Native Adolescent Sexual Health History

Anna Knight M.S., FNP-C
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Citizen of Cherokee Nation, having lived most of my life in an urban setting. Working in healthcare for 26 years, the last 10 as a Family Nurse Practitioner and the last 3 years for Indian Health Service California Area Youth Treatment Centers. Trained adult and pediatric forensics examiner. I am ceremonial, I am a wife, a mother, a teacher and a lifelong learner.
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Learning Objectives

At the end of this presentation, participants will be able to:

- Identify elements of the clinical environment that lend themselves to a meaningful and productive sexual history taking
- List the 5 P’s to consider when taking a sexual history with an adolescent
- Describe emerging sexual health issues for native youth
- Describe ways that sexual health and mental health intersect in the Native American population
Trigger Alert

During this presentation I will be discussing some potentially triggering content for survivors of sexual assault, molestation and incest.

If during this presentation you feel the need to take a break, please give yourself some space and take some time to ground yourself.
The four-fire model

Cultural Safety

Sovereignty

Self-determination

Reclamation

What would these fires look like on the ground while understanding the importance of the central home fire?
Question for the Audience

In your own personal culture, how did you learn about the “birds and the bees”?
Commitment
Sincerity
Reliability
Integrity
Consistency
Competence

Trust
Getting to know you

- What is their preferred name and preferred pronouns?
- Review their rights with them and include limits to confidentiality.
- Ask permission to ask a few questions about their sexual health and sexual practices.
The Five “P’s”

1. Partners
2. Practices
3. Protection from STI’s
4. Past History of STI’s
5. Pregnancy Intention

A Guide to Taking a Sexual History (cdc.gov)
PARTNERS

- Impulsivity
- Insight
- Judgement
- Depression
- Self worth
- Dissociated
- Normalized

• This information helps assess the risk for getting an STI
• Never make assumptions about a patient's sexual orientation or that of their partners
• If the partner was in the past, but not currently, it is still important to take that history
PRACTICES

Asking about sex practices will guide the assessment of the patient risk, risk-reduction strategies, the determination of necessary testing, and the identification of anatomical sites from which to collect specimens for STI testing.

- Self-Worth
- Depression
- Dissociated
- Transactional
INDIGENIZING SEXUAL HEALTH

Our Network — Native Youth Sexual Health Network
PAST HISTORY OF STI’S

- Have you ever been tested for STIs and HIV? Would you like to be tested?
- Have you been diagnosed with an STI in the past? When? Did you get treatment?
- Have you had symptoms that keep coming back?
- Has your current partner or any former partners ever been diagnosed or treated for an STI?

- Self worth
- Self care
- PTSD
- Codependency
- Advocacy
PREGNANCY INTENTION

• Do you think you would like to have children at some point?
• When do you think that might be?
• How important is it to you to prevent pregnancy until then?
• Would you like to talk about ways to prevent pregnancy?

• What does their insight/judgment look like?
• What has influenced that insight and judgement?
Final Thoughts

What other things about your sexual health and sexual practices should we discuss to help ensure your good health?
References

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Presenter Contact Information

• Anna Knight, M.S., FNP-C
• Director of Nursing/Supervisory NP
• Desert Sage Youth Wellness Center
• anna.knight@ihs.gov
• 951-708-4030