



New York State Youth Sexual Health Plan

Promoting Sexual Health through prevention of HIV/STD and unintended pregnancy

The New York State Sexual Health Plan, consistent with the New York State Department of Health Prevention Agenda, is a guide to ensure that accurate sexual health information and quality health services are made available to all New York State youth.

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What is Sexual Health?

Sexual health is a state of well-being in relation to sexuality across the life span that involves physical, emotional, mental, social, and spiritual dimensions. Sexual health is an intrinsic element of human health and is based on a positive, equitable, and respectful approach to sexuality, relationships, and reproduction that is free of coercion, fear, discrimination, stigma, shame, and violence. It includes: the ability to understand the benefits, risks, and responsibilities of sexual behavior; the prevention and care of disease and other adverse outcomes; and the possibility of fulfilling sexual relationships. Sexual health is impacted by socioeconomic and cultural contexts—including policies, practices, and services—that support healthy outcomes for individuals, families, and their communities.¹

Acknowledgements

This sexual health plan is a collaborative effort between the New York State Department of Health AIDS Institute, Division of Family Health, Bureau of Maternal and Child Health and Interagency Task Force on HIV/AIDS partners*.

The purpose of this document is to provide a New York State sexual health plan that addresses the HIV, STD, and pregnancy prevention needs of adolescents and young adults and promote positive, healthy, and informed choices regarding sexual health.

The Department encourages educators, community stakeholders, health care providers, policy makers, members of the public and private sectors to utilize this plan as a helpful tool to assist and educate their communities and youth.

*The following New York State agencies contributed to the development of this plan:

Council on Children and Families

Office of Children and Family Services

Division of Criminal Justice Services

State Education Department

Office for People With Developmental Disabilities

Office for the Prevention of Domestic Violence

Office of Temporary and Disability Assistance

¹ Recommended by the CDC-HRSA Advisory Committee on HIV, STD, and Viral Hepatitis Prevention and Treatment, May 2012; <u>http://www.cdc.gov/maso/facm/pdfs/CHACHSPT/20120508_CHAC.pdf</u>

Statement of Need (HIV, STD and Pregnancy)

A large number of adolescents are sexually active, as demonstrated by key findings in 2011 from the students' self-reported health risks and behaviors²:

- 61.3% of New York State high school students reported they had sexual intercourse by 12th grade. More than 1 in 5 had sexual intercourse by 9th grade.
- More than 1 in 10 (12.6%) students did not use any method to prevent pregnancy during last sexual intercourse.
- Only 10.7% of sexually active students used both a condom plus other birth control method (recommended to address both pregnancy and STD/HIV prevention) during their last sexual intercourse.
- Youth with special circumstances, such as youth in foster care, have significantly higher rates of sexual activity and pregnancy than their peers in the general population. Nearly one-third of young women in foster care reported that they had been pregnant at least once by age 17³.

Sexually active youth are at increased risk for HIV and STDs as compared to older adults:

• From 2002 to 2008, new HIV diagnoses among male youth ages 15-24 almost doubled, increasing from 358 to 667 (86%). There have continued to be greater than 600 new diagnoses per year since, with 616 in 2011. This increase is primarily due to a rise of new infection among young men of color who have sex with men.

In comparison, new diagnoses among young females as well as men and women of other ages have decreased since 2002.

- In 2013, STDs accounted for 67% of all reportable communicable diseases in New York State.
 Regardless of race or gender, data show that sexually active adolescents and young adults are at increased risk for STDs when compared to older adults.
- In 2013, 15-24 year olds accounted for 63% of reported STDs (syphilis, gonorrhea and Chlamydia) in New York State but only 14% of the total population.

STD Case Reports Among Adolescents and Young Adults New York State, 2013					
	Age Group (years)	UPSTATE NY*	NYC	NYS	
Chlamydia	15-19	11,132	15,148	26,280	
	20-24	15,362	19,230	34,592	
Gonorrhea	15-19	1,344	2,408	3,752	
	20-24	2,154	3,777	5,931	
Early Syphilis	15-19	22	65	87	
	20-24	94	324	418	
NYS Total (Age 15-24 years)		30,108	37,492	71,060	
*Includes the 57 NYS Counties outside of New York City					

New York State Youth Sexual Health Plan

² Youth Risk Behavior Surveillance System (YRBS), a nationally standardized survey funded by the Centers for Disease Control and Prevention (CDC) to monitor grades 9–12 <u>http://nccd.cdc.gov/YouthOnline/App/Default.aspx?SID=HS</u>

³ "Opportunity to help Youth in Foster Care- Addressing Pregnancy Prevention in the Implementation of the Fostering Connections to Success and Increasing Adoptions Act of 2008," The National Campaign to Prevent Teen and Unintended Pregnancy, July 2009.

- Viral STDs including Herpes and Human Papilloma Virus (HPV) are not reportable, but they are exceedingly common. Overall, among sexually active adolescents, 1 in 4 will have an STD by age 21, with 1 in 2 sexually active people having an STD by age 25.
- Although STDs have serious consequences such as infertility, many STDs have no symptoms, so people may not be aware they are infected.

New York State has a plan to end the AIDS epidemic! The goal is to significantly reduce the number of new HIV infections by the end of 2020 and achieve the first ever decrease in HIV prevalence in New York State. The three point plan priorities are:

- HIV testing
- Access to care and support to stay in care, and
- Information and access to Pre-Exposure Prophylaxis (PrEP)

Ending the Epidemic (ETE) in New York State will maximize the availability of life-saving, transmission-interrupting treatment for HIV, saving lives and improving the health of New Yorkers. It will move New York from a history of having the worst HIV epidemic in the country to a future where new infections are rare and those living with the disease have normal lifespans with few complications.

New York State youth continue to have high rates of STIs which have serious health consequences including infertility and increased susceptibility to HIV infection. Currently, schools are strongly encouraged to identify their local level needs pertaining to sexual health education. This is a vital component for achieving the goal of ending the epidemic in New York State by the end of 2020.

The New York State Youth Sexual Health Plan is a vital tool which addresses HIV, STD and pregnancy prevention needs of adolescents and young adults that can assist communities in developing a plan of action for addressing identified local level needs.

New York State Youth Sexual Health Plan Goals

- 1. Promote continuity and consistency of evidence-based and medically accurate health education across the State.
- 2. Reduce the rate of HIV/STD infections.
- 3. Reduce the rate of unintended teen pregnancy.
- 4. Make available school-based HIV/STD testing and screening through school-based health centers.
- 5. Promote healthy and safe relationships and decision making (alcohol/substance use, mental health, peer pressure and partner violence).
- 6. Increase knowledge of and access to contraception and other sexual health services.
- 7. Educate professionals and youth about the difference between healthy sexual relationships and abusive ones.



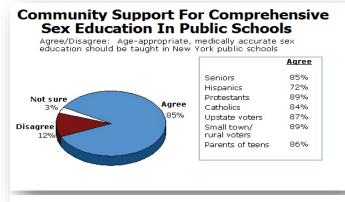


New York State Youth Sexual Health Plan

Summary in support of goals

Reproductive and sexual health are key health issues for adolescents and young adults.

Providing accurate and comprehensive information to protect adolescents' health and prepare them for responsible decision making is a public health responsibility. The New York State Youth Sexual Health Plan, consistent with the New York State Department of Health Prevention Agenda, is a guide to ensure that accurate sexual health information and quality health services are made available to all New York State youth. New



Source: January 2009 Hart Research Associates survey of a representative statewide sample of 604 registered voters. It was designed to gauge New York voters' understanding of and attitudes toward reproductive health issues in the state. The margin of error for this survey is +/- 4.0 percentage points.

York State youth should be supported in making healthy, positive choices about sexual health in order to avoid negative outcomes such as HIV/STD infections and unintended pregnancy. This is consistent with the National Coalition of STD Directors 'Advancing Sexual Health through State Sexual Health Plans' initiative⁴.

All schools are encouraged to explore whether their current approach is sufficiently comprehensive to meet students' sexual health needs as appropriate to their mission. In New York State, the goals of the plan are broadly supported by the public. A recent statewide survey (BRFSS) indicated that there was 95.2% acceptability for teaching STD prevention in high school and 89.6% for teaching STD prevention in middle school⁵. In the 2012 NYS BRFSS survey, 68% of respondents selected 13 or younger as the age at which parents should begin to talk with their child about sexuality and ways to prevent pregnancy and STDs; and only 12.4% agreed that "most teens already know enough about how to protect themselves against STDs."

 ⁴ February 20-21, 2013, Washington, DC; Advancing Sexual Health through State Sexual Health Plans Meeting; meeting of 50 key sexual health stakeholders from selected state and national partners; NCSD's Manager, Policy and Communications, Stephanie Arnold Pang; <u>http://www.ncsddc.org/</u>
 ⁵ Thomas et. al. Community Attitudes About Discussing Sexual Health: Assessing Public Opinion of Local STD Prevention Campaigns. Public Health Reports/2013 Supplement 1/Volume 128, pp. 73-80.

Strategies for accomplishing goals

The following are proposed strategies for consideration across all sectors, including the Health Care Delivery System; Employers, Businesses, and Unions; Media; Community-Based Organizations; Educational Systems, Governmental and Non-Governmental Public Health Agencies; Policymakers and Elected Officials; Other Governmental Agencies; Researchers; Individuals; Communities and Philanthropy to improve health outcomes related to HIV, STDs and unintended pregnancies.

The sexual health plan promotes collaboration and communication among all sectors within New York State for the coordination of prevention and student health services.

Identified sectors may take the lead in facilitating the recommendation but all sectors should consider the proposed action as appropriate to their mission.



Strategy 1: Promote continuity and consistency of evidence-based and medically accurate health education across the State:

Encourage communities to assess and identify local level need for comprehensive gender-neutral and Lesbian, Gay, Bisexual, and Transgender (LGBT) inclusive sexual health education. [All Sectors]

- When providing access to appropriate sexual health education for individuals, consideration must be given to comprehension ability, developmental age and other disabilities. [All Sectors]
- Improving the communication between patients and providers may be a key variable in reducing LGBT health disparities

Be safe. HIV doesn't just affect you...it affects everyone who knows you. " New Lebanon School student

since those individuals with higher health literacy have been shown to have a lower risk of developing preventable mental and/or physical health conditions. **[Health**

Care Delivery System]

- The "Dignity for All Students Act" seeks to provide all students with a safe and supportive environment free from discrimination, intimidation and bullying on school property, on a school bus and/or at school functions. [Education System]
- School health service staff in these settings should continue to help educate transgender youth in their health rights, help them understand their unique health needs, and connect them to LGBTQ-friendly medical providers in their communities. [Education System]
- Build the capacity of local education agencies, administrators, teachers, health coordinators, health educators and other school staff, to coordinate and deliver educational programs with an understanding of the relationship between personal behaviors, health and academic achievement within the context of positive youth-development based on local level decision making. *[Education System]*
- Support the establishment of formal partnerships between State and Federal agencies focused on development of a coordinated school health approach providing education professionals responsible for coordinating health education, teaching health education and provision of school health services with a bestpractice framework of evidence-based resources, tools and trainings. [State and Federal Agencies, Health Care Delivery System, Education System, Governmental Agencies]
- Support the establishment of formal partnerships between local education agencies, and/or school clinics and community-based organizations to deliver health education and support teacher training programs. [Health Care Delivery System, Local Education Agencies]
- Provide educational opportunities for educators, parents and other adults to gain knowledge and skills for communicating with youth about sexual health.
 [Communities]

- Acknowledge sexuality as a natural, healthy part of being human and facilitate opportunities to address healthy relationships, gender and sexual orientation, stereotypes, abstaining from or delaying sex, communication, decision making, pleasure, contraception, sexual protection (male/female condoms, dental dams; promote condom + hormonal contraception as most protective for sexually active teens), peer pressure, human development and community resources. [Individual]
- Normalize the discussion of sexual health. [Communities]
- Reduce the stigma of HIV/STD infection. [Communities]
- Forge partnerships between the local education and local health departments and community based organizations to support the efforts of schools in providing comprehensive sexual health education. [Communities]



- Provide age-appropriate, medically accurate, unbiased sexual health education. [Health Care Delivery System]
- Involve youth leaders in the development of new policies to effectively address young people's needs employing a positive youth development approach.
 [Community, Health Care Delivery System, Policymakers and Elected Officials]
- Ensure policies are inclusive of community values, needs and populations (i.e., family income, age, race, gender identity, ability, immigration status, sexual orientation, ethnicity and geography). [Policymakers and Elected Officials]
- Provide support to local education agencies choosing to integrate sexual health education programs, following State and Federal Laws and aligned with the New York State Education Department Commissioner Regulations 135.3 Health education. (i.e., Development of HIV/AIDS Advisory Councils, Condom Availability Program). [Governmental Agencies, Education System]
- Increase the availability of evidence-based, trauma-focused sexual health education for high-risk youth.⁶ [Governmental Public Health Entities, Communities, Governmental Social Services, Governmental Behavioral Health Services]
- Encourage the implementation of demonstration models of comprehensive evidence-based trauma-focused sexual health education programs specifically designed for the need of high-risk youth in foster care. [Governmental Public Health Entities, Communities, Governmental Social Services, Governmental Behavioral Health Services, Researchers]
- Ensure that youth in Office of Alcoholism and Substance Abuse Services (OASAS) sponsored substance abuse treatment settings have access to comprehensive evidencebased sexual health education with a special focus on the

⁶ Trauma-focused health education and/or services would allow for the reality of discussing averse childhood experiences in a safe and supportive environment within the context of learning about healthy sexual behavior and relationships. Offering trauma-focused health education to high-risk youth addresses the significant impact of childhood sexual trauma in relation to self-identity and one's ability to engage in healthy relationships.

effect of alcohol, tobacco and other drugs. [Governmental Behavioral Health Services, Governmental Public Health Entities, Communities]

• Inform, educate and empower people about health issues and provide information on disease prevention, symptoms and treatment through HIV/STD prevention websites, and links to available STD clinics. **[Other Governmental Agencies]**

Strategy 2: Reduce the rate of HIV/STD infections:

Increase young people's sexual health knowledge, skills and self-confidence. [All Sectors]

- Ensure access to sexual health care for all youth. [Communities]
- Increase awareness and access to HIV pre-exposure prophylaxis (PrEP).⁷ [Health Care Delivery System]
- Pair youth with adult mentors to enforce positive messages and education that promote healthy sexuality. **[Community Based Organizations]**
- Promote the use of evidence-based medically accurate and best-practice health curricula and programs. *[Education System]*

STD/HIV Testing The only way to know for sure if you have an STD or HIV is to get tested.

- Monitor provider adherence to screening guidelines

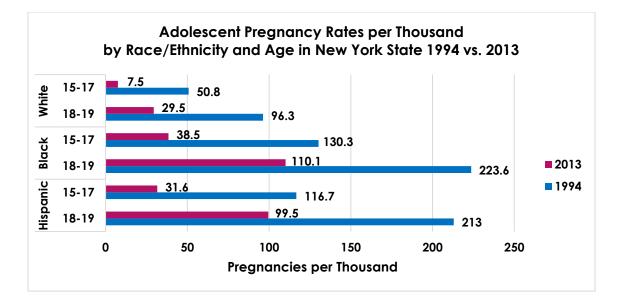
 (e.g., U.S. Preventive Services Task Force recommendation to screen all sexually active women under age 25 for Chlamydia) and the mandatory offer of HIV testing for all persons 13 years of age and older in New York State. [Governmental Agencies]
- Create and promote positive opportunities and connections for youth by engaging them as partners in decision making. **[Other Governmental Agencies]**
- Promote and fund age-appropriate comprehensive sexuality education programs beginning in elementary school for districts choosing to implement. [Governmental Agencies]
- Promote and fund professional development on comprehensive evidence-based sexual health education, with special attention to trauma-focused sexual health education. [Governmental Public Health Entities, Communities, Governmental Behavioral Health Services, Governmental Social Services, Researchers]
- Identify and address health inequities. [All Sectors]

⁷ PrEP is the use of anti-HIV medications as a form of HIV prevention and is meant to be used consistently every day with other prevention options such as condoms. PrEP may be an option for eligible individuals who have ongoing behavior that places them at high risk for HIV infection. <u>http://www.health.ny.gov/diseases/aids/general/prep/index.htm</u>

- Promote positive youth development.⁸ [All Sectors]
- Engage youth, parents and other adults as partners in promoting youth sexual health. [All Sectors]
- Use social media and social network strategies to engage persons with high risk behaviors. [Health Care Delivery System, Media, Community Based Organizations, Governmental and Non-Governmental Public Health Agencies, Communities]
- Increase awareness of the importance and availability of the HPV vaccine for teens and improve vaccine uptake in New York State. (Health Care Delivery System).
- Engage media to promote youth sexual health. [All Sectors]
- Utilize social media and youth voices to increase awareness of youth related sexual health issues and use of services. **[All Sectors]**

Strategy 3: Reduce the rate of unintended teen pregnancy:

Encourage as appropriate the implementation of comprehensive evidence-based adolescent pregnancy prevention programming in targeted high-need communities. [All Sectors]



⁸ Positive youth development is a way to think about young people which focuses on their assets (capacities, strengths and developmental needs) and not on their deficits (risks, negative behaviors and problems). This approach calls for the shifting of attention away from a focus on the elimination of problems. It develops strategies that increase young people's exposure to positive and constructive relationships and activities that promote healthy, responsible and compassionate choices. A program that uses a positive youth development approach works with young people to help them realize their fullest potential.

- Increase young people's knowledge of, and access to, comprehensive reproductive health care services. In particular, increase young people's utilization of family planning services by referring them as appropriate to family planning programs in their communities and facilitating the enrollment of those eligible in the Medicaid Family Planning Benefit Program (FPBP).⁹ [Health Care Delivery System]
- Educate and engage men in sexual and reproductive health care decision-making to provide support and promote their well-being and that of their partners. [Health Care Delivery System]
- Provide patient education focused specifically on correct, consistent use of highly effective contraception and use of dual protection. Teach teens and young adults to negotiate contraceptive use with their partners. [Health Care Delivery System]
- Identify and promote educational messages on delaying sexual activity, consistent contraceptive use, preventive health care, taking individual responsibility, and the male's role in preventing pregnancy. [Health Care Delivery System, Media, Communities]
- Integrate preconception care, including strategies to prevent unintended pregnancy, into care delivered by pediatricians, obstetricians/gynecologists, adolescent medicine specialists and family practice physicians. [Health Care Delivery System]
- Integrate, as appropriate, discussions of a child's abuse history, mental health and reproductive health history into every stage of transition planning for youth in foster care.¹⁰ [Health Care Delivery System, Governmental Behavioral Health Services, Governmental Social Services]
- Provide technical assistance to local educational agencies requesting to implement a local level school Condom Availability Program, and to ensure alignment with the New York State Education Department Commissioner's Regulations §135.3 (c) (2-ii), while maintaining compliance with State and Federal Laws. [Education System]



- Increase the number of school-based health centers in middle and high schools providing comprehensive reproductive health care and family planning services. [Health Care Delivery System]
- Foster working professional relationships between secondary school health services and community based reproductive health care providers as appropriate to increase access to age appropriate medically accurate sexual health education and health care services. [Health Care Delivery System]
- Identify opportunities to address youth with special circumstances such as youth in foster care. Youth in foster care have significantly higher rates of sexual activity and

 ⁹ The FPBP allows for a period of presumptive eligibility which allows individuals to receive immediate access to family planning services pending a final determination of their eligibility for FPBP.
 ¹⁰ Fostering Connections to Success and Increasing Adoptions Act of 2008, P.L. 110-351.

pregnancy than their peers in the general population. [Communities, Governmental Public Health]

- Collaborate with the State Education Department and local education agencies to encourage the implementation of evidence-based, age-appropriate sexual health education in schools. [Governmental Public Health]
- Increase evidence-based education on Fetal Alcohol Spectrum Disorders. With over 50% of pregnancies being unintended, many young women don't know they are pregnant until the 7th week.¹¹ [Governmental Public Health Entities, Communities, Governmental Behavioral Health Services]
- Ensure access to, and affordability of, confidential contraceptive services and access to no-cost contraception in accordance with the federal Affordable Care Act (ACA). [Policymakers and Elected Officials]

Strategy 4: Make available school-based HIV/STD testing and screening through school-based health centers:

As appropriate link students to comprehensive sexual health care. [All Sectors]

- Make referrals to testing, screening and other sexual health resources available and accessible for identified needs. [Health Care Delivery System]
- Solicit and respond to youth feedback to improve services. [Health Care Delivery System]
- Promote and maintain knowledgeable school nurses to bolster and increase professional knowledge base in working with youth. [Education System]
- Promote and maintain knowledgeable school-based health center workers to bolster and increase professional knowledge base in working with youth. [Governmental Public Health]
- Ensure sexual health services are welcoming to all and are offered within and beyond traditional health care settings.
 [Communities]



- Involve youth, parents and other adults in promoting sexual health services that are informed, nonjudgmental, youth-friendly and culturally sensitive. [Communities]
- Inform school nurses and school medical directors of resources available to students in the community regarding sexual health in alignment with State and Federal confidentiality laws (FERPA & HIPPA). [Education System/Health Care Delivery System]

¹¹ Alcohol exposure to the fetus during pregnancy can cause Fetal Alcohol Spectrum Disorders with lifelong learning implications for the growing child. There is no safe amount of alcohol during pregnancy.

Strategy 5: Promote healthy and safe relationships and decision making:

Promote healthy relationship skills to prevent adolescent relationship abuse and sexual violence by engaging young people, parents and caregivers and other trusted adults to assist young people to build social and emotional skills for healthy relationships based on equality, respect and trust. [All Sectors]

- Educate young people about the risk of using alcohol and illicit drugs or misusing prescription drugs. These drugs lead to unhealthy decision-making around sexual health as well as addiction. [Health Care Delivery System, Education System]
- Educate parents, school personnel, other trusted adults, and young people themselves about the risk of opioid overdose, how to recognize this potentially catastrophic event, and how to intervene appropriately when it is encountered. [Health Care Delivery System, Education System]
- Promote safe places within the community for young people to seek support and discuss their lives and pressures that may lead to unhealthy choices. [Education System, Communities]
- Expand mental health and psychosocial services at school-based health centers. [Behavioral Health Care Delivery System, Education System, Governmental Agencies]
- Destigmatize behavioral health issues and educate stakeholders about the prevalence of depression, anxiety, trauma, impulse control disorders, suicidality and their impact on school performance, family life and friendships. [Behavioral Health Care Delivery System, Education System]
- Educate stakeholders and students to assist young people with understanding anger and its underlying contributors and develop strategies for anger management.
 [Behavioral Health Care Delivery System, Health Care Delivery System, Education System, Governmental Agencies]
- Educate stakeholders to assist young people with seeing the warning signs for teen suicidality and high risk activities among their peers. [Behavioral Health Care Delivery System, Health Care Delivery System, Education System]
- Educate stakeholders and students to assist young people with identifying sources of low self-esteem and develop strategies to build self-worth and skills to confidently and clearly communicate thoughts and feelings. [Behavioral Health Care Delivery System, Education System, Communities]
- Educate stakeholders and students about school and community resources and policies related to bullying, harassment, and peer pressure, including cyber bullying. *[Education System, Communities]*

- Promote young people's resiliency against peer pressure through healthy, fun and engaging educational activities using a positive youth development model. [Education System, Communities]
- Educate community members, health care professionals and others who have regular engagement with young people about the risks and warning signs of bullying, harassment, and peer pressure and identify resources young people can use. [Health Care Delivery System, Education System]
- Educate school staff and community members who may encounter young people experiencing partner violence about supportive services, resources, and effective communication skills for working with persons in crisis.
 [Health Care Delivery System, Local Education System, Law Enforcement, Governmental/Non-Governmental Public Health]
- Promote healthy community norms and awareness through open discussion, policy and education related to evidence-based trauma-focused sexual health education for high-risk youth. [Governmental Public Health Entities, Communities, Governmental Social Services, Researchers]
- Promote healthy community norms and awareness through open discussion, policy and education related to evidence-based trauma-focused sexual health education for youth in recovery. [Governmental Behavioral Health Services, Governmental Public Health Entities, Communities]

Signs and Symptoms

Any one of the following behaviors can be a symptom of normal adolescence. However, keep in mind that the key is change. It is important to note any significant changes in your child's physical appearance, personality, attitude or behavior.

Physical Signs

- Loss or increase in appetite; unexplained weight loss or gain
- Inability to sleep or unusual laziness
- o Smell of substance on breath or clothes
- o Nausea, vomiting, sweating, shakes of hands, feet or head
- Red, watery eyes; pupils larger or smaller than usual; blank stare, thick tongue, slurred speech

Behavioral Signs

- Change in attitude/personality
- o Change in friends; new hangouts

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- o Change in activities, hobbies or sports
- o Drop in grades or work performance
- o Isolation and secretive behavior
- o Moodiness, irritability,

nervousness, giddiness

- Promote healthy community norms and awareness through open discussion, policy and education related to partner and domestic violence issues. **[Communities]**
- Promote positive peer, family and community role models for all young persons. [Communities, Individuals]
- Educate community members, health care professionals and others who have regular engagement with young people about risks and warning signs of intimate partner violence, and local, state and national resources young people can use to get help. [Communities, Governmental/Non-Governmental Public Health]
- Encourage schools and community organizations serving youth to effectively implement evidence-based and promising strategies to prevent partner and sexual violence. [Community Based Organizations, Education System]

- Encourage and promote educational opportunities for youth on the characteristics of healthy relationships to ensure the development of the skills needed to create meaningful and fulfilling relationships both in adolescence and young adulthood. [Communities, Education System]
- Educate and engage men in sexual and reproductive health care decision-making to provide support and promote their well-being and that of their partners. [Health Care Delivery System]
- Increase awareness, positive norms, self-efficacy, and skills among youth to establish respectful, healthy relationships and environments to prevent partner violence. [All Sectors]

Strategy 6: Increase knowledge of and access to contraception and other sexual health services:

Develop high-quality, accessible, nonjudgmental, developmentally appropriate and youth-friendly health services. Refer as appropriate to sexual health services that are welcoming and within and beyond traditional health care settings. These environments help young people feel motivated and safe to ask questions and express themselves while feeling trusted to make the best choices for themselves. [All Sectors]

- Increase access to confidential services. [Health Care Delivery System]
- Recommend HIV/STD testing and screening programs through school-based health centers (SBHCs). [Health Care Delivery System]
- Develop and disseminate to providers evidence-based clinical guidelines and tools to promote patients' optimal well-being through use of preventive health services. [Health Care Delivery System]
- Make clinical services available to youth in a variety of settings including primary care practices, family planning clinics, STD clinics, school-based health centers and others. [Health Care Delivery System]
- Connect with community clinics to enhance all types of services to include physical, mental and social health as well as access to sexual health care. [Health Care Delivery System]
- Initiate referral systems among specialized clinics. [Health Care Delivery System]
- Provide clinic hours that accommodate teens' schedules. [Health Care Delivery System]
- Provide emergency contraception to youth ages 15 and older. [Health Care Delivery System, Governmental Public Health, Communities]
- Support young adults in making their own healthy choices by creating safe, positive community spaces and activities for young adults to develop healthy relationships and feel welcome. [Health Centers, Communities, Governmental Public Health Entities]

- Create school-based focus groups to gather input from students regarding sexual health and what their thoughts are on promoting this in their classrooms.
 [Communities]
- Train youth to become peer educators to provide HIV/STD prevention education. [Communities]
- More effort is needed to provide effective school and community-based interventions to ensure all youth have the knowledge, skills, resources and support necessary to avoid HIV infection. Health care providers and public health agencies should ensure youth are tested for HIV, have access to sexual health services and receive ongoing health care and prevention services. [Communities]
- Solicit and respond to youth feedback to improve sexual health services. **[Communities]**
- Encourage youth to implement projects in response to their needs. [Communities]
- Create interactive websites promoting education and awareness of contraception and other sexual health services. **[Communities]**
- Utilize peer education or teen theatre to educate on sexual health risks and community resources. **[Communities]**
- Organize youth to provide education for parents and providers. [Communities]
- Organize community forums featuring youth sharing their experiences with accessing sexual health services¹². [Community Based Organizations]
- Encourage use of social networking sites or blogs for online discussions as appropriate. [All Sectors]
- Encourage creating youth-designed public service announcements for TV and radio as appropriate. [All Sectors]

Strategy 7: Educate professionals and youth about the difference between healthy sexual relationships and abusive ones:

Educate the public about the prevalence of sexual abuse and the difference between abusive versus healthy sexual relationships. [All Sectors]

- Provide state of the art trainings for law enforcement, mandated reporters, and adult bystanders on the signs and prevalence of sexual abuse. [Governmental Agencies, Community Based Organizations]
- Encourage implementation of age appropriate curricula in schools to teach children to empower themselves and stay safe. [Government, Education System]

¹² Youth focused websites: <u>http://stayteen.org/frontpanel</u>; <u>http://nysyouth.net/</u>; <u>http://sexetc.org/</u>

- Integrate trauma informed care practices into juvenile justice, child welfare and other systems dealing with children who may have experienced some form of maltreatment, when appropriate. [Governmental Agencies, Education System, Community Based Organizations]
- Train mental health professionals in trauma focused cognitive behavioral therapy. [Government Agencies, Community Based Organizations]

References & Resources

The following resources provide evidence-based information that may inform planning and may assist with implementation of the New York State Sexual Health Plan.

100 Questions and Answers about HIV; http://www.health.ny.gov/publications/0213.pdf

A Guidance Document to Achieving the New York State Standards in Health Education, November 2005 http://www.p12.nysed.gov/sss/documents/GuidanceDocument4.25.update.pdf

ACT for Youth; http://www.actforyouth.net/

Act Youth Network is a group of young people from all over New York State who are working to improve their health and wellness and the communities they live in http://nysyouth.net/

Association of State and Territorial Health Officials (ASTHO) <u>STD Prevention Resources for Public Health Leadership</u>

http://www.astho.org/Infectious-Disease/Hepatitis-HIV-STD-TB/Sexually-Transmitted-Diseases/STD-Prevention-Resources-for-Public-Health-Leadership/

STD Prevention in a Changing Environment: Opportunities for Public Health Leadership Engagement

http://www.astho.org/Programs/Infectious-Disease/Hepatitis-HIV-STD-TB/Sexually-Transmitted-Diseases/STD-Prevention-in-a-Changing-Environment/

Integration of Public Health and Primary Care: A Practical Look at Using Integration to Better Prevent and Treat Sexually Transmitted Diseases http://www.astho.org/Programs/Infectious Disease/Hengtitis HIV/STD TB/Sexually

http://www.astho.org/Programs/Infectious-Disease/Hepatitis-HIV-STD-TB/Sexually-Transmitted-Diseases/STD-Integration-Report/

Bleakley A, Hennessy M, Fishbein M. Public opinion on sex education in US schools. Arch Pediatric Adolesc Med. 2006;160:1151-1156

CDC Youth Risk Behavior Surveillance System (YRBS) http://www.cdc.gov/healthyyouth/data/yrbs/index.htm CDC standardized data on school health policies, that includes STD/HIV teen pregnancy metrics

http://www.cdc.gov/healthyyouth/profiles/index.htm

Delaware Youth Sexual Health Plan was developed to reduce the high teen pregnancy and STI/HIV rates in Delaware.¹³

Developmental Disabilities Resource from Planned Parenthood <u>http://www.plannedparenthood.org/ppnne/development-disabilites-sexuality-31307.htm</u>

Eisenberg ME, Bernat DH, Bearinger LH, Resnick MD. Support for comprehensive sexuality education: Perspectives from parents of school-age youth. J Adolesc Health. 2008;42(4):352-359

Ending the AIDS Epidemic in New York State http://www.health.ny.gov/diseases/aids/ending_the_epidemic/

Facts of Life...and More: Sexuality and Intimacy for People with Intellectual Disabilities Edited by Leslie Walker-Hirsch, M.Ed., FAAMR Book written to help professionals and teachers provide the support and education that adults with intellectual disabilities need. Publisher is Paul H. Brookes.

For Goodness Sex: Changing the Way We Talk to Teens about Sexuality, Values and Health (2014) - Al Vernacchio.

Futures without Violence http://www.futureswithoutviolence.org/section/our_work/tweens_and_teens

Guidance to School Districts for Creating a Safe and Supportive School Environment For Transgender and Gender Nonconforming Students

http://www.p12.nysed.gov/dignityact/

¹³ Delaware Youth Sexual Health Plan; Delaware Health and Social Services, Division of Public Health; Addressing Adolescent Pregnancy and STI Prevention; Teen Pregnancy Prevention Advisory Board; http://dhss.delaware.gov/dph/chca/files/deyouthshsp.pdf; January 2011.

Hart Research Associates Survey Results (2009)

http://readme.readmedia.com/Poll-Shows-85-of-New-Yorkers-Support-Sex-Educationfor-Youth/959314

I wanna know website (from the American Sexual Health Association) http://www.iwannaknow.org

Impact; Published by the Institute on Community Integration & Research and Training Center on Community Living; Volume 23, Number 2, Spring/Summer 2010: Identity, Disability, and Sexuality: Reflections from a Son and His Father http://ici.umn.edu/products/impact/232/

Kids' Well-being Indicators Clearinghouse (KWIC); http://www.nyskwic.org

Kosciw, J. G., Greytak, E. A., Palmer, N. A., & Boesen, M. J. (2014). The 2013 National School Climate Survey: The experiences of lesbian, gay, bisexual and transgender youth in our nation's schools. New York: GLSEN.

National Dissemination Center for Children with Disabilities (NICHCY) http://nichcy.org/schools-administrators/sexed

National Youth HIV + AIDS Awareness Day

Posted by AIDS.gov 4.11.2013

http://blog.aids.gov/2013/04/national-youth-hiv-aids-awareness-day.html

At AIDS 2012, the international AIDS conference, youth advocates announced the inauguration of National Youth HIV + AIDS Awareness Day (NYHAAD) to be marked on April 10, 2013. In establishing this observance, Advocates for Youth and the eleven other founding partners are recognizing the key role of youth in our collective response to HIV. The organizers note that "the creation of National Youth HIV & AIDS Awareness Day is a step toward addressing the needs of young people in the fight against HIV and AIDS."

New York has two offices of the US Committee for Refugees & Immigrants (Albany and Buffalo) and they have a trafficking grant/project; <u>http://www.refugees.org/</u>

New York State Department of Health Adolescent Sexual Health Work Group Guiding Principles for Sexual Health Education for Young People: A Guide for Community-based Organizations. 2010 (NYSDOH Publication # 0206) http://www.health.ny.gov/publications/0206.pdf

New York State Education Department Dignity for All Students Act http://www.pl2.nysed.gov/dignityact/

New York State Education Department Office of Student Support Services School Health Education Laws, Regulations and Resources http://www.p12.nysed.gov/sss/schoolhealth/schoolhealtheducation/

Student Support Services Center; http://www.gvboces.org/NYS_SSS.cfm

Office for the Prevention of Domestic Violence; <u>http://www.opdv.ny.gov</u> Oregon Youth Sexual Health Plan reflects a positive approach to working with young people to improve their sexual health. It focuses on promoting comprehensive wellbeing rather than simply avoiding negative outcomes. When young people feel valued by their communities, have hope for the future, and are confident their actions make a difference, they are better-equipped to make positive choices about sexual health. The plan emphasizes adults' responsibility to ensure availability of accurate information, skill-building opportunities and quality health services for all.¹⁴

Pre-exposure Prophylaxis (PrEP) http://www.health.ny.gov/diseases/aids/general/prep/index.htm

Sexuality education for children & adolescents w/ developmental disabilities

http://www.albany.edu/aging/IDD/documents/parentworkbook.pdf A free, downloadable, 81-page 'parent as educator' workbook. It contains learning activities and lots of pictures covering information for grades K-12 on topics such as: helpful hints for parents, body changes, social skills and dating.

Take Charge of Your Sexual Health – What you need to know about preventive services

The National Coalition for Sexual Health (NCSH) is pleased to announce the release of a new, easy-to-use guide and website, *Take Charge of Your Sexual Health: What you need to know about preventive services.* This guide informs men and women of all ages about recommended preventive services, such as screenings, vaccines, and counseling, to help protect and improve sexual health. The guide, which was audience-tested with members of the public, includes action steps for achieving good sexual health, information about recommended sexual health services, tips on how to find and talk with a health care provider, and a list of additional sexual health resources. <u>http://nationalcoalitionforsexualhealth.org/?ref=partner</u> To view and download the guide, <u>http://www.ncshguide.org/</u>

¹⁴ Oregon Youth Sexual Health Plan; Oregon Department of Human Services; Children, Adult and Families Division; <u>http://egov.oregon.gov/DHS/children/teens/tpp/#actionagenda;</u> 2009



The **NYSDOH Take Control!** campaign promotes positive sexual health to adolescent and young adult New Yorkers. Topics include abstinence and delaying sexual activity, condom use and negotiation, birth control, STD/HIV symptoms and testing, healthy relationships and communication. With Face book as the primary delivery vehicle (<u>http://www.facebook.com/takecontrol</u>), messaging is also conveyed through media placements such as high school gym boards and advertising (mobile, internet and transit) that reach a high percentage of NYS adolescents. Free print materials (e.g. a series of adolescent friendly info graphic postcards) that support the campaign are also available (<u>http://www.health.ny.gov/forms/order_forms/std_materials.htm</u>).

The Center for Sex Education http://www.sexedcenter.org/

Tortolero S, Johnson K, Peskin M, Cuccaro P, Markham C, Hernandez B, Addy RC, Shegog R, Li DH. Dispelling the Myth: What Parents Really Think about Sex Education in Schools. J Appl Resch on Children[Internet]; 2011 Oct; 2(2). Available from: http://digitalcommons.library.tmc.edu/childrenatrisk/vol2/iss2/5/

The US Preventive Services Task Force (USPSTF) Guidelines

http://www.uspreventiveservicestaskforce.org/Page/Name/recommendations

- The USPSTF recommends screening for Chlamydia in all sexually active women age 24 years or younger and in older women who are at increased risk for infection.
 Grade: <u>B Recommendation</u>.
- The USPSTF recommends screening for gonorrhea in all sexually active women age 24 years or younger and in older women who are at increased risk for infection.
 Grade: <u>B Recommendation</u>.
- The USPSTF recommends high-intensity behavioral counseling to prevent sexually transmitted infections (STIs) for all sexually active adolescents and for adults at increased risk for STIs.

Grade: <u>B Recommendation</u>.

• The USPSTF recommends that clinicians screen for HIV infection in adolescents and adults ages 15 to 65 years. Younger adolescents and older adults who are at increased risk should also be screened.

Grade: <u>A Recommendation</u>.

 The USPSTF recommends that clinicians screen all pregnant women for HIV, including those who present in labor who are untested and whose HIV status is unknown.
 Grade: <u>A Recommendation</u>.

- The USPSTF recommends screening for hepatitis C virus (HCV) infection in persons at high risk for infection. The USPSTF also recommends offering one-time screening for HCV infection to adults born between 1945 and 1965.
 Grade: <u>B Recommendation.</u>
- The USPSTF recommends that clinicians screen all pregnant women for syphilis. Grade: <u>A Recommendation</u>.

Trauma-sensitive schools; http://www.doe.mass.edu/tss/

Youth focused websites: http://stayteen.org/frontpanel http://nysyouth.net/ http://sexetc.org/ This guide is the product of the New York State Department of Health Updated 2016



New York State Department of Health Corning Tower, Empire State Plaza Albany, NY 12237 www.health.ny.gov/community/youth/development

New York State Youth Sexual Health Plan

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