

Educating Youth About STIs

BY CHARLES JACKSON AND LOTI POPESCU

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In April 1999, Constanta, Romania/Louisville, Kentucky, partners interviewed a random sampling of 1,300 women aged 16-90 as part of a healthy communities survey. Results indicate that these women view sexually-transmitted infections (STIs) as their second-greatest health concern, with domestic violence being the first. These results are not surprising when you look at the statistics. Constanta County has a population of about 721,000 and ranks second in Romania both in population size and incidence of syphilis. According to the Constanta Health Authority, a decade ago, 42 out of 100,000 women aged 15 to 44 had syphilis; by 1999, the number had increased to 66.

While statistics for Constanta adolescents are more difficult to obtain, health authorities believe that STI rates among teens are growing. Data from the Dermatological-Venereal Service points to an increase in syphilis cases since the 1989 repeal of mandatory STI reporting. Most syphilis occurs among single individuals between the ages of 15 and 24 who have multiple partners; some of whom have given birth to infected babies. Approximately 500 cases of syphilis were reported in both 1998 and 1999, and the numbers continue to grow. Lack of information worsens the problem. Although some information is available through the school system, high school textbooks offer few details on reproductive health and safety.

Even if information is available, statistics show that knowledge of consequences does not necessarily affect behavior. For example, one survey of American college

students reveals that 97 percent of the respondents knew condoms helped prevent infections, yet nearly 75 percent did not change their behaviors to minimize the danger of contracting HIV or other STIs.¹ And yet, according to the Centers for Disease Control and Prevention (CDC) "unpublished data indicate that approximately 90 percent of all chlamydia cases occur among persons younger than age 25."² Even more disturbing is a study that indicates while the rate of condom use among teenagers increased over the years reviewed in the survey, incidence of STIs including chlamydia, gonorrhea, and genital herpes, rose as well. This same study reports that that roughly one half of US adolescents have had sexual intercourse, one-sixth of these with four or more partners.³

In Constanta, the problem of STIs is further heightened by the fact that many of those infected self-medicate. Statistics from a 1997 CDC Reproductive Health Survey conducted in Constanta indicate that only 25 percent of those with an STI seek medical attention. Wide accessibility to drugs allows people to self-medicate without a proper diagnosis and, as many of the symptoms associated with an STI go away in seven to 10 days, individuals may assume they are cured when in reality the infection has become chronic and is often transmitted to a partner as well. Furthermore, unbeknownst to those afflicted, multiple conditions may exist.

In Romania, as in many societies, STIs are a social stigma and a challenge to conservative values. As the number of teens engaging in sex continues to rise, so does

the level of danger in contracting STIs, making it all the more important to educate teens about the risks they face when engaging in sexual activity. It is also helpful to understand which members of the adolescent population are at greatest risk when developing educational programs and outreach activities. One study of rural American teenagers found that sexual risk-taking among females is associated with a low grade-point average, frequent alcohol consumption, low levels of parental monitoring, and a lack of communication about birth control with mothers. For males, sexual risk taking is linked to a low grade point average, frequent alcohol consumption, suicidal ideation, low levels of parental support, and a history of sexual abuse.⁴ Another American survey finds that female adolescents are less likely to contract STIs if they feel that adults care about them.⁵

Using data collected from the Constanta survey and statistics abstracted from other studies, in September 2000, the Constanta/Louisville partners launched the STI Youth Campaign to address the issue of sex education as part of a multi-targeted approach to reduce the contraction rate of STIs. The Campaign is under the direction of Daniel Verman and Loti Popescu from the Health Promotion and Education Department of the Constanta Health Authority.

The STI Youth Campaign

A workshop attended by 23 students from area high schools, 12 STI health specialists, and 16 family practitioners and specialists in health promotion,

launched the Campaign. Facilitated by health educators June Mayfield and Jacquelyn Johnson from the Louisville and Jefferson County Health Departments, the workshop used a train-the-trainers approach and a teen mentoring model. Three days of integrated role-playing, teaching demonstrations with interactive discussions, and student presentations gave participants the opportunity to learn about various perspectives and points-of-view. Brochures and manuals detailing STI terminology supplemented the interactive training and provided attendees with information about prevention, diagnosis, and treatment of these infections. (For detailed information on this training program, see "School Health and Outreach Programs: Creating Healthy Children, Communities, and Futures," page 86.)

Effective STI programs not only educate about the need for prevention, but also discuss attitudes that put adolescents at risk. During the workshop the interaction between the teens and the health instructors and family practitioners often evoked lively dialogues between the two generations. One important discussion centered around teens explaining their reluctance to approach health professionals about a possible STI.

Teen-mentoring programs are especially valuable as adolescents connect quickly with each other's thoughts and feelings. Peer pressure can be difficult to resist, so it is important that teens learn to respect their own principles and to know how and when to say "no." This is often best taught through the encouragement of peers, which can be seen as reverse peer pressure. The use of teens in the STI youth campaign as instructors is, therefore, instrumental to its success.

Five Constanta high schools are currently conducting STI workshops based on the original training program. A re-



Photo courtesy of Charles Jackson.

Teenage members of the "STI Train-the-Trainer Program" and their instructors.

cent on-site evaluation of the program by Johnson gave the STI Youth Campaign very high marks. Participants are surveyed before and after each workshop to evaluate the efficacy of the training; the questionnaires contain simple questions about STIs and are confidential. A question-and-answer session is held during each workshop and the participants who achieve the highest scores receive free STI Youth Campaign t-shirts; all participants receive a brown paper bag with STI brochures and condoms.

Statistical analysis of pre- and post-workshop participant surveys have yet to be released, but one emerging trend appears to be that the program's teen instructors are not engaging in sex as at young an age as the participants.

STI Public-awareness Campaign

Concurrent with the workshop, partners ran an STI public-awareness campaign

with the slogan "Protect Yourself!" Constanta partners produced public service announcements that ran on local television and radio stations, wrote weekly articles that appeared in local newspapers, and created weekly radio and television talk shows that addressed the issue. Posters, pens, t-shirts, and pins were distributed to the public by teens and other volunteers. In addition 5,000 leaflets titled "Men Protect Your Sex Life," "Women Protect Your Sex Life," "Prevent Cervical Cancer" and "Advice for Young Girls" and 2,000 posters titled "101 Ways To Make Love Without Dying" and "Do You Want To Know More About STIs?" were printed. The leaflets and posters were distributed as part of a street campaign that included delivery of these materials to schools, magazine kiosks, pharmaceutical dispensaries, hospitals, and polyclinics. Delivery of the materials to schools was accompanied by an interactive discussion. While these educational

Cristina Marcu, age 20, has been a STI Youth Campaign teen instructor for more than two years. Recently she answered some questions about the challenges faced by teens in Constanta.

Why did you join the STI Youth Campaign?

Because I believe that teens need advice about sexuality and I like to be useful to humanity. My hope is that Romanian teens will be able to find a way to solve their problems by helping each other.

What do you find most challenging about the Campaign? most rewarding?

Choosing the best advice to give to an individual teen, is the most challenging part of the job. The most rewarding is seeing how many teens are interested in STI information and—of course—the moment when they trust me enough to talk about their problems.

What is most difficult about being a Romanian teen?

The lack of communication with the older generation.

In your experience, how do adults react when they first learn about the STI Youth Campaign?

They want to know more about my work.

How did your parents react?

My parents supported me in this volunteer activity.

If you could get one message to all Romanian teens, what would it be?

Establish a certain system of values.

products are not targeted specifically to adolescents, they increase the health literacy of the entire community, which in turn impacts its youth.

STI Specialists and Family Practitioners Join Forces

Under communism, Romanian workers were forced to submit to mandatory STI testing at work sites. But, as noted earlier, since 1989 the Romanian healthcare system has stopped enforcing the reporting and monitoring of STIs. This, combined with an increase in the number of sexual partners and unsafe sex practices, has contributed to greater STI incidence. Romanians experiencing STI symptoms may be reluctant to seek proper medical attention because of an exaggerated sense of modesty or the lack of information about possible complications caused by untreated or mistreated infections. Self-medication and the desire to save time and money further complicate the equation. Even when a patient obtains a referral from a family practitioner and seeks treatment from an STI specialist, there is rarely little follow-up or coordination between the two providers.

To bridge this gap, US partners and STI specialists, along with family practitioners from Constanta, formed a working group to discuss how to increase cooperation between the two disciplines, as

well as how to improve detection and treatment of STIs. One result was the creation of a committee charged with developing a standardized patient questionnaire. Members of the working group hope this survey will encourage colleagues to be more proactive in STI prevention, detection, and treatment, as well as in collaboration. In addition, partners hope that by improving cooperation among family practitioners and STI specialists, there will be increased access to accurate information about STIs, which will ultimately help reduce the incidence and severity of these illnesses in Constanta.

Building Bridges Instead of Walls

Partners also hope that the STI Youth and public-awareness campaigns will continue to grow and are working to encourage and support related activities. During the summer of 2001, teen volunteers distributed free condoms and STI brochures at area beaches. Free health brochures are being delivered regularly to the offices of family practitioners, an important avenue for getting STI information to the public. And the partnership has donated six computers and a printer to the government office responsible for STI monitoring, so the compilation and distribution of STI data to various community agencies will be more efficient.

As the Romanian economy continues to recover, with foundations and NGOs multiplying, perhaps the larger context of STI prevention may be examined more closely. The Partnership's newly-established Community Foundation of Constanta is one new NGO that can fund sustained future health initiatives addressing the problems of STIs. This independent, non-profit organization is seeking financial support for these health programs and other community initiatives aimed at improving the quality of life in Constanta.

Obviously neither America nor Romania has the "magic bullet" to prevent STIs, but we can learn much from each other by engaging in a genuine dialogue that builds bridges between nations, generations, patients, and physicians. ■

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