Sex is a Funny Word: Addressing Common Questions about Sexual Health Services

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Sex Is a Funny Word

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You Know Sex

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Bodies, Gender, Puberty and Other Things
Disclosures

I have no financial disclosures to report
Objectives

After this presentation, educators and mentors will be able to:

1. Discuss Maine’s Reproductive Privacy Act with students/teens
2. Help students/teens understand what services are offered by MFP and what to expect at an MFP visit
3. Describe how to access MFP services
4. Identify at least 3 uses for hormonal birth control
5. Define and discuss sexual coercion
What are teens asking questions about?

Everything from “What the heck is up with the foreskin???” to “Can I get pregnant from a hot tub?”

❖ The “Am I normal?” questions.
❖ The “Test the teacher” questions, which may ask about the teachers’ own sexual experience
❖ The “I’ve heard…” questions, which tend to stem from whatever outlandish-seeming reality TV show the children have seen or heard of.
❖ The “This is something that’s worrying me” questions.

Let’s go through some together…

High school health class clinic visits– come see us!
Maine’s Reproductive Privacy Act

What services can minors access without parental consent/knowledge?

- Birth control, emergency contraception, and pregnancy testing
- STI testing and treatment
- Sexual assault forensic exams and emergency contraception
- Abortion services
- Counseling and treatment for mental health and substance use issues

We always encourage young people to involve their parents or a trusted adult in health care decisions whenever possible.
When can confidentiality *not* be guaranteed?

**Mandated Reporting**

- Suspected child abuse or neglect
- Minor is a threat to themselves or others
- Provider believes that confidentiality would cause harm or limit their ability to provide medical care

If insurance providers release info about services a minor receives, it may go to the minor’s parents

- PNTK (Parent Not To Know) visits are a way around this
OUR MISSION is to ensure that all Maine people have access to high-quality, affordable reproductive health care, comprehensive sexual health education, and the right to control their reproductive lives.
MFP’s Services

Maine Family Planning offers affordable, affirming, quality reproductive health care services statewide for patients of any age, gender, and income level.

➢ Contraception
➢ Pregnancy testing, options counseling, and preconception counseling
➢ Emergency contraception
➢ Abortion services
➢ Annual wellness visits, gynecologic, pelvic, breast exams, pap tests, and colposcopy
➢ Sexually transmitted, vaginal, and urinary tract infection testing and treatment
➢ Intrauterine insemination (IUI)
➢ Vasectomy
➢ PrEP for HIV Prevention
➢ Gender-affirming hormone therapy
Contraception Quiz!

❖ T/F: you must have an in-person visit to get birth control

❖ T/F: IUDs aren’t appropriate for teens

❖ T/F: the hormones in birth control aren’t safe to use long-term

❖ T/F: hormonal contraceptives are only used for birth control

❖ T/F: you need to take a break from birth control every now and again
Types of Hormonal Contraception

Pill
➢ With or without estrogen
➢ Taken daily

Patch
➢ Changed weekly; 3 weeks on, one week off

Ring
➢ Changed monthly; 3 weeks on, one week off; must be refrigerated

Shot
➢ Every 3 months; usually done in clinic
➢ Highest risk of weight gain and mood changes

Implant
➢ Inserted under the skin in clinic; effective for up to 5 years

IUD
➢ Inserted into the uterus in clinic; based on type, effective for 5-12 years

Emergency Contraception
Types of Non-hormonal Contraception

- Condom
- Diaphragm
- Sponge
- Cervical cap
- Spermicide
- Copper IUD
- Withdrawal
- Fertility tracking
- Sterilization
The Many Uses of Birth Control

Contraception!
- Have a plan in place before becoming sexually active
- Discuss options with a provider, research on reputable websites

Managing irregular &/or heavy/crampy periods

PMDD symptoms
- Premenstrual Dysphoric Disorder – a severe and sometimes debilitating form of PMS

Menstrual suppression
- Can be part of gender affirming services for minors that are accessible w/o parental consent and outside of HRT
Emergency Contraception

❖ T/F: plan B is equally effective for everyone
❖ T/F: emergency contraception ends a pregnancy

Common questions:
➢ When should I take emergency contraception?
➢ Do I need an appointment to get emergency contraception?
➢ Can I get emergency contraception from my pharmacy?
➢ Does emergency contraception interfere with birth control?
➢ Can I still get pregnant after taking emergency contraception?
➢ [Link to Bedsider website](https://www.bedsider.org/birth-control/emergency_contraception)
Types of Emergency Contraception

➢ **IUD**
  ➢ 99.9% effective if inserted within 5 days of unprotected sex
  ➢ Must be inserted by a licensed healthcare provider
  ➢ Equally effective regardless of BMI
  ➢ No effect on breast feeding

➢ **Ella**
  ➢ Requires a prescription
  ➢ Can be taken up to 5 days after unprotected sex
  ➢ If taken while breastfeeding, requires 36 hours of “pump and dump”

➢ **Plan B One-Step** or generic options like Next Choice One Dose, My Way, and Levonorgestrel
  ➢ Available over-the-counter at most pharmacies without having a prescription or showing your ID
  ➢ Can be taken up to 3 days after unprotected sex
  ➢ Safe to take while breastfeeding
Pregnancy Testing & Options Counseling

A chance for patients to come in for a pregnancy test and engage in discussion regarding next steps based on the results

We will always:

- Respect decisions
- Report results and discuss options neutrally
- Support teens in their decisions
- Provide resources that align with the decision
Preconception Counseling & Fertility Education

➢ Education about menstrual cycle and determining time of ovulation
➢ Evaluating factors that may contribute to difficulty conceiving
➢ Basic fertility workups
➢ General pregnancy safety education
IUI and Alternative Family Making

Alternative family making

➢ Often associated with LGBTQ+ folks but applies to many different situations!
  ➢ Let’s name a few!

➢ Important to let teens/young adults know that there are options outside of heteronormative expectations

What is IUI?

➢ Intrauterine insemination
  ➢ Washed & prepared sperm are deposited directly into the uterus
  ➢ Timed to match up with ovulation
Abortion services

Teens get abortions! It’s normal! It’s necessary! It’s healthcare!
Quiz! STIs

❖ T/F: you only need STI testing if you’ve had sex with more than one person

❖ T/F: most people know if they have an STI

❖ T/F: you can get an STI from oral sex

❖ T/F: you can tell if someone else has an STI
SEX IS SIMPLE! IT'S LOVE!

PPFT. IF YOU WANT TO KNOW ABOUT SEX, JUST ASK ME. I KNOW IT ALL.

UM, I THINK IT MIGHT BE A BIT MORE COMPLICATED THAN THAT.

CAN YOU ALL STOP TALKING? I WANT TO LISTEN TO THIS. I THINK IT'S GOING TO BE GOOD . . .
STI Facts

The prevalence of STIs is increasing! (CDC, 2021)

➢ 26 million new STIs in 2018
➢ On any given day in 2018 one in five people in the U.S. had an STI
➢ 15-24 year olds accounted for half of all new STI infections in 2018
➢ Syphilis is up by 52% and congenital syphilis by 235% from 2016
➢ Gonorrhea is up by 45% from 2016

Most people with chlamydia and/or gonorrhea have no symptoms
STI testing suggestions for patients <25

- Test all areas exposed!
- Yes, it’s possible to test positive at one site and negative at another
- Annual, routine gonorrhea and chlamydia testing for all patients <25 who are sexually active
- Test before becoming sexually active with and around 3 weeks after becoming sexually active with a new partner
- All patients 13-64 should have an HIV test at least once
- Other testing based on patient risk
- Syphilis is increasing in Maine!!!
MFP providers can also evaluate and help manage:

- UTIs
- non-STI vaginal infections such as bacterial vaginosis and yeast infections
- Lumps, bumps, and sores in the genital area
  - Simple Cysts
  - Hidradenitis Suppurativa
  - Genital warts
  - Herpes lesions
- Other genital dermatologic concerns
- Breast concerns
Routine GYN Care

This includes:

✓ Annual wellness visits
✓ Gynecologic, pelvic, and breast exams
✓ Pap tests (cervical cancer screenings) starting at age 21
✓ Colposcopy (follow-up exam to abnormal pap tests)

These are less frequently accessed by teens, but important for them to know where they can go for these services and when to start accessing
PrEP

What is PrEP?
➢ Pre-exposure prophylaxis for HIV prevention
➢ Taken daily or as-needed depending on frequency of exposure

T/F: PrEP is only available to people 18+

How do you get started on PrEP?
➢ Initial visit
➢ Quarterly follow up visits
Gender-Affirming Care

Way more than just hormones! However….

Hormone therapy can be a big part of gender affirming care for many folks.

Generally, we start providing gender-affirming hormone therapy to patients ages 18+

Informed consent model

Referrals and letters of support for gender-affirming surgical procedures
What to Expect During a Visit
Let’s Walk Through It Together!

Scheduling
➢ Online or through call center
➢ Will ask basic questions to assess what type of visit is appropriate

Front Desk
➢ Check patient in – contact info, insurance, etc

MA Intake

Provider Interaction
OUR VISION + VALUES

Since our founding in 1971, Maine Family Planning has worked to ensure all Maine people have access to high-quality, affordable reproductive health care, comprehensive sexual health education, and the right to control their reproductive lives.
Scheduling and Front Desk

➢ Scheduling can be done online or through our call center
  ➢ If you’re scheduling online and don’t know what type of visit you need, it’s best to call!
  ➢ Call center will ask for basic info about what is needed in order to get patient correctly scheduled

➢ Front desk
  ➢ Helps register new patients in the system
  ➢ Goes over insurance and sliding scale fee information
  ➢ Will ask for contact and other basic profile information
  ➢ Will confirm reason for visit

➢ It’s important to arrive early! If you’re scheduled for a 20-minute slot, it begins on the provider’s schedule at the time of your appointment. If you are 5 minutes late and then have to do 5 minutes worth of paperwork, there’s only 10 minutes left of that 20-minute slot!
MA Intake

All Patients

- Allergies, medications, medical history (current issues, surgical, GYN, obstetric), family history
- Assess substance use
- Gender identity and sexual orientation
- STI risk & testing history
- Reproductive life plan, pregnancy risk, current contraceptive method if at risk for and not seeking pregnancy

Specific to minors
- Limits of confidentiality reviewed and safety assessed
- Sexual coercion defined, strategies to resist discussed, history assessed
- Abstinence blurb (must do for funding)
- Parental involvement
Sexual Coercion

Sexual coercion is unwanted sexual activity that happens when you are pressured, tricked, threatened, or forced in a nonphysical way.

✓ Being worn down by someone who repeatedly asks for sex
✓ Being lied to or being promised things that weren’t true to trick you into having sex
✓ Having someone threaten to end a relationship or spread rumors about you if you don’t have sex with them
✓ Having an authority figure, like a boss, property manager, loan officer, or professor, use their influence or authority to pressure you into having sex

Why is this important to address?

How can we educate teens about it?

Encouraging teens to find trusted adults
Provider Interaction

Discuss reason for visit & ask relevant health questions
Provide education and counseling
Determine if exam or testing is needed
Make a follow up plan if needed
Sexual Health Resources

Home - Maine Family Planning
Bedsider Birth Control Support Network
Reproductive Health Access Project | (reproductiveaccess.org)
AMAZE - Age appropriate info on puberty for tweens and their parents
Scarleteen | Sex Education For The Real World
Healthy relationships for young adults | love is respect
Home (mecasa.org)
All-Options – all-options pregnancy support