

WEBINAR FOR SRAE GRANTEEES



FYSB Family & Youth
Services Bureau

Adolescent Pregnancy
Prevention Program



Supporting Healthy Relationships and Mental Health Among Male Adolescents

Morayo Akande, MPH

Johns Hopkins Bloomberg School of Public Health (BSPH)

Arik V. Marcell, MD, MPH

Johns Hopkins School of Medicine

Annie Smith, PhD, MPH

Johns Hopkins BSPH

Kathleen Tebb, PhD

University of California, San Francisco School of Medicine

March 20, 2024
3:30–5:00 pm ET

Webinar Logistics

- Mute when not talking.
- Turn off video if you experience any connection issues.
- Type comments in the chat and questions in the Q&A.
- Time is reserved for a Q&A session at the end.
- Take off “everyone” if you want to directly message with someone.
- A transcript & recording will be available.

Agenda

- Welcome & overview
- Male adolescent development
- The state of male adolescent sexual and reproductive health (SRH)
- The landscape of adolescent dating relationships
- Frameworks to inform work with male youth
- Opportunities for promoting male engagement in SRH
- Q&A
- Wrap & adjourn



Nice to Meet You!



**Arik V. Marcell,
MD, MPH**

Johns Hopkins School of
Medicine (JHSOM)
Bloomberg School of Public
Health (BSPH)



**Kathleen Tebb,
PhD**

University of California,
San Francisco (UCSF)



**Annie Smith,
PhD, MPH**

BSPH



**Morayo Akande,
MPH, PhD Candidate**

BSPH

Meeting Norms

- **Participate and engage.** We want to hear from you, and we want you to hear your colleagues. Having a balance in participation will allow for all voices to be heard.
- **Be fully present.** Although sidebar conversations in the chat and cell phone use may be tempting, we want to ensure that our engagement is a focus so that we can maximize our time together.
- **Begin and end on time.**

Webinar Objectives

At the conclusion of this webinar, participants will be able to:

- **Explain** how young male adolescents' relationship behaviors and mental health evolve over the course of adolescence.
- **Describe** the personal, cultural, structural, and social influences on male teens' sexual health and mental/emotional well-being.
- **Explain** the different forms of intimate partner violence that affect adolescents and the contextual factors that influence use and experiences of violence.
- **Identify** strategies that youth-serving organizations and professionals can implement to foster healthy and safe relationships.

Defining Terms

Term	Definition
Sex	An individual's biological status as male, female, or something else. Sex is assigned at birth and associated with physical attributes, such as anatomy and chromosomes.
Gender	The cultural roles, behaviors, activities, and attributes expected of people based on their sex.
Gender identity	An individual's sense of their self as man, woman, transgender, or something else.
Gender expression	How an individual chooses to present their gender to others through physical appearance and behaviors, such as style of hair or dress, voice, or movement.

Source: CDC, 2022

Poll



How knowledgeable do you feel about sexual and reproductive health (SRH) for male youth?

Why Meeting Male Youth's SRH Needs Is Important

Rights:

Sexual and reproductive health (SRH) is a human right for all

- Regardless of age, sex, gender identity, orientation, race/ethnicity, physical ability, or any other dimension of identity
- Supporting male SRH can help facilitate the rights of girls and women

Health:

Improved SRH of male youth

- SRH knowledge and care receipt is low among male youth
- Groups of male youth disproportionately experience different SRH outcomes
- SRH can act as a “clinical hook” to engage male youth in other health areas

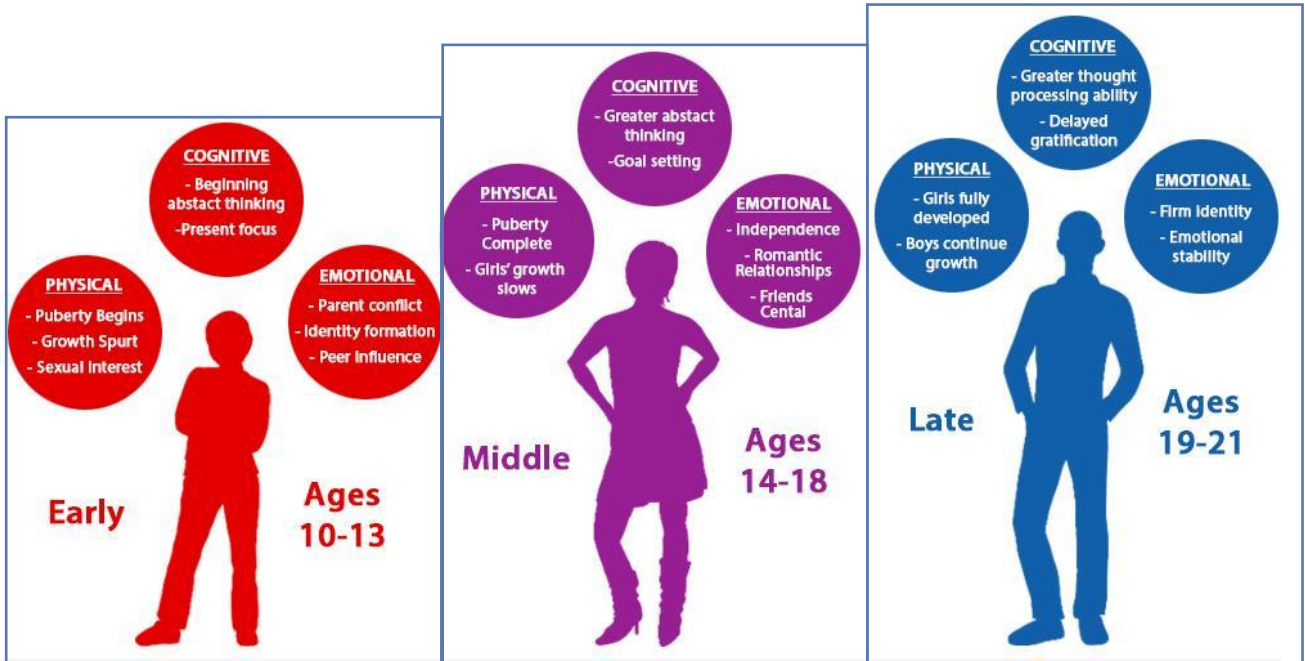
Improved SRH of partners

- Direct benefits include decreased infection transmission between partners
- Indirect benefits include shared health promotion practices

Improved child health outcomes

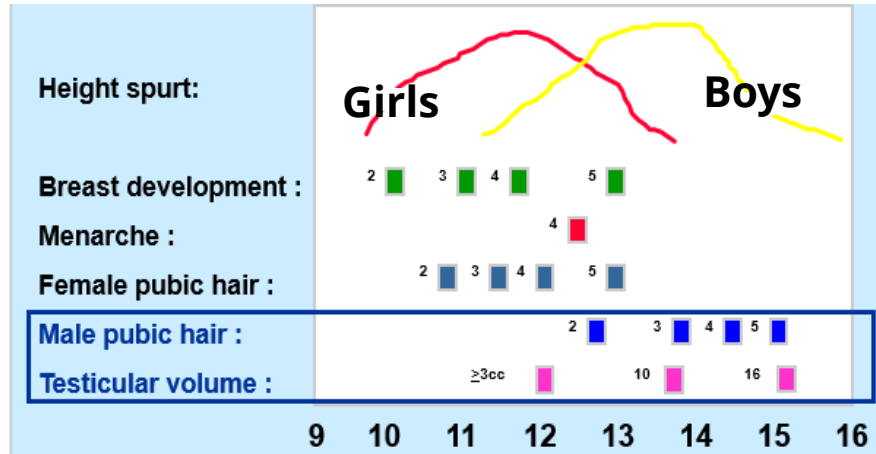
- Through improved capacity for parenting

Adolescent Development Stages & Tasks

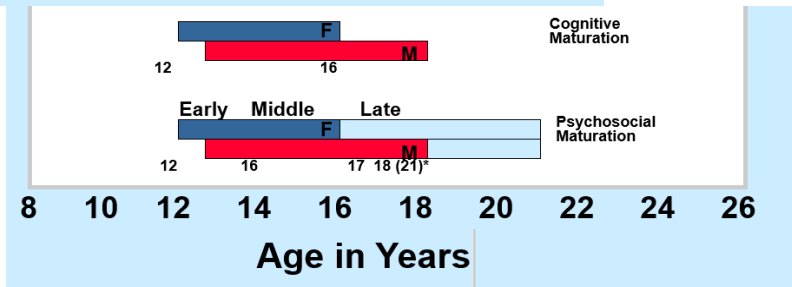


Source: Division of STD Control and Prevention, 2015

Adolescent Physical Development Tasks

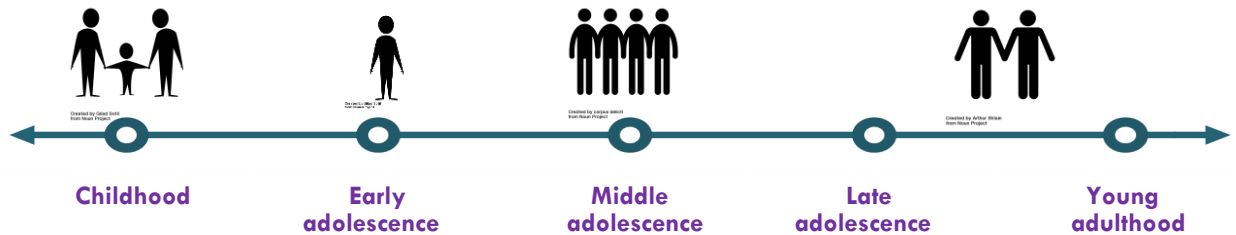


Developmentally, boys lag ~1-1.5 years behind girls for both physical & psychosocial development.



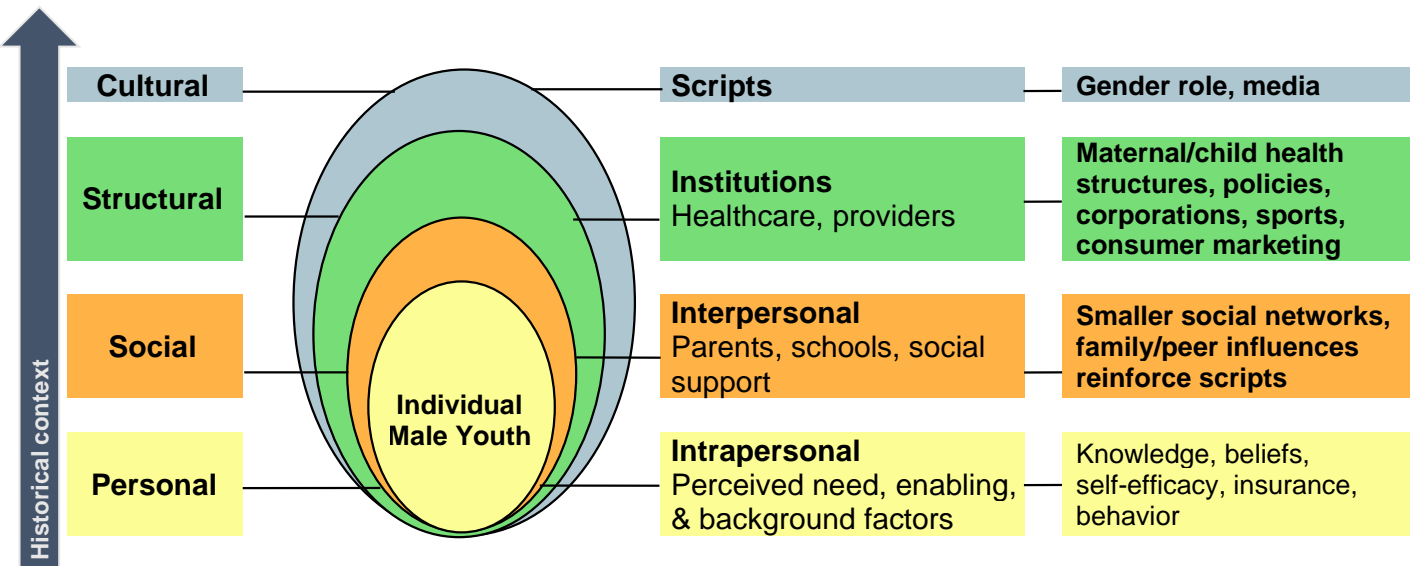
Source: CDC, 2015

Male Relationships During Adolescence



	Childhood	Early adolescence	Middle adolescence	Late adolescence	Young adulthood
Family	Intense family-focus	Receding in Family-focus	Less family-focus	Less family-focus	Less family-focus
Friends	Typically same-sex friendships	Typically same-sex friendships	Typically mixed peer groups w/ intense interactions	Peer group recedes in importance <i>Loss of same-sex friendships</i>	Peer group recedes in importance <i>Loss of same-sex friendships</i>
Intimacy	n/a	Limited dating/ Intimacy	Testing attractions May initiate sex	Forming stable relationships attractions Majority initiated sex	Forming stable relationships attractions Majority initiated sex
Health care	Connected, parent-led	↓ connection, parent-led	↓↓ connection, less parent-led	↓↓↓ connection, self-led	↓↓↓ connection, self-led

Multi-Level Influences on Male Youth



Source: Bronfenbrenner, 1979; Marcell et al., 2017

The Status of Male Sexual and Reproductive Health in the U.S.

SRH Care Receipt

Few young men receive SRH care.

Topic & ages	Female	Male
	%	%
Asked about sex		
11–14	19	9
15–19	45	15
Discussed		
Puberty (11–14)	53	40
Birth control		
14–17	37	18
15–19	33	5
Counseled on		
STIs, HIV, pregnancy	61	34
Condoms	18	7
Time spent talking about sex	36 seconds	

Although baseline SRH care receipt is not much better for female youth, fewer male youth receive SRH care.

Source: Alexander et al., 2014; Burstein et al., 2003; Chandra et al., 2011; Lafferty et al., 2002

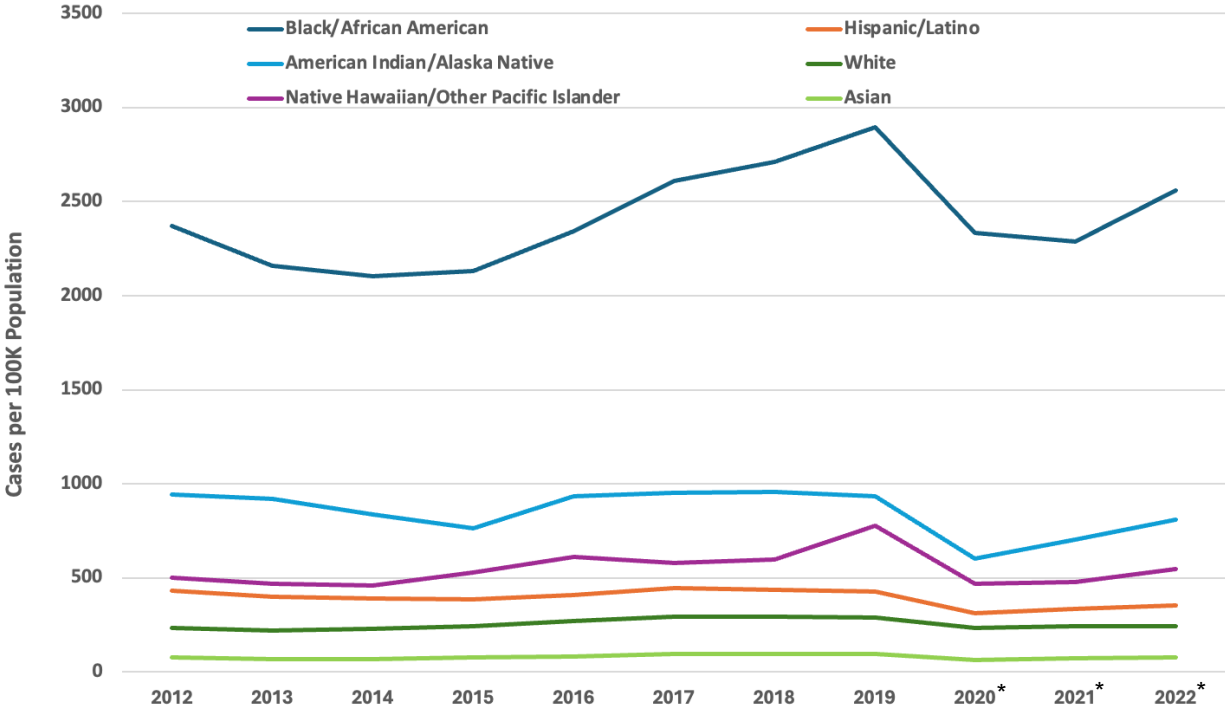
SRH Education

- Compared to white youth, Black/African American and Hispanic/Latino/e/x male youth **receive less education** on:
 - Sexually transmitted infections (STIs)/HIV
 - Birth control methods
 - Where to get birth control
- Compared to heterosexual youth, LGBTQ+ youth **receive less education** on:
 - STIs/HIV
 - Birth control methods

Source: Lindberg & Kantor, 2022

Chlamydia Rates Over Time

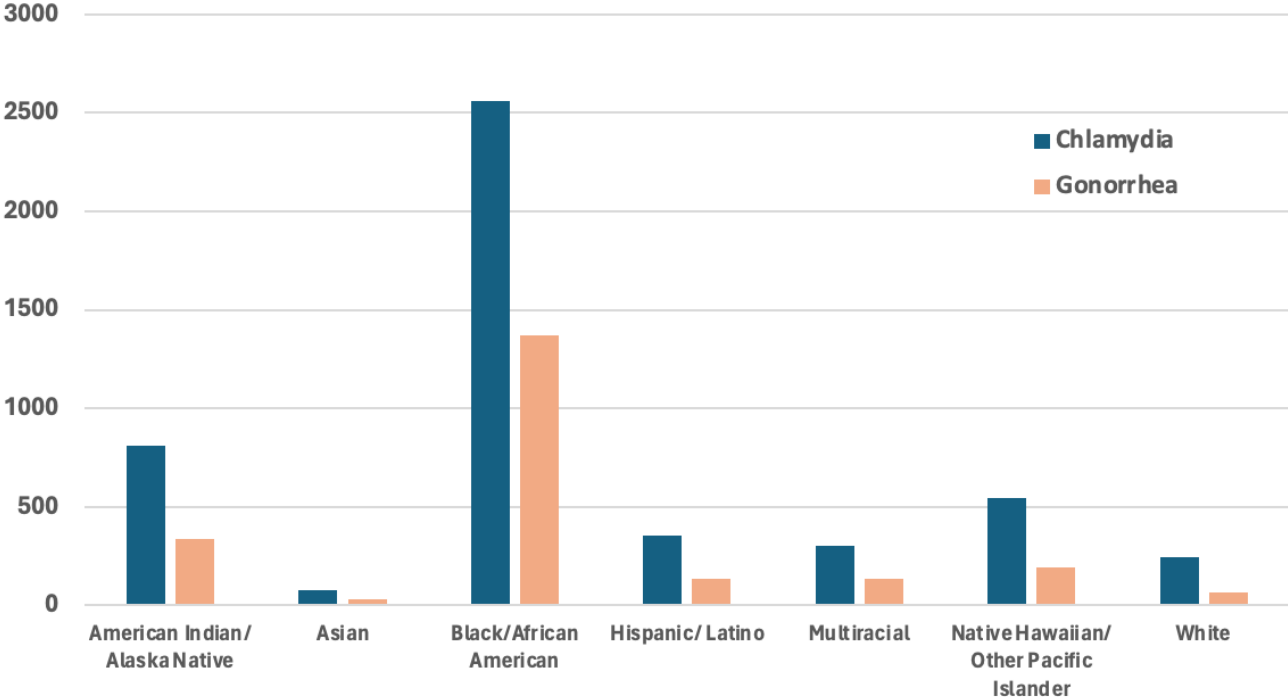
Chlamydia Rates Among Males Aged 15-19



*STI rates during COVID-19 pandemic should be interpreted with caution
 Source: National Center for HIV, Viral Hepatitis, STD, and TB Prevention, 2024

Sexually Transmitted Infections

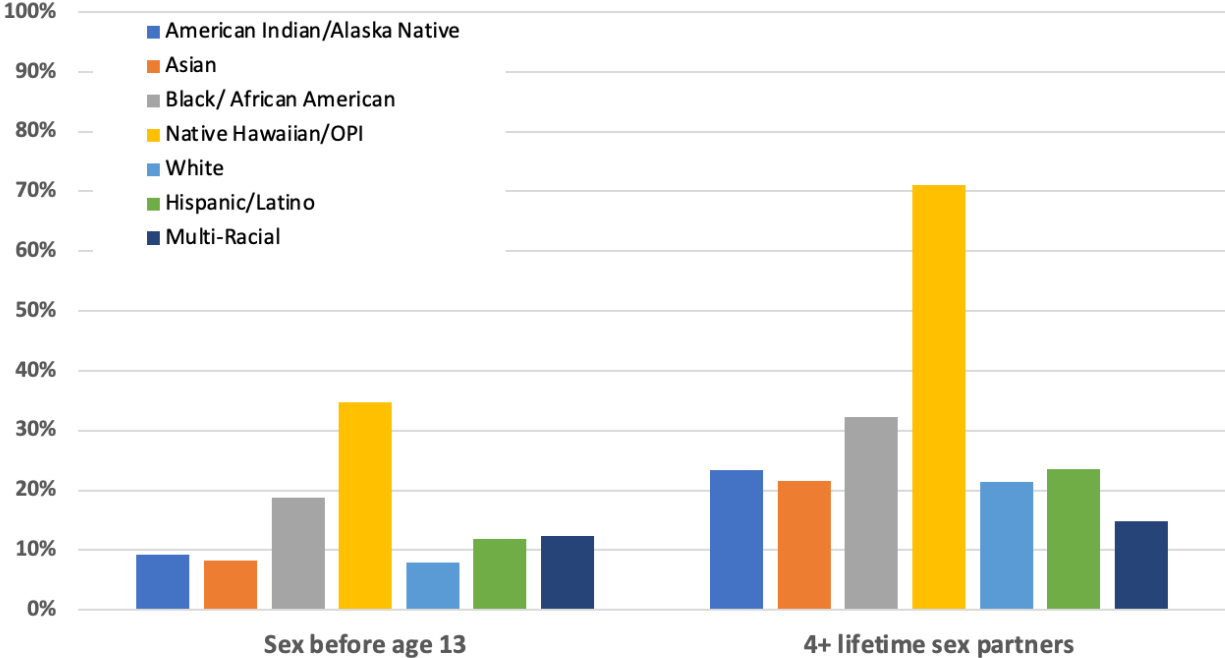
STI Cases per 100K 15-19 Year-Old Males, 2022



Source: National Center for HIV, Viral Hepatitis, STD, and TB Prevention, 2024

Sexual Behaviors and Experiences

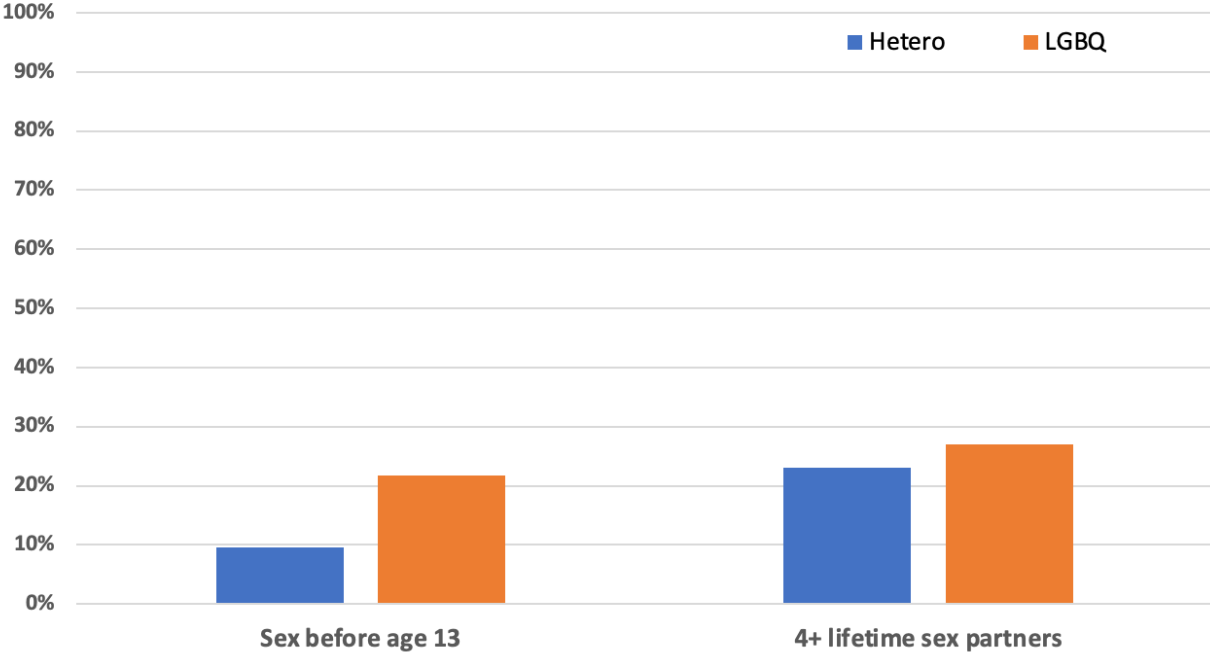
Sexual Health Indicators Among Male Youth Who Have Ever Had Sex
2021 High School YRBS



Source: CDC, 2023

Sexual Behaviors and Experiences

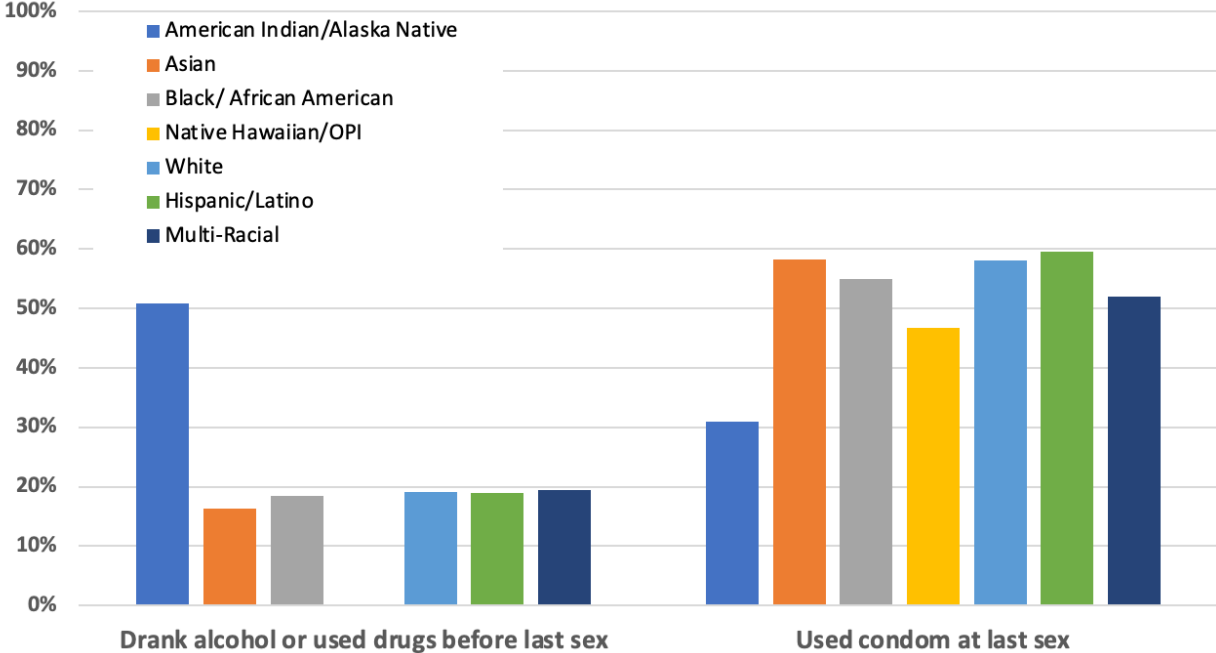
**Sexual Health Indicators Among Male Youth Who Have Ever Had Sex
2021 High School YRBS**



LGBQ = Youth who identified as Lesbian, Gay, Bisexual, or Unsure; Source: CDC, 2023

Sexual Behaviors

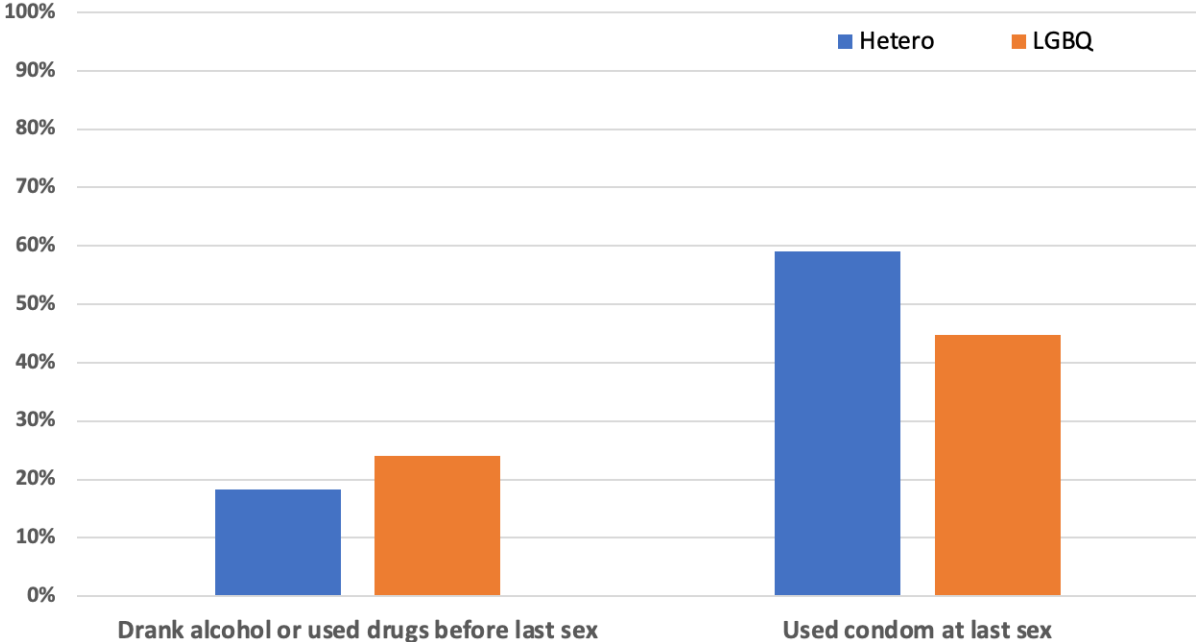
**Sexual Health Indicators Among Male Youth Who Have Recently Had Sex
2021 High School YRBS**



Source: CDC, 2023

Sexual Behaviors

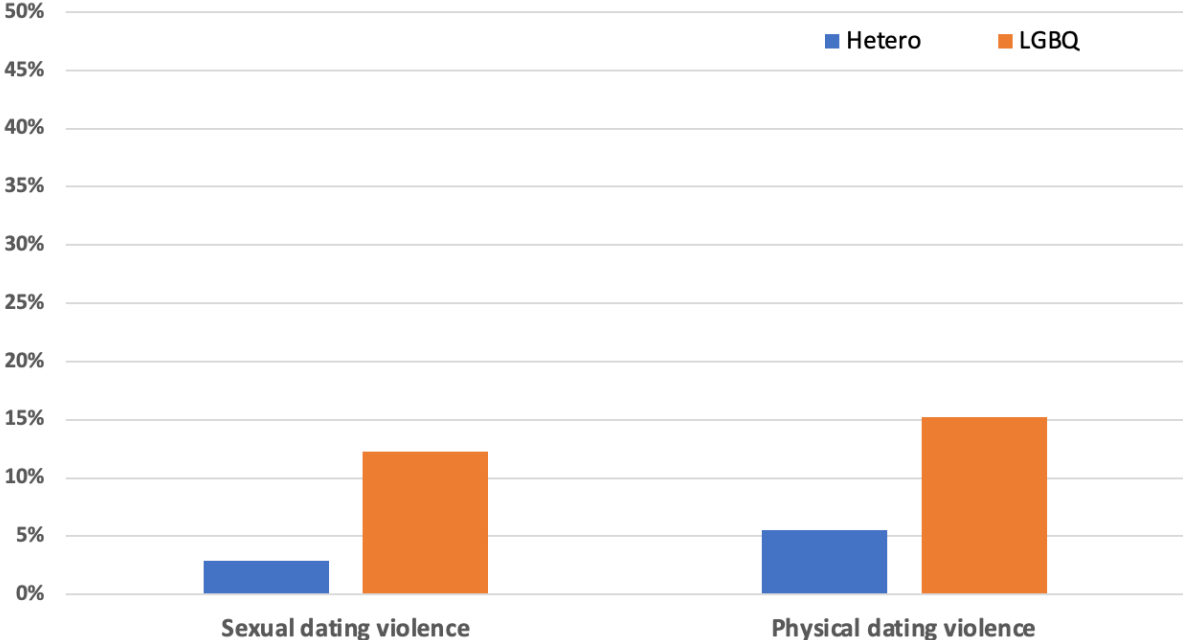
Sexual Health Indicators Among Male Youth Who Have Recently Had Sex
2021 High School YRBS



LGBQ = Youth who identified as Lesbian, Gay, Bisexual, or Unsure; Source: CDC, 2023

Physical and Sexual Dating Violence

Dating Violence Indicators Among Male Youth
2021 High School YRBS

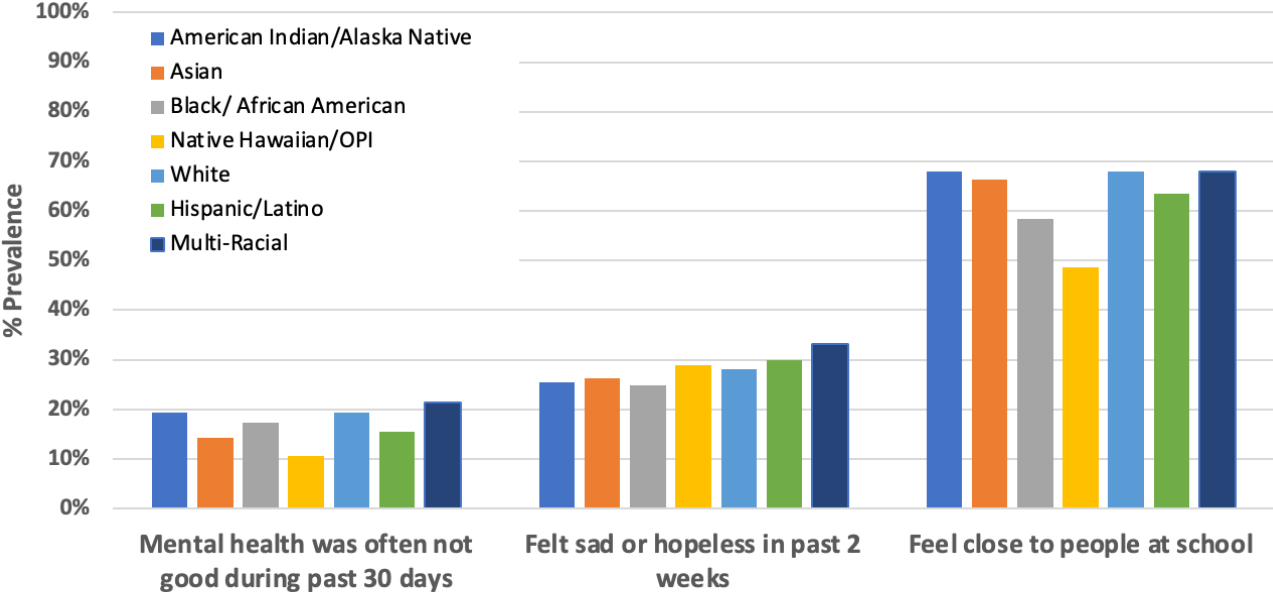


LGBQ = Youth who identified as Lesbian, Gay, Bisexual, or Unsure; Source: CDC, 2023

Mental Health Indicators

Mental Health Among Male Youth

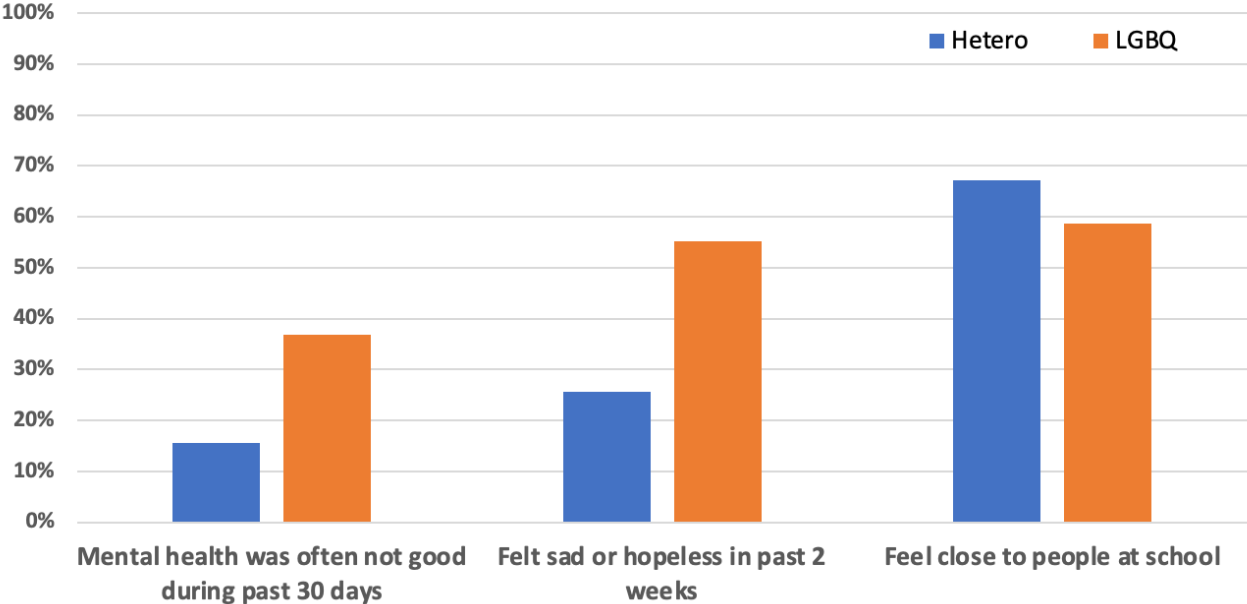
Mental Health Indicators Among Male Youth
2021 High School YRBS



Source: CDC, 2023

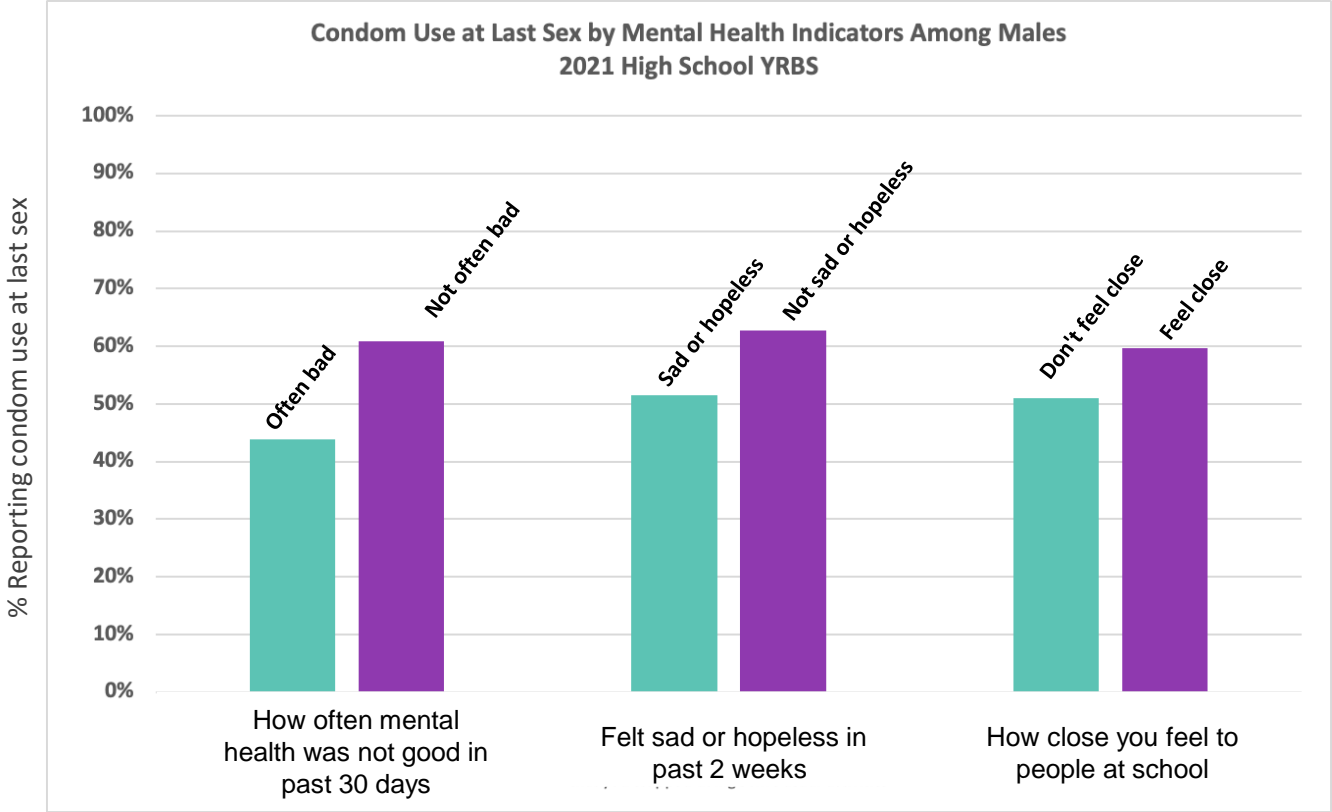
Mental Health Among Male Youth

Mental Health Indicators Among Male Youth
2021 High School YRBS



Source: CDC, 2023

Mental and Sexual Health Are Related



The Landscape of Adolescent Dating Relationships

Overview of Adolescent Dating

Adolescent dating relationships play a significant role in shaping health and well-being

- Common for dating to start in mid-adolescence (ages 14–15).
- 35-59% adolescents have been in some kind of dating relationship.

Among male adolescents:

- 29% high schoolers have ever had sex.
- 19% high schoolers are currently sexually active.

It's not just about sex!

Source: CDC, 2023; Lenhart et al., 2015; Tienda et al., 2022

Importance of Healthy Relationships

Dating is a normal & important part of adolescent development

- Social skills; emotional growth

Adolescent relationships can vary widely and change rapidly

- Age 16: relationships typically last for 6 months
- Age 18: relationships typically last a year or more

There are many influences on relationship quality

- Emotional closeness, trust, understanding, vulnerability
- Physical affection & sexual exploration
- Gender may impact how intimacy is understood and expressed
- Technology has a huge impact
 - Research struggles to measure this impact

Source: Moreira et al., 2021; OPA, n.d.

Activity

What are some societal norms around teen boys and relationships?

pollev.com/morayoakande163

or

Text **morayoakande163** to **37607**



Addressing Gender Norms

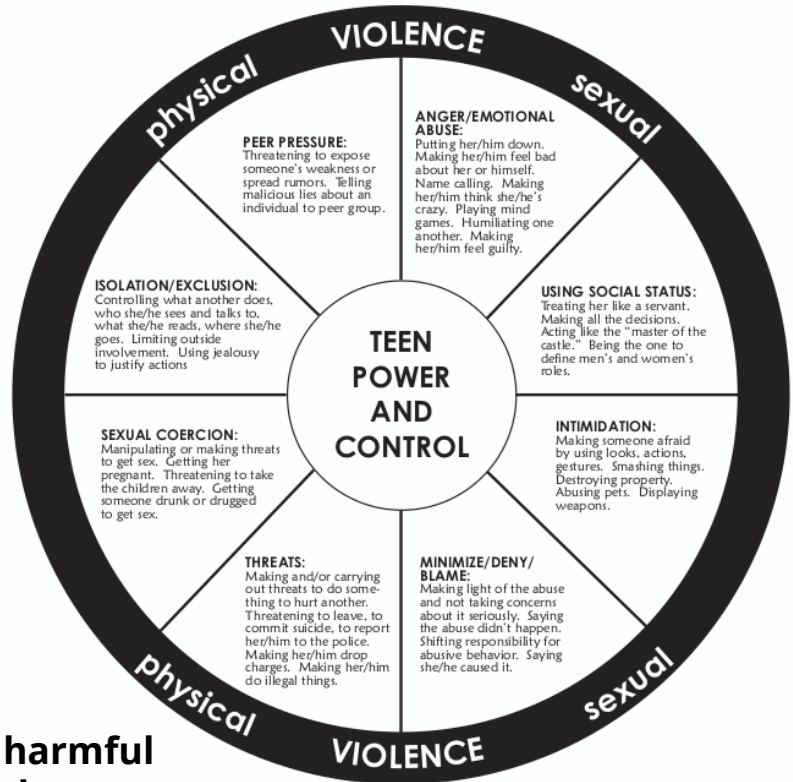
Masculinity Expectations

- Dominance, aggression, emotional stoicism
- Pressure to fulfill these expectations and assert within relationships

Perceptions of Power

- Expectations of dominance & entitlement
- Attitudes that justify or minimize dating violence

Research shows ties between harmful gender norms and dating violence



Source: Domestic Abuse Intervention Project; Duluth, MN
Hertzog & Rowley, 2014; Reyes et al., 2015

Intimate Partner Violence (IPV)

- Any physical, sexual, or psychological abuse within a romantic or intimate relationship
 - Includes current and former relationships
- ≥ 2 in 5 adult men have experienced IPV during their lifetime
 - Of those, more than 1 in 5 reported first victimized before age 18
- IPV prevalence among male adolescents (past 12 months):
 - 19.6% aged 12–18 reported victimization
 - 9.3% aged 12–18 reported perpetration
- Some teens are at greater risk than others
 - LGBTQ+
- IPV among adolescents is different than IPV among adults

Source: Leemis et al., 2022; Taylor et al., 2016

Tools to Identify IPV

What are ways to screen for violence among youth?

HITS screener

- Hurt
- Insult
- Threaten
- Scream

HITS Screening Tool			
How often does your partner... physically HURT you?	<input type="checkbox"/> Never (1)	<input type="checkbox"/> Rarely (2)	<input type="checkbox"/> Sometimes (3)
	<input type="checkbox"/> Fairly often (4)	<input type="checkbox"/> Frequently (5)	
INSULT or talk down to you?	<input type="checkbox"/> Never (1)	<input type="checkbox"/> Rarely (2)	<input type="checkbox"/> Sometimes (3)
	<input type="checkbox"/> Fairly often (4)	<input type="checkbox"/> Frequently (5)	
THREATEN you with harm?	<input type="checkbox"/> Never (1)	<input type="checkbox"/> Rarely (2)	<input type="checkbox"/> Sometimes (3)
	<input type="checkbox"/> Fairly often (4)	<input type="checkbox"/> Frequently (5)	
SCREAM or curse at you?	<input type="checkbox"/> Never (1)	<input type="checkbox"/> Rarely (2)	<input type="checkbox"/> Sometimes (3)
	<input type="checkbox"/> Fairly often (4)	<input type="checkbox"/> Frequently (5)	

Where to Find Resources

- ipvhealth.org (safety cards and screening practices)
- emerge.ucsd.edu (gender empowerment measures)
- [CDC Resources for Action](http://www.cdc.gov/ncjrs/187421.htm) (technical packages)

Source: Sherin et al., 1998

Talking about Relationships & Violence

Education

- Review evidence-based best practices
 - Futures Without Violence (<https://www.futureswithoutviolence.org/>)
 - Coaching Boys Into Men (<https://coachescorner.org/>)
- Know your local violence resources and services

Motivational Interviewing

- Support self-efficacy
- Open-ended questions & reflective listening
- Collaborative approach

Messaging & Language

- Being aware of common gender norms and meanings
- Understanding male exposures to violence (witnessing, experiencing, using)
- “Victim” vs. “Survivor” | “Perpetrator”

What To Do if IPV Is Disclosed?

- **Create a safe space.** Ensure privacy and confidentiality to make the individual feel safe and supported.
- **Support.** Validate the person's experiences and emotions and affirm their courage in sharing their story.
- **Use empathy and non-judgement.** Refrain from showing shock or other facial expressions while someone is disclosing.
- **Be ready to listen.** Ask open-ended questions and allow for silence.
- **Understand mandatory reporting.** Familiarize yourself with legal obligations regarding reporting IPV to authorities.
- **Provide resources.** Have physical handouts, websites, and contact information for local agencies readily available.

Frameworks to Inform Work with Male Youth

Positive Youth Development (PYD)

Definition:

- Focuses on promoting young peoples' assets (internal) and resources (external) by:
 - Recognizing, leveraging, and building young peoples' strengths
 - Building young peoples' connections within their communities, schools, peer groups, and families

Example Components:

- Mentorship
- Community service
- Exploration and celebration of identity (e.g., ethnic, racial, sexual, gender identity)

Trauma-Informed Approaches

A trauma-informed approach...

- "**Realizes** the widespread impact of trauma and understands potential paths for recovery;
- **Recognizes** the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and
- **Responds** by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively **resist re-traumatization**"

Examples

- Acknowledging the role of community violence in dating violence
- Having a safe space where students who are activated can go without asking

Great resource

- Cardea Services: *A Guide to Trauma-Informed Approaches* (2016)

Source: Substance Abuse and Mental Health Association, 2014

Harm Reduction

Definition

- Focuses on reducing versus eliminating risk, particularly among young people with persistently high risk who are often stigmatized by health systems and health education programs
- Emphasizes "meeting people where they are"
- Originated in substance use field

Example

- Educating a young person who is sexually active and is not interested in abstinence on condom use and STI testing

Gender-Transformative Approaches

- Seek to contribute to gender equality by explicitly addressing the underlying causes of gender inequality:
 - Encompass interventions and **how they are implemented**
 - Gender transformative interventions are **most successful** when:
 - They are multi-component
 - They go beyond the individual (e.g., to include other stakeholders or systems in young peoples' lives)

Source: UNFPA, 2023

Gender Integration Spectrum

Gender Exploitative



- Reinforces restrictive norms, roles, and relations
- Example: A program that implies that girls are caretakers and boys are "breadwinners"



Source: UNFPA, 2023

Gender Integration Spectrum

Gender Exploitative



-Reinforces restrictive norms, roles, and relations
-Example: A program that implies that girls are caretakers and boys are "breadwinners"

Gender-blind



-Ignores gender, often reinforcing inequality
-Example: An open panel for transgender youth to discuss their experiences of discrimination with -out consideration of their safety

EXPLOIT

ACCOMMODATE

TRANSFORM

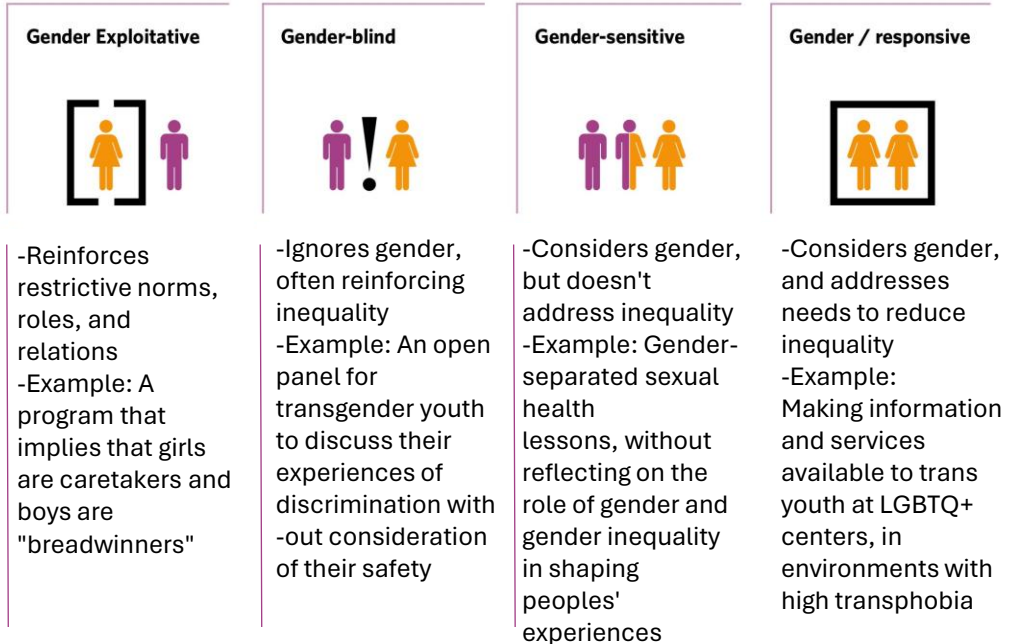
Source: UNFPA, 2023

Gender Integration Spectrum



Source: UNFPA, 2023

Gender Integration Spectrum



Source: UNFPA, 2023

Gender Integration Spectrum



Source: UNFPA, 2023

Example: Where Does it Land?

- A new program is launching in your community that involves promoting STI testing to older male adolescents at barber shops.
- The program is 30 minutes and focuses on promoting the benefits of STI testing and providing on-site testing.
- This setting was selected based on focus group data with young male adolescents, where they expressed feelings that healthcare clinics are not trustworthy.
- **Where does this program fall on the gender integration spectrum?**



Gender-exploitative / Gender-blind / Gender-sensitive / Gender-responsive / Gender-transformative



Strategies for Promoting Male Engagement in Sexual and Reproductive Health

Strategies

As part of your programming, be sure to...

- **Center** young people in the design and implementation of programs.
- **Consider** young male adolescents' relationship behaviors and mental health and needs.
- **Account for** personal, cultural, structural, and social influences on male teens' sexual health and mental/emotional well-being.
- **Screen or refer young men** for sexual health, IPV, & mental health care.
- **Identify** additional strategies to foster healthy and safe relationships.

Youth Advisory Boards

- Take the time to lay the groundwork
- Recruit members with intention
 - Use diverse recruitment channels
 - Schools, community organizations; Juvenile justice, foster care settings; Local sports teams; Social media; Popular local events (e.g., homecoming game)
- Compensate members for their expertise
- Reduce barriers to participation
- Supporting meaningful participation

Evidence-Based Sex Education

- Significant research has demonstrated that sex education that includes condom and contraceptive use education contributes to reduced pregnancy and STI risk
- Sex education that also includes healthy relationships, gender and sexuality, human trafficking:
 - Improves gender equity and reduces homophobia
 - Prevent IPV
 - Support healthy relationships
 - Improve knowledge, attitudes, and skills related to prevention of child sexual abuse
- Supports young peoples' right to information to support autonomy and decision-making for health and well-being

Source: Goldfarb, 2021, UNESCO et al., 2018

Inclusive Sex and Relationship Education and Policies

- Inclusive curricula and policies affirm the identities of LGBTQ+ youth and counteract restrictive gender norms
 - State/school policies: Anti-bullying policies, designated safe spaces, honoring names and pronouns, Gender and Sexuality Student Alliances (GSAs), gender-affirming policies
- Engages LGBTQ+ youth—who experience high IPV—in sex and relationship education
- Supports more welcoming environment for all youth and mental health of LGBTQ+ youth

Source: Gowen & Wings-Yanez, 2014; Russel et al., 2021

Informed Referrals

- Know local, state, and national resources for sexual healthcare, intimate partner violence, and mental health services that serve youth, including male youth and youth of diverse genders and sexualities
- Provide linkages to resources and care
- Resources
 - National Coalition of STD Directors, CDC, CAI Global - Adolescent Referral System Toolkit: <https://caiglobal.org/wp-content/uploads/2023/04/adolescent-referral-system-toolkit-4-6-2023.pdf>
 - Act for Youth – Youth Referral Components and Templates: <https://actforyouth.net/providers/capp/sos/referral.cfm>

Project Connect Model for SRH Care Linkage

- Documented approach to link young people to SRH care

Steps

- Coordinate with others (e.g., local/state health dept; adolescent medicine experts) to ID quality local clinical settings that serve young men & address SRH care
- Identify criteria, consider potential clinics/providers to include in clinical guide for male youth
- Reach out/learn more about each setting
- Finalize clinical guide
- Train your staff about guide
- Share with youth you serve

Criteria to consider

- Patient population served
- Hours
- Fees, if any
- Confidential services
- Open to new patients
- Services offered
- Male youth-friendly

Source: CDC, 2020; Dittus et al., 2018; Perin et al., 2019

Summary

- Male adolescents have their own unique sexual and reproductive health needs.
- Supporting male youth benefits all youth.
- As male youth progress through adolescence, they can become more disconnected from friends and family.
- Gender transformative approaches and more touchpoints for male health can support stronger social connection and wellbeing
- You can take action within your organization & use existing frameworks and strategies to address gender norms, build young men's assets and resources, and engage young men into care.

Questions?



Resources

Resources on *The Exchange*:

- [Engaging Adolescent Males in Teen Pregnancy Prevention](#) (webinar)
- [How Adolescent Boys Learn: Tailoring Prevention Messages](#) (tip sheet)

Additional Resources:

- [Manhood 2.0 Gender Transformative Initiative](#) (Equimundo)
- [Positive Youth Development](#) (youth.gov)
- [Teen Pregnancy Prevention Evidence Review](#) (youth.gov)
- [Integrating PYD and Racial Justice, Equity, and Inclusion, and Belonging Approaches Across the Child Welfare and Justice Systems](#) (Child Trends)
- [A Guide To Trauma-Informed Sex Education](#) (Cardea Services)
- [Youth Advisory Councils](#) (CDC Adolescent and School Health)
- [The Future of Healing: Shifting From Trauma Informed Care to Healing Centered Engagement](#) (Medium.com)

Contact Information

SRAE Training and Technical Assistance

sraetta@rti.org

Presenter Contact Information:

Morayo Akande, MPH makande3@jhu.edu

Arik V. Marcell, MD, MPH amarcell@jhu.edu

Annie Smith, PhD, MPH asmit281@jhu.edu

Kathleen Tebb, PhD Kathleen.Tebb@ucsf.edu

References

- Alexander, S. C., Fortenberry, J. D., Pollak, K. I., Bravender, T., Davis, J. K., Ostbye, T., Tulsy, J. A., Dolor, R. J., & Shields, C. G. (2014). Sexuality talk during adolescent health maintenance visits. *JAMA Pediatrics*, 168(2), 163-169.
- Bronfenbrenner, U. (1979). *The ecology of human development*. Harvard University Press.
- Burstein, G. R., Lowry, R., Klein, J. D., & Santelli, J. S. (2003). Missed opportunities for sexually transmitted diseases, human immunodeficiency virus, and pregnancy prevention services during adolescent health supervision visits. *Pediatrics*, 111(5 Pt 1), 996-1001.
- Centers for Disease Control and Prevention (CDC). (2020). *Project Connect*. <https://www.cdc.gov/std/projects/connect/default.htm>
- Centers for Disease Control and Prevention (CDC). (2022). *Terminology*. <https://www.cdc.gov/healthyouth/terminology/sexual-and-gender-identity-terms.htm>
- Centers for Disease Control and Prevention (CDC). (2023). Youth Risk Behavior Survey: Data summary & trends report, 2011–2021. https://www.cdc.gov/healthyouth/data/yrbs/pdf/YRBS_Data-Summary-Trends_Report2023_508.pdf
- Chandra, A., Mosher, W. D., Copen, C., & Sionean, C. (2011). Sexual behavior, sexual attraction, and sexual identity in the United States: Data from the 2006-2008 National Survey of Family Growth (Number 36). *National Health Statistics Report*, 3(36), 1-36.
- Dittus, P. J., Harper, C. R., Becasen, J. S., Donatello, R. A., & Ethier, K. A. (2018). Structural Intervention With School Nurses Increases Receipt of Sexual Health Care Among Male High School Students. *Journal of Adolescent Health*, 62(1), 52-58. <https://doi.org/10.1016/j.jadohealth.2017.1007.1017>
- Division of STD Control and Prevention. [CDCSTD]. (2015, August 18). #DYK adolescents have 3 stages of development? Learn more via #CDCGrandRounds: <http://go.usa.gov/3HtFC> @CDCgov [image attached] [post]. <https://twitter.com/CDCSTD/status/633690073171542016>
- Gitlin, R., Demla, K., & Sewell, D. D. (2021). Clinical management of homeless LGBTQ+ patients: Overcoming a history of discrimination and invisibility and improving care through education, training, and advocacy. *Clinical Management of the Homeless Patient: Social, Psychiatric, and Medical Issues*, 203–227.
- Goldfarb, E. S., & Lieberman, L. D. (2021). Three decades of research: The case for comprehensive sex education. *Journal of Adolescent Health*, 68(1), 13–27. <https://doi.org/10.1016/j.jadohealth.2020.07.036>
- Gowen, L. K., & Wings-Yanez, N. (2014). Lesbian, gay, bisexual, transgender, queer, and questioning youths' perspectives of inclusive school-based sexuality education. *The Journal of Sex Research*, 51(7), 788–800. <https://doi.org/10.1080/00224499.2013.806648>
- Haddad, K., Jacquez, F., & Vaughn, L. (2022). A scoping review of youth advisory structures in the United States: Applications, outcomes, and best practices. *American Journal of Community Psychology*, 70(3-4), 493-508.
- Hawk, M., Coulter, R. W. S., Egan, J. E., Fisk, S., Friedman, M. R., Tula, M., & Kinsky, S. (2017). Harm reduction principles for healthcare settings. *Harm Reduction Journal*, 14, 70. <https://doi.org/10.1186/s12954-017-0196-4>
- Hertzog, J. L., & Rowley, R. L. (2014). My beliefs of my peers' beliefs: exploring the gendered nature of social norms in adolescent romantic relationships. *Journal of interpersonal violence*, 29(2), 348–368. <https://doi.org/10.1177/0886260513505145>
- Lafferty, W. E., Downey, L., Holan, C. M., Lind, A., Kassler, W., Tao, G., & Irwin, K. L. (2002). Provision of sexual health services to adolescent enrollees in Medicaid managed care. *American Journal of Public Health*, 92(11), 1779-1783.
- Leemis R.W., Friar N., Khatiwada S., Chen M.S., Kresnow M., Smith S.G., Caslin, S., & Basile, K.C. (2022). *The National Intimate Partner and Sexual Violence Survey: 2016/2017 report on intimate partner violence*. National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

References

- Lenhart, A., Anderson, M., & Smith, A. (2015, October 1). *Teens, technology and romantic relationships*. Pew Research Center. <https://www.pewresearch.org/internet/2015/10/01/teens-technology-and-romantic-relationships/>
- Lindberg, L. D., & Kantor, L. M. (2022). Adolescents' receipt of sex education in a nationally representative sample, 2011-2019. *Journal of Adolescent Health, 70*(2), 290-297. <https://doi.org/10.1016/j.jadohealth.2021.08.027>
- Lugo-Gil, J., Lee, A., Vohra, D., Harding, J., Ochoa, L., & Goesling, B. (2018). *Updated findings from the HHS Teen Pregnancy Prevention Evidence Review: August 2015 through October 2016*. U.S. Department of Health and Human Services. https://youth.gov/sites/default/files/2023-02/Summary_of_findings_2016-2017.pdf
- Marcell, A. V., Morgan, A. R., Sanders, R., Lunardi, N., Pilgrim, N. A., Jennings, J. M., Page, K. R., Loosier, P. S., & Dittus, P. J. (2017). The socioecology of sexual and reproductive health care use among young urban minority males. *Journal of Adolescent Health, 60*(4), 402-410.
- Moreira, I., Fernandes, M., Silva A., Verissimo, C., Leita, M., Filipe, L., & Sa, M. (2001). Intimate relationships as perceived by adolescents: Concepts and meanings. *International Journal of Environmental Research and Public Health, 18*(5), 2256. <https://doi.org/10.3390/ijerph18052256>
- National Center for HIV, Viral Hepatitis, STD, and TB Prevention. (2024, February 9). *NCHHSTP AtlasPlus*. Centers for Disease Control and Prevention. <https://www.cdc.gov/nchhstp/atlas/index.htm>.
- Office of Population Affairs (OPA). (n.d.). *Healthy relationships in adolescence*. Department of Health and Human Services. <https://opa.hhs.gov/adolescent-health/healthy-relationships-adolescence>
- Perin, J., Jennings, J. M., Arrington-Sanders, R., Page, K. R., Loosier, P. S., Dittus, P. J., & Marcell, A. V. (2019). Evaluation of an adapted Project Connect community-based intervention among professionals serving young minority men. *Sexually Transmitted Diseases, 46*(3), 165-171. <https://doi.org/10.1097/OLQ.0000000000000977>
- Russell, S. T., Bishop, M. D., Saba, V. C., James, I., & Ioverno, S. (2021). Promoting school safety for LGBTQ and all students. *Policy Insights from the Behavioral and Brain Sciences, 8*(2), 160-166. <https://doi.org/10.1177/23727322211031938>
- Sherin, K. M., Sinacore, J. M., Li, X. Q., Zitter, R. E., & Shakil, A. (1998). HITS: a short domestic violence screening tool for use in a family practice setting. *Family Medicine, 30*(7), 508-512.
- Substance Abuse and Mental Health Services Administration (SAMHSA). (2014, July). *SAMHSA's concept of trauma and guidance for a trauma-informed approach*. <https://store.samhsa.gov/product/samhsas-concept-trauma-and-guidance-trauma-informed-approach/sma14-4884>
- Taylor, B. G., Mumford, E. A., & Lui, W. (2016, October). *The National Survey of Teen Relationships and Intimate Violence (STRiV)* (No. 250292). National Institute of Justice. <https://ovc.ojp.gov/library/publications/national-survey-teen-relationships-and-intimate-violence-striv>
- Tienda, M., Goldberg, R. E., & Westreich, J. R. (2022). Adolescents' partner search in the digital age: Correlates and characteristics of relationships initiated online. *Journal of Youth and Adolescence, 51*(3), 393-408. <https://doi.org/10.1007/s10964-021-01557-2>
- United Nations Educational, Scientific and Cultural Organization, Joint United Nations Programme on HIV/AIDS, United Nations Population Fund, United Nations Children's Fund, United Nations Entity for Gender Equality and the Empowerment of Women, & World Health Organization. (2018). *International technical guidance on sexuality education: an evidence-informed approach, revised edition*. <https://unesdoc.unesco.org/ark:/48223/pf0000260770>
- United Nations Population Fund Activities (UNFPA). (2023, March). *Gender transformative approaches to achieve gender equality and sexual and reproductive health and rights*. <https://www.unfpa.org/publications/gender-transformative-approaches-achieve-gender-equality-and-sexual-and-reproductive>

***Thank
you!***