PREP

parent toolkit

Supported by the Administration for Children and Families, Administration on Children, Youth and Families, Department of Health and Human Services.
43% of Oklahoma high school students reported ever having sexual intercourse

50% did not use a condom during last sexual intercourse

Source: YRBS 2017
Oklahoma remains in the **top 5 for highest teen birth rates**

Teen childbearing costs Oklahoma taxpayers **$169 million/yr**
PREP in Schools

Your child’s school is offering an evidence-based teen pregnancy prevention program. These programs have demonstrated their effectiveness through rigorous scientific evaluations. The Tulsa Health Department’s Personal Responsibility Education Program (PREP) specializes in empowering young people to make proud and responsible decisions, as well as educating them about the risks associated with sexual activity. The goal of the program is to prevent teen births and sexually transmitted diseases (STDs), including HIV. PREP works with schools in Tulsa County in an effort to influence change and increase education.

As parents, you are the most influential person in your teen’s life, whether you realize it or not. Studies show that teens not only look to their parents for advice and information, but they want to talk to you about their feelings and relationships. Everyone needs information that will help them protect their sexual health. Postponing sexual activity is good advice for all teens, no matter their sexual orientation or gender identity.

In this guide, we’ll provide you with the tools you need to understand how your teen is developing, what they are experiencing, and how to initiate conversations about sex and sexuality.

Many PREP students report a positive impact on their social skills, their academic life and their desire to make plans for the future.

73% more likely to resist or say no to peer pressure

79% more likely to make plans to reach goals

76% more likely to be the best they can be

72% care about doing well in school


Note: Percentage is the number of students that reported they were “much more likely” or “somewhat more likely” to respond favorably to question.
Testimonials

The staff from the Tulsa Health Department who teach the PREP program are amazing! They conduct themselves in a professional, but approachable manner. Even the best parents struggle to talk to their kids about sex, so programs like this are invaluable.

—High School Teacher

I want to say thank you and I enjoyed the class. I’ve never been comfortable talking about the things we talked about before you came.

—Male student

The feedback I received from students was that the program provided useful and much needed information about their sexual health. They also said it helped to dispel myths about STDs, HIV and pregnancy.

—High School Administrator

I want my kids to be informed. And sometimes it’s just easier to talk to other people [who aren’t your parents]. As far as I’m concerned, any factual information is good. I just feel the more education we give our children the better.

—Parent of a PREP participant

Thank you for teaching us about sex ed. It really opened my eyes about HIV and you helped me a lot.

—Female student
Puberty

As teens enter puberty, they experience a great number of changes, including physical appearance, brain development and thinking ability and changes in social interaction. Many factors, including genes, family, friends, values, neighbors and others in society can affect how puberty impacts a young person. The following pages provide specific information on these changes.
Physical changes

Adolescents do not begin puberty at the same time. Male bodies tend to show the physical signs of puberty between the ages of 11–14, whereas female bodies typically begin puberty slightly earlier, between the ages of 8–13.

**Physical changes for male bodies**

- Height and weight increase
- Body hair grows in the pubic area, under the arms and on the face, and becomes thicker on the legs
- Muscles become stronger
- Vocal cords get thicker and longer and voice deepens
- Sweat and oil glands become more active and body odor changes
- Acne (pimples) may develop
- Penis and scrotum mature and testes begin to make sperm

**Physical changes for female bodies**

- Height and weight increase
- Body hair grows in the pubic area, underarms and on the legs
- Breast buds appear; nipples become raised and this area may be tender
- Sweat and oil glands become more active and body odor changes
- Voice changes
- Acne (pimples) may develop
- Ovaries become larger and hormone production begins
- Ovulation and menstruation (periods) begin, making it possible for a pregnancy to occur
Anatomy

Children and teens need to know the medically accurate terms for their genitals. This is important so they can effectively communicate with a health care provider about their body or if they need to report abuse. Becoming familiar with this terminology also increases a young person’s ability to set appropriate physical and emotional boundaries with family, friends and partners.

Male Reproductive System:
Female Reproductive System:

- ovary
- fallopian tube
- uterus
- cervix
- vagina
- clitoris
- urethral opening
- labia
- vaginal opening
While parent-teen conversations may cover hormones and other biological aspects of love and attraction, equal time should be devoted to thoughtful discussions about love as the most powerful and heartfelt of all human emotions.

Love is a subject of endless fascination for adolescents. Topping their list of questions is, “How do you know when you’re in love with somebody?”

They are also genuinely curious about their parents’ courtship, marriage and, if applicable, divorce.

“Mom, did you fall in love with Dad at first sight?” “Dad, how can two people love each other for years and years, then stop being in love?”

It could be intimidating for adults to talk with teens about romance if they have an imperfect romantic history, but it’s still important to have the conversation. You might say, “I haven’t always made the wisest decisions when it comes to love, but I’ve promised myself that the next time I become involved with someone special, I won’t settle for anything less than a healthy, honest relationship. When you’re older and ready to start dating, I hope that you will do the same. We both deserve the best, right?”
Facts and Tips on Teen Dating and Friendships

• Adolescents tend to go on “dates” as part of a group activity. This is a safer and healthier way for young people to spend time together.

• Pediatricians advise that solo dating should be reserved for older teens. There is an enormous difference in maturity between a 14 or 15 year old and a 16 or 17 year old.

• Don’t minimize or make fun of a first love. These are very important relationships for teenagers.

• If you see schoolwork and friendships suffering, it is reasonable to be concerned. Talk to your teen about the importance of platonic friendships and their goals and dreams beyond their romantic relationship.

• Teens haven’t learned how resilient the heart is. Treat a brokenhearted teenager’s feelings seriously.

Friendships are also very important to teens. Good friends are like a personal support group that can create a sense of belonging and help with developing confidence. It’s important that they choose friends who are positive, accepting and supportive.

Some ways you can help your adolescent build and maintain positive friendships:

• Staying connected and listening to your child can help with the development of friendship skills. You’re also better able to help your child if friendship problems come up.

• Be a good role model. Parents who have and can model healthy friendships are more likely to have children with lots of healthy friendships.

• Praise teenagers when you see them being fair, trusting and supportive of others.

Adapted from When to Let Your Teenager Start Dating at www.healthychildren.org
One of the passages of adolescence is the development and understanding of sexuality. This includes understanding one’s body, gender identity, sexual orientation and values about sexual activity. During adolescence, many teens begin to explore their sexuality. For all teens, this is a challenging transition. But for teens who are questioning their sexual orientation, or who identify as being lesbian, gay, bisexual, transgender or queer (LGBTQ), this can be a very lonely, difficult and threatening transition.

It can also be a difficult time for parents, who may have fears and questions of their own. It is crucial for teens to get support and understanding from their peers, parents and other adults when they have questions about sexual orientation and gender identity.
The Details

• There is an increase in the amount of information in the media about sexual orientation and gender identity. However, data shows that the percentage of people who identify as LGBTQ has remained around 5% of the population for many years.

• Exploration with partners of both sexes is a natural part of growing up for many youth.

• How one’s sexual orientation is determined is unknown. Most experts agree that homosexuality is not caused by trauma, imitation of homosexual people, bad heterosexual experiences, sex role nonconformity, rape and sexual abuse.

• Sexual orientation is one component of a person’s identity. It is defined by a person’s feelings, not the type of sexual behavior he or she chooses to engage in.

• “Coming out” is a process of understanding and deciding not to hide one’s sexual orientation.

• A transgender person is someone whose gender identity (someone’s internal sense of being male or female) differs from their physical sex. They may be gay, straight or bisexual.

• Homophobia, an intense or irrational fear or hatred of gays and lesbians, may make it very difficult for gay teens to feel safe, to express their feelings or to seek help.

How To Be Supportive

• Be prepared with accurate information to help teens understand their bodies and manage their feelings.

• Provide accurate information about sexual orientation to dispel stereotypes about gay, lesbian and bisexual sexuality.

• Gay, lesbian, bisexual and transgender youth need to know that they are not alone and that they are loved, accepted and valued.

• Make sure teens know that no one has the right to harass, threaten, or hurt them because of their sexual orientation or gender identity. They need to tell a trusted adult if this ever happens.

• Teens don’t have to come out if they don’t feel ready or safe.

• Be aware of your own biases and prejudices about this topic before you talk with a young person.

If you are a parent who thinks your son or daughter is dealing with issues about their sexual orientation or gender, there are groups and resources to help.

Check out our resources on page 23.
Brain Development

Although your teen is beginning to look more like an adult, it’s important to remember that his/her brain is still developing. Recent research indicates:

• The human brain does not reach maturity until the mid 20s.

• The last area to develop is the Prefrontal Cortex, which is crucial to making judgments, controlling impulses and anticipating consequences.

The fact that so much change is taking place beneath the surface is something to keep in mind during the adolescent years, when teens may act on impulse or without regard to risk. While teens may be able to think more like adults, they still lack the experience that is needed to behave like adults.
Mental Health

The mental changes that take place during the adolescent years may not be as easy to see, but they can be just as remarkable as the physical changes. These mental changes can lead your teen to react to stress in new ways. Some stressors for teens include:

- Family problems
- Trouble in school
- Demanding schedules
- Illness
- Friends
- Lack of sleep

Too much stress can cause a teen to experience headaches, stomachaches, eating and sleeping disorders, forgetfulness, falling grades, anxiety and depression. Encourage your teen to talk about what may be bothering them.

Red Flags

These are warning signs that your teen is struggling and needs help.

- Angry outbursts for inappropriate reasons
- Panic attacks
- Excessive anxiety or worry
- Missing school due to symptoms of stress
- Talks about hurting themselves or engages in self-harm
- Being easily overwhelmed with everyday tasks
- Depressed mood—changes in weight or appetite
- Extreme mood swings
- Impaired school performance
- Distorted sense of self-image or self-worth
- Frequent changes in relationships, image, goals or values
- Defies or refuses to comply with rules
- Is easily angered when people set limits

If you suspect your teen may be suffering, seek help. Mental health professionals, school counselors, clergy, and community resources are available even if you don’t have insurance.

Check out our resources on page 23.
The Conversation

Contrary to popular belief, teens want to hear what you have to say about sex, sexuality and relationships. However, many parents are unsure or afraid as to how to approach the subject or start the conversation.

In a 2016 survey, 52% of youth age 12–15 said that parents most influenced their decisions about sex. By comparison, just 17% said friends most influence their decisions. Six in 10 teens (62%) wished they were able to talk more openly about relationships with their parents.

Talking to your teen should be an ongoing discussion, not a one-time chat. Conversations about sex and sexuality should start early and be frequent throughout their teen years.

Look for teachable moments to begin conversations about sex. Be open and honest as you discuss information. The more comfortable and open you are, the more receptive your teen will be in return. Remember, talk to your teen about sex because everyone else is.

Door Closers:

When engaging in conversation with your teen, avoid these door closers, which convey judgment or a disinterest and are barriers to effective communication:

“Where did you HEAR that?”
“Wait until your Dad gets home!”
“Why are you asking me that?”
“You’re not old enough!”
“I’ll tell you when you need to know!”

Door Openers:

Instead, listen to what your teen is asking and approach the topic in an open and inviting way, with comments or phrases that suggest you want to discuss the subject further.

“I’m glad you asked me that question.”
“I do not know, but I can sure find out.”
“Do you want to talk about it?”
“It is okay to feel confused.”
“It is normal to wonder about that.”
10 Tips

1. First, encourage communication by reassuring kids that they can talk to you about anything.

2. Take advantage of teachable moments. A friend’s pregnancy, news article, or a TV show can help start a conversation.

3. Listen more than you talk. Think about what you’re being asked. Confirm with your child that what you heard is in fact what he or she meant to ask.

4. Don’t jump to conclusions. The fact that a teen asks about sex does not mean they are having or thinking about having sex.

5. Answer questions simply and directly. Give factual, honest, short and simple answers.

6. Respect your child’s views. Share your thoughts and values and help your child express theirs.

7. Reassure young people that they are normal—as are their questions and thoughts.

8. Teach your children ways to make good decisions about sex and coach them on how to get out of risky situations.

9. Admit when you don’t know the answer to a question. Suggest the two of you find the answer together on the Internet or in the library.

10. Discuss that at times your teen may feel more comfortable talking with someone other than you. Together, think of other trusted adults with whom they can talk.
Contraceptives

**Abstinence**
100% effective. Abstinence is the safest and most effective pregnancy and STD prevention method. It requires that you avoid any behaviors that might result in exchange of bodily fluids that can result in pregnancy or can transmit STDs, including HIV. It also means not engaging in any skin-to-skin genital touching that could transmit certain STDs.

**Nexplanon**
99% effective. Nexplanon is a flexible plastic rod the size of a matchstick that is put under the skin of a woman’s arm. It must be replaced or removed after 3 years. It does not protect against STDs or HIV. Inserted/removed/replaced by health care provider.

**The IUD**
99% effective. The IUD is a small, T-shaped, flexible plastic or copper device that is inserted into the uterus. It does not protect against STDs or HIV. Inserted/removed/replaced by health care provider.

**The Shot (Depo-Provera)**
99% effective. 97% if not used perfectly. Depo-Provera is a hormonal shot taken every 3 months. It does not protect against STDs or HIV. Administered by a health care provider.
Birth Control Pills
99% effective, 92% effective if pills are skipped or not taken on time. There are many different kinds, but all must be taken at the same time each day. They do not protect against STDs or HIV.

The Ring (NuvaRing)
99% effective, 92% if not used perfectly. A round, flexible ring is inserted into the vagina and left in place for 3 weeks. NuvaRing does not protect against STDs or HIV.

The Patch (Xulane)
99% effective; 91% if not used perfectly. The patch is applied to the skin once a week for 3 weeks and may be applied to eight different areas on the body. It does not protect against STDs or HIV.

External Condom (male)
98% effective if used correctly, 85% if not careful each time. The male condom is made from latex; however, if an allergy to latex exists there are polyurethane or polyisoprene condoms. It does help protect against STDs and HIV. It cannot be used at the same time as an internal (female) condom.

Internal Condom (female)
95% effective if used correctly, 79% if not careful each time. The internal (female) condom is latex-free and cannot be used at the same time as an external (male) condom. It does help protect against STDs and HIV.
Sexually Transmitted Diseases

Anyone who has had sex or engages in sexual activity may be at risk for a sexually transmitted disease (STD). Most people do not have symptoms. While all STDs are treatable, some are not curable. Sexually active teens should talk to their health care provider and parent/trusted adult about regular testing. See our resource page for more information about where to get tested. There are two main types of STDs:

**Bacterial**
- Chlamydia
- Gonorrhea
- Trichomoniasis
- Syphilis

Bacterial infections are curable but you can catch them over and over again. If left untreated, they can cause permanent damage to the reproductive tract.

**Viral**
- HIV (human immunodeficiency virus)
- HPV (human papilloma virus)
- Herpes
- Hepatitis B

Viral infections are not curable. Only their symptoms can be managed with medications. The HepB vaccine is required for students to attend school in Oklahoma. The HPV vaccine series is recommended for all adolescents.
Resources

PREP on Social Media

Facebook.com/PREPtulsa
Instagram.com/PREPtulsa
Twitter.com/PREPTulsa

General Information for Teens

Stay Teen
www.stayteen.org
Youth Services of Tulsa
918.582.0061 • www.yst.org
KidsHealth
www.kidshealth.org
Loveisrespect
www.loveisrespect.org
Safe Place
www.nationalsafeplace.org
AMAZE
www.amaze.org

Sexually Transmitted Diseases-Testing Services and Contraception

Tulsa Health Department
918.582.9355 • www.tulsa-health.org
Planned Parenthood
918.587.1101
Community Health Connection
918.622.0641
Morton Comprehensive Health Services
918.587.2171

Sexual Orientation and Gender Identity

It Gets Better Project
www.itgetsbetter.org
Center for Disease Control and Prevention
www.cdc.gov/lgbthealth
Dennis R. Neill Equality Center
918.743.4297 • www.okeq.org
The Trevor Project
www.thetrevorproject.org

Mental Health

Mental Health Association Oklahoma
www.mhaok.org
Tulsa Center for Behavioral Health
918.585.1213
Parkside Psychiatric Hospital and Clinic
918 588 8888 • www.parksideinc.org
Crisis Text Line
text 741741

General Information for Parents

Center for Disease Control and Prevention
www.cdc.gov/teenpregnancy/parents
American Sexual Health Association
www.ashasexuality.org
Parent Further
www.parentfurther.com
Power to Decide
www.powertodecide.org
AMAZE
www.amaze.org
North Regional Health & Wellness Center
5635 N. Martin Luther King Jr. Blvd.
Tulsa OK 74126

918 595 4467

preptulsa.org
facebook.com/preptulsa
instagram.com/preptulsa
twitter.com/preptulsa