# toolbox-SexualHealth Promotion Toolbox

April – Sexual Health

Plan of the Week/Day Notes

Updated 8 July 2018

Note: If your command has only a plan of the week, we suggest using the first 4 of these notes.

Plan of the **WEEK** Notes:

1. Active Duty Sailors and Marines acquire preventable sexually transmitted infections and experience unplanned pregnancy. Negative consequences of sexual risk taking for the individual Sailors or Marines may include pain and suffering, embarrassment, lifelong health, career, family or relationship consequences, and long term financial consequences. For the Department of the Navy (DoN), negative consequences may include lost duty days, direct medical costs, and an erosion image. What can leaders do? Please see:

<http://www.med.navy.mil/sites/nmcphc/Documents/health-promotion-wellness/general-tools-and-programs/hp-toolbox/message-for-commanding-officers-sexual-health-month.pdf>

2. An active duty Sailor and Marine is diagnosed with HIV about every 5 days. From 1985 through 2018, at least 6,200 active duty Sailors and Marines have been infected with HIV, most of whom have been lost to the service. HIV is preventable. Leaders can help their people learn understand and reduce their risk. Films, briefings, posters and websites are ready-to-use at NMCPHC SHARP: <http://www.med.navy.mil/sites/nmcphc/health-promotion/reproductive-sexual-health/Pages/hiv-prevention-resources.aspx>

3. In 2018, over 9900 active duty members were infected with Chlamydia, gonorrhea or syphilis. The incidence of other sexually transmitted infection, including genital herpes, genital warts, Human Papillomavirus-associated cervical carcinoma, hepatitis B, pelvic inflammatory disease and trichomoniasis are not tracked and costs are not known. Leaders can help their people learn understand and reduce their risk. Films, briefings, posters, fact sheets and websites are ready-to-use at NMCPHC SHARP: <http://www.med.navy.mil/sites/nmcphc/health-promotion/Pages/hp-toolbox-april.aspx>

4. In 2018, only about half (55%) of pregnancies among surveyed enlisted Sailors were planned pregnancies. The national *Healthy People 2020* objective is for at least 56% of pregnancies to be planned. Among Navy women who said they were using birth control when they became pregnant, most were using the birth control pill (57% among female enlisted women). Birth control pills are more failure-prone than long-acting reversible contraceptives, like the copper IUD, hormonal IUD and hormonal implant. Leaders can help their people learn understand and reduce their risk of an unplanned pregnancy. Films, briefings, posters, fact sheets and websites are ready-to-use at NMCPHC SHARP: <http://www.med.navy.mil/sites/nmcphc/health-promotion/reproductive-sexual-health/Pages/unplanned-pregnancy-prevention.aspx>

Plan of the **DAY** Notes:

1. Zika virus can be transmitted sexually. Zika is spread mostly by the bite of an infected mosquito and can then be passed from a pregnant woman to her fetus. Infection during pregnancy can cause certain birth defects. There is no vaccine or medicine for Zika. Many areas in the United States have the type of mosquitoes that can spread Zika virus and pregnant women should not travel to areas with Zika. Zika can be passed from a person with Zika before their symptoms start, while they have symptoms, and after their symptoms end. Condoms can reduce the chance of getting Zika from sex. To be effective, condoms should be used from start to finish, every time during vaginal, anal, and oral sex and the sharing of sex toys. Not sharing sex toys and not having sex eliminates the risk of getting Zika from sex. If your partner is pregnant, use condoms correctly, every time you have vaginal, anal, or oral sex or do not have sex for the entire pregnancy. If you and your partner are planning a pregnancy, discuss your plans for pregnancy with a healthcare provider to determine your risk and the options available. For couples who are not pregnant and are not planning a pregnancy, men should consider using condoms or not having sex for at least 3 months after travel (if you don’t have symptoms) or for at least 3 months from the start of symptoms (or Zika diagnosis) if you develop Zika; and women should consider using condoms or not having sex for at least 8 weeks after travel (if you don’t have symptoms) or for at least 8 weeks from the start of symptoms (or Zika diagnosis) if you develop Zika.

See <http://www.cdc.gov/zika/pdfs/fs-zika-sex-partnertravel.pdf>

1. What is Long-Acting Reversible Contraception (LARC)? LARCs available in the U.S. include contraceptive implants and intrauterine contraceptives. In general, LARCs are:
   * extremely effective in preventing pregnancy (>99% effective)
   * low maintenance for doctors and users
   * discreet
   * provide continuous contraception for 3-12 years
   * safe for most women, including teens and HIV positive women
   * safe for women who have had a cesarean section, STIs, PID, ectopic pregnancy and for non-monogamous women
   * well tolerated by adolescents and most women who have never had a baby
   * enjoy very high user satisfaction
   * enjoy very high user continuation rates
   * cost-saving when compared to oral contraceptive pills
   * enjoy easy placement and removal
   * enable rapid return to fertility after removal

See <http://www.med.navy.mil/sites/nmcphc/health-promotion/reproductive-sexual-health/Pages/larc.aspx>

1. How do I talk to my teen about sexual responsibility? The National Campaign to Prevent Teen Pregnancy offers these ideas for parents when discussing sexual responsibility with their children. Be clear about your own sexual values and attitudes. Communicating with your children about sex, love, and relationships is often more successful when you are certain in your own mind about these issues. Talk with your children early and often about sex, and be specific.
2. The correct and consistent (every time) use of latex condoms significantly reduces the risk HIV transmission and also reduces the risk of acquiring or transmitting many other sexually transmitted infections and reduces the risk of an unplanned pregnancy. Use of a condom every time can significantly reduce the risk of getting HIV, a sexually transmitted disease or of an unplanned pregnancy. Learn more:

<http://www.med.navy.mil/sites/nmcphc/health-promotion/reproductive-sexual-health/Pages/condoms.aspx>

1. Condoms should be used every time – even in “established” relationships – at least until the people in these new relationships are confident that it will be a long-term, mutually faithful relationship AND confident that neither partner has brought an infection into the relationship (for example, by being tested together). Learn more:

<http://www.med.navy.mil/sites/nmcphc/health-promotion/reproductive-sexual-health/Pages/condoms.aspx>

1. Chlamydia is the most frequently reported sexually transmitted infection among active duty Sailors and Marines, just as it is among Americans in general. All sexually active women aged 24 and under ask their doc about being tested annually for Chlamydia. Learn more:

<http://www.med.navy.mil/sites/nmcphc/Documents/health-promotion-wellness/reproductive-and-sexual-health/sharp-poster-ct-2013.pdf>

See the Quickie video on Chlamydia at:

<https://es.med.navy.mil/sites/nmcphc/Documents/downloads/healthy_living/sexual_health/Chlamydia_N1526-17-0014.wmv>

1. Sexually transmitted infections (STIs) remain a major public health challenge in the United States. While substantial progress has been made in preventing, diagnosing, and treating certain STIs in recent years, CDC estimates that approximately 19 million new infections occur each year, almost half of them among young people ages 15 to 24. In addition to the physical and psychological consequences of STDs, these diseases also exact a tremendous economic toll. Direct medical costs associated with STIs in the United States are estimated at up to $19 billion annually.

More than half of preventable infertility among American women is caused by sexually transmitted infections - particularly Chlamydia and gonorrhea. Up to 40% of women with untreated Chlamydia infection will develop pelvic inflammatory disease (PID). Of those with PID, an estimated 20% will become infertile; 18% will experience debilitating chronic pelvic pain; and 9% will have a life-threatening ectopic pregnancy. Chlamydia infection in women may also increase their risk of HIV transmission by 3 to 5 fold. See the Chlamydia Quickie video (CaC required) at: <https://es.med.navy.mil/sites/nmcphc/Documents/downloads/healthy_living/sexual_health/Chlamydia_N1526-17-0014.wmv>

## Oral Sex is Not Considered Safe Sex. Like all sexual activity, oral sex carries some risk of infection with a sexually transmitted infection (STI), including syphilis, gonorrhea and Human Immunodeficiency Virus (HIV). Abstaining from oral, anal, and vaginal sex all together or having sex with a mutually monogamous uninfected partner are the only ways that people can be completely protected from the transmission of HIV and other STDs.

## What if there was a pill that could prevent HIV? There is. HIV Pre-exposure Prophylaxis (PrEP) is a daily dose of Truvada, available in every DoD medical facility, that can reduce the patient's risk of acquiring HIV by 90%. Our patients are increasingly asking about PrEP. Candidates for PrEP include patients at high risk of acquiring HIV, such as men who have sex with men, sexual partners of people living with poorly-controlled HIV, and others. The CDC estimates that over 1 million people in the U.S. could benefit from PrEP, including one of four men who have sex with men. People at high risk for HIV can use PrEP to greatly reduce their risk for HIV until their life circumstances change and they no longer need it. Learn more:

<http://www.med.navy.mil/sites/nmcphc/Documents/health-promotion-wellness/reproductive-and-sexual-health/hiv-don.pdf>

See the HIV PrEP Quickie video (CaC required) at: <https://es.med.navy.mil/sites/nmcphc/Documents/downloads/healthy_living/sexual_health/HIV_N1526-17-0012.wmv>

1. HPV Vaccine prevents genital warts and many cancers of the cervix, penis, anus, head, nuck and throat. The vaccine is available at all military medical facilities for males and females aged 9 to 26. Three shots over a six-month period are needed. Have you started? Have you finished? Learn more:

<http://www.med.navy.mil/sites/nmcphc/Documents/health-promotion-wellness/reproductive-and-sexual-health/sharp-poster-hpv-2013.pdf>

See the HPV Quickie video at:

<https://es.med.navy.mil/sites/nmcphc/Documents/downloads/healthy_living/sexual_health/HPV_N1526-17-0013.wmv>

1. Why should my sexual partner be told that I have a sexually transmitted disease?
   * If you have a sexually transmitted disease, any or all of the people you had sex with (vaginal, oral, or anal sex) may also be infected with the disease. But they may not even know they are infected. By notifying them, you can help ensure they receive the medical treatment they need.
   * Telling your partner shows you respect and care about them. Your honesty may build trust and may encourage your partner to share sexual health information with you.
   * Telling your partner may also prevent future misunderstandings or legal action. Many people who are infected with an STD do not notice any symptoms, until they become very ill. For example, while most (though not all) men who are infected with Chlamydia or gonorrhea get symptoms within 30 days of becoming infected, most women do not. Instead, many women may not notice their infection at all, until it causes very serious problems, like pelvic inflammatory disease (PID) or infertility. It is very important that everyone who may have been exposed to the disease gets treated. This protects people from the sometimes very serious consequences of untreated infections, and
   * Telling people they need to get treated protects their sexual partners (like you) from getting their infection.
2. What is the most effective method of birth control? Only abstinence (not having sex) is 100% effective in preventing pregnancy. Methods that are highly effective (over 99%) include IUDs (intrauterine devices), the hormonal implant, hormone injections and sterilization (vasectomy and tubal ligation). Methods that can be very effective when used correctly are birth control pills, natural family planning, the diaphragm, condoms, and spermicides (foam).
3. What can a woman do to prevent pregnancy if she has unprotected sex? If a woman has had intercourse without using birth control or if something happened (such as a condom broke), she can use emergency contraception up to 72 hours after unprotected sex. Men and women can buy the one-dose emergency contraceptive pill in drug stores – without any age limitation - or can get them free from their medical department or at any Navy medical treatment facility. Emergency contraceptive pills will not protect a person from sexually transmitted infections. If the sexual encounter happened more than 3 days but less than 5 days ago there are 2 other emergency contraception options – a pill called “Ella” and the copper IUD – but both require a prescription.
4. **About HIV and Gay and Bisexual Men**

Among active duty sailors and marines with HIV, almost all are men, and about 7 of 10 of these men are men who have sex with men. Men who have sex with men (MSM), particularly young, African-American MSM, are most severely affected by HIV. MSM make up only 2 percent of the total U.S. population, but account for 63 percent of all new HIV infections, according to statistics from the CDC. The risk - In the U.S., MSM are 44-86 times as likely to be diagnosed with HIV compared to men who have sex with women only. A recent study found that 1 in 5 (19%) MSM in 21 major US cities were infected with HIV, and nearly half (44%) were unaware of their infection. Learn more about Gay men’s health at: <http://www.med.navy.mil/sites/nmcphc/health-promotion/reproductive-sexual-health/Pages/gay-bisexual-mens-health.aspx>

See the HIV PrEP Quickie video (CaC required) at: <https://es.med.navy.mil/sites/nmcphc/Documents/downloads/healthy_living/sexual_health/HIV_N1526-17-0012.wmv>