected our internal sense of purpose in the world. We were young women working to transition into adulthood while our environment refused to see us as anything more than "children having children." Our passion and dedication to grow and be better mothers, better women, and better people were not the goals our society would accept.

The barriers that prevented us from defining and achieving our own successes often came from these negative environments and from society's constant stigmatization of what my family was suppose to look like and how our dreams didn't fit into the cultural norm. Our roles as mamas were disrespected”

“If you get an STD from sexual activity you engaged in willingly, **you should be upset with YOURSELF** because it is **YOUR** responsibility to be protected”

Sweet Jemmott, Loretta, Jonh B. Jemmott, III, and Constance A. McCaffree. *Making Proud Choices!* 4.1th ed. NYC, NY: Select Media, 2012. Print

“Partner 1: Condoms are unnatural and turn me off.

Partner 2: There’s nothing natural about getting a disease either!”

Sweet Jemmott, Loretta, Jonh B. Jemmott, III, and Constance A. McCaffree. *Making Proud Choices!* 4.1th ed. NYC, NY: Select Media, 2012.
Print

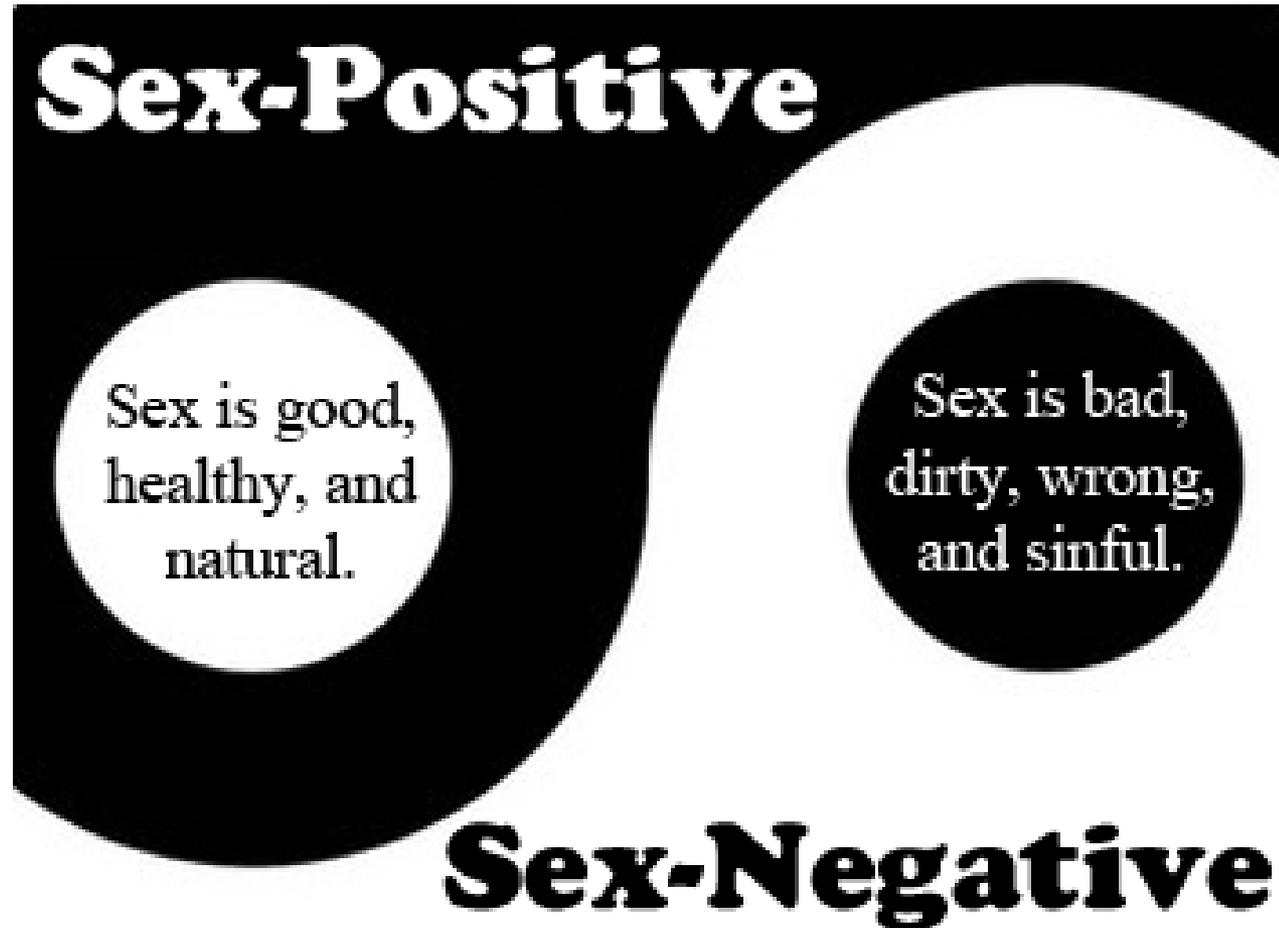
“In this program we will talk about STDs, HIV, and AIDS, all of which have a devastating impact on youth”

Sweet Jemmott, Loretta, Jonh B. Jemmott, III, and Constance A. McCaffree. *Making Proud Choices!* 4.1th ed. NYC, NY: Select Media, 2012.
Print

Trauma Informed Sex Education Entails:

- Shift in how we view victims
- Adults do not assume role of expert on adolescent sexuality
- Exploration of the ways sexuality can help youth thrive

A Trauma Informed Approach is a Positive approach



Some general guidelines

- Avoid using 'should/shouldn't'
- Avoid 'always/never'
- Avoid scare tactics
- Look out for STI shaming
- Look out for teen pregnancy/parent shaming
- Be matter of fact – normalize without judgment
- Support youth voices/choices
- Consider social determinants of health in addition to individual behavior
- Keep survivors of trauma in mind
- Be inclusive of gender and sexual diversity

Discussion Questions

- What are potential discussion points in your work when you can talk to youth or foster parents about sexual health?
- What challenges do you see incorporating these ideas in your work?

References and Resources

Bay-Cheng, L.Y. and N.M. Fava. 2012. Trauma-informed sexuality education: recognising the rights and resilience of youth. In *Sex Education: Sexuality, Society, and Learning* 1-12.

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