

# Sexual health & adolescence

## *The adolescent-caregiver dyad*

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# Disclosures & positionality

I have no disclosures or conflicts of interest to disclose.

Pediatrician

Adolescent medicine doc

Baltimore city, Baltimore, MD

First gen-American

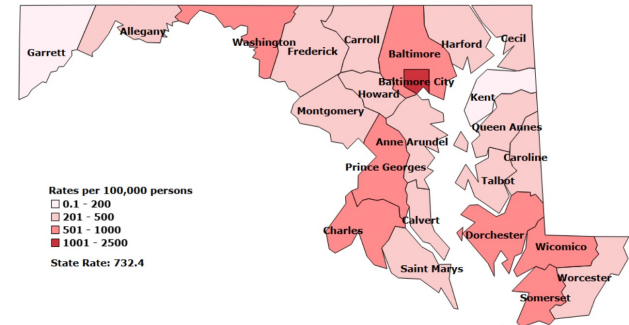
Center for Indigenous Health

NPAIHB, IHS, local communities



4<sup>th</sup> highest rate of STIs nationally (↻  
increasing)  
Missing data  
High rates of inequity

Figure 1. All STI Rates\* by County, Maryland, 2022



# Overview

- I. Scenarios
- II. Confidentiality
- III. Developmental stages
- IV. Talking with parents
- V. Resources



# Case snippets

- “I didn’t know my son was having sex”
- “He has the itch”
- “She is forbidden from using tampons”
- “He’s a male so doesn’t need HPV vaccine”
- “She has HIV and is taking appropriate treatment, so she’s protected against syphilis right?”
- “I told her to smoke some marijuana because it makes sex easier”



## Case snippets

- “I didn’t know my son was having sex”—EHR & confidentiality
- “He has the itch” —education/medical literacy
- “She is forbidden from using tampons” —medical literacy & cultural concerns
- “He’s a male so doesn’t need HPV vaccine” —education/medical literacy
- “She has HIV and is taking appropriate treatment, so she’s protected against syphilis right?” —access to education/medical literacy
- “I told her to smoke some marijuana because it makes sex easier —role of parent/caregiver

## Confidentiality & Dyadic Education



# Confidentiality concerns

- 21st Century Cures Act Final Rule
- Variance in history and documentation <18 and  $\geq$  18 years old
  - In person vs virtually
  - Medical records
  - Setting: inpatient vs outpatient, rural vs urban, I/T/U



# Role of Title X and sexual and repro health funding

- Higher rates of documentation
- Clinic culture
- Increase emphasis on sexual health
- Less barriers to confidentiality
- Link in to primary care visits

Darney BG, Biel FM, Hoopes M, Rodriguez MI, Hatch B, Marino M, Templeton A, Oakley J, Schmidt T, Cottrell EK. Title X Improved Access To Most Effective And Moderately Effective Contraception In US Safety-Net Clinics, 2016-18. Health Aff (Millwood). 2022 Apr;41(4):497-506. doi: 10.1377/hlthaff.2021.01483. PMID: 35377749; PMCID: PMC10033226.

# Developmental stages



| Age   | What Kids Know  | Questions to Expect   |
|-------|---|---|
| 7–10  | Words for genitals, chest; Body parts and functions (basic version); Bathroom humor         | What is a period?; When will I start?; When will my breasts grow?   |
| 11–12 | Words for sex; Body parts and functions (expanded version)                                  | What is masturbation? (self vs other); What is oral sex? Anal sex?; How does someone get pregnant?                          |
| 13–14 | Basic understanding of most sexual behaviors; Growing sexual vocabulary                     | How old should I be when I have sex for the first time?; How do I decide when to have sex with someone?; What is an orgasm? |
| 15–16 | Some have begun masturbation; Understanding consequences to sexual behavior                 | Can I get an STI from kissing? Oral sex? Anal sex?; How effective are condoms? Birth control pills?                         |
| 17–18 | Difficulty discerning love and lust; engaged in at least one sexual behavior with a partner | How do you know if you are in love?; Were you in love the first time you had sex?   |



# This is making me anxious!



| Anxiety Source                                 | Parents  | Teens  |
|--|--|--|
| Real or perceived ignorance                    | Not knowing the answers; Being wrong or corrected; Having different answers      | Not knowing the correct language to use; Being wrong or corrected            |
| Saying too much                                | Providing more information than the child is ready for; TMI                      | Revealing sexual thoughts/ behaviors to the parent → punishment              |
| Fear of difficult questions                    | Questions about contraception, fertility, abortion; About parent's own behaviors | Questions about current sexual behavior; Questions about abuse               |
| Uncovering new info                            | Child is already sexually active; Has been exposed to pornography                | Finding out something about parent's current or past sex life; family secret |
| Fear of teen's or parent's reaction/perception | Sounding 'old-fashioned' or out of touch; Disclosure of abuse                    | Sounding stupid; Parent will not be open to the conversation/topic           |
| Discomfort with topic                          | Embarrassment; Shame; Fear   | Embarrassment; Shame; Fear   |

# Kick them out!

- Normalize
- Explain policy
- Outline what will be discussed
- Validate
- Kick out
- Return and summarize, keeping with confidentiality



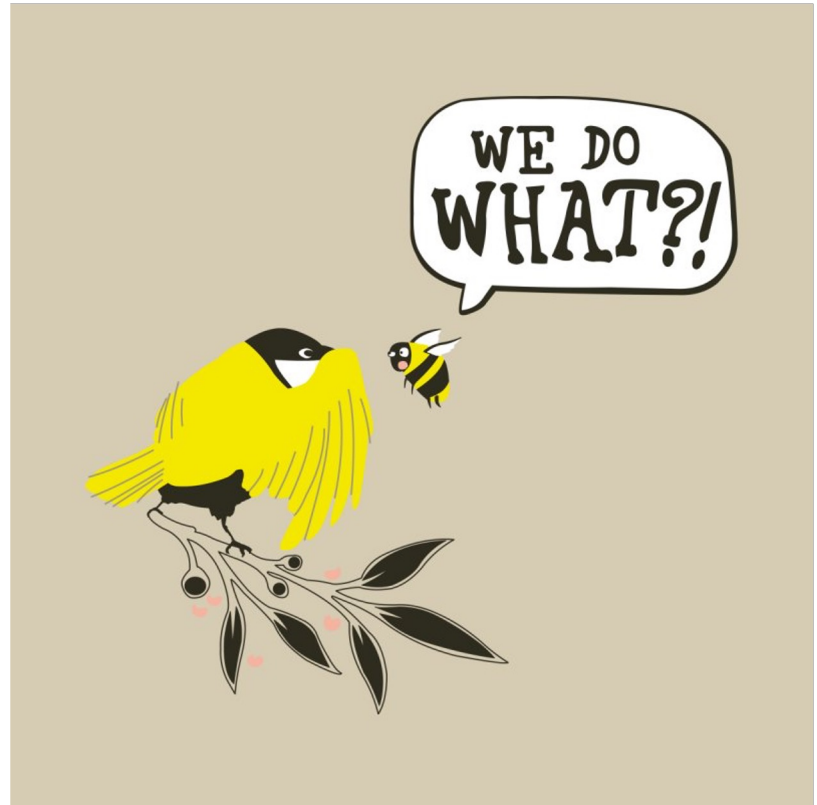
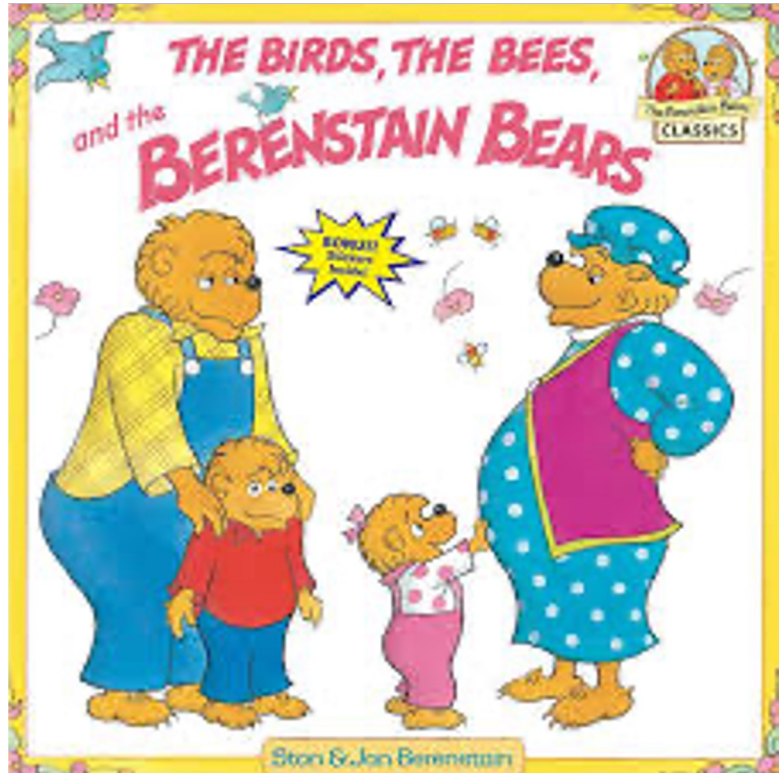


# Sexual health recommendations

In primary care and in the emergency department/urgent care setting:

- Counseling
  - Annual G/C screen for sexually active patients
  - HIV screening (13-64yo, at least once...plus details)
  - PrEP and PEP counseling
- United States Preventive Services Task Force (USPSTF)
- American Academy of Pediatrics (AAP) Redbook
- Society for Adolescent Health and Medicine: SAHM

# The Birds and the Bees



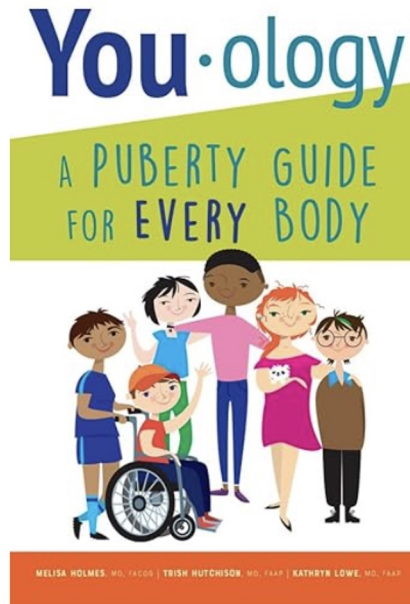


# Sex in “real” life

| Category                          | Examples  |
|-----------------------------------|---|
| Mass Media                        | News coverage of a case related to rape, sexual abuse, etc.; Portrayals of transgender people in the media; Celebrity coverage of almost anything   |
| Social Media                      | Mentions of body weight/size/judgments in pictures and comments; Idealized and sexualized images; Bullying and sexual harassment; Posts from the 'It Gets Better' campaign; Podcast “Sex talks”- curriculum |
| Major Life Events or Developments | Pregnancy, miscarriage, birth, or adoption in the family or friends; A friend or family member 'coming out'   |
| Everyday Occurrences              | A pet giving birth or laying eggs; Overhearing the use of sexual slurs; Expressions of affection between people in public or semi-public places   |
| Gender diversity                  | Inclusion; access to equal and appropriate education; resources   |

# Resources

- WeRNative & Healthy Native Youth
- Paths (Re)membered
- <https://parentandteen.com/>



this is so  
awkward



Cara Natterson, MD  
& Vanessa Kroll Bennett

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