

Intersectionality & Communication

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Positionality, Microaggressions, and Bias

Positionality, microaggressions, and biases can have a significant effects on a person's ability to navigate important conversations about healthcare, impeding wellbeing.

Positionality = Positionality refers to where one is located in relation to their various social identities(gender, race, class, ethnicity, ability, geographical location etc.); the combination of these identities and their intersections shape how we understand and engage with the world

Microaggressions= Microaggression is a term used for commonplace verbal, behavioral or environmental slights, whether intentional or unintentional, that communicate hostile, derogatory, or negative attitudes toward stigmatized or culturally marginalized groups.

Biases= Bias is a preference in favor of, or against a person, group of people, or thing. These initial human reactions, which are often unconscious, are rooted in inaccurate information or reason and are potentially harmful.



- * **Gay**
- * **Bisexual**
- * **Lesbians**
- * **Queer**
- * **Transgender**
- * **Youth**
- * **Aging**
- * **People who use drugs**
- * **Disabilities**
- * **People of Color**



Experiences in Health Care Settings

- Stigma & Shame (Not being out to providers)
- Judgment and assumptions from Providers
- Difficulty talking about sex
- Providers don't understand
- Having to “teach” providers
- Misidentifying – Names & Gender
- Mistrust in Systems
- Lack of Representation among Providers
- Electronic Health Records, clients don't “fit in the box” (legal names, limited identity options)

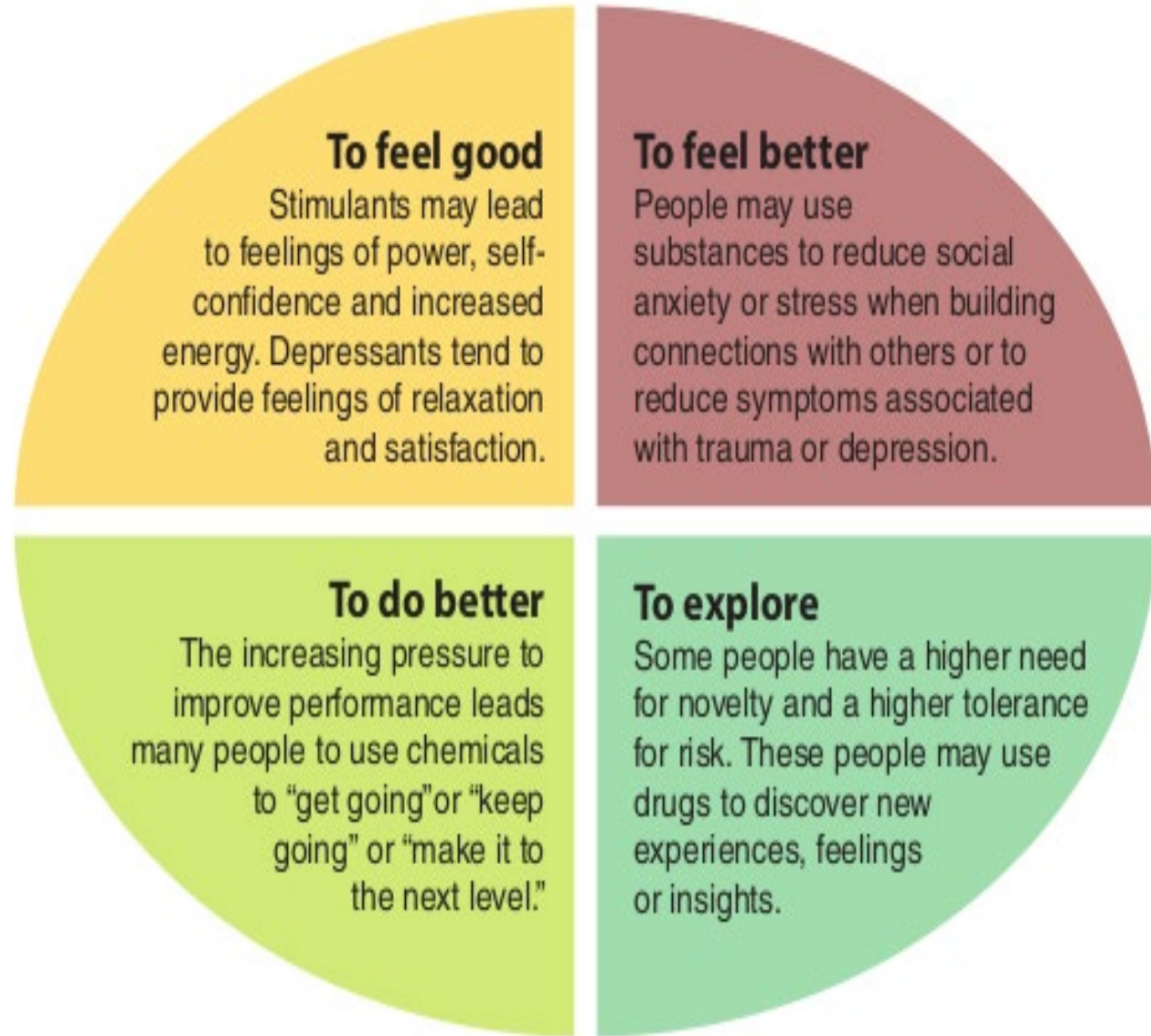
Who uses substances?

(You, lover, family, friends)

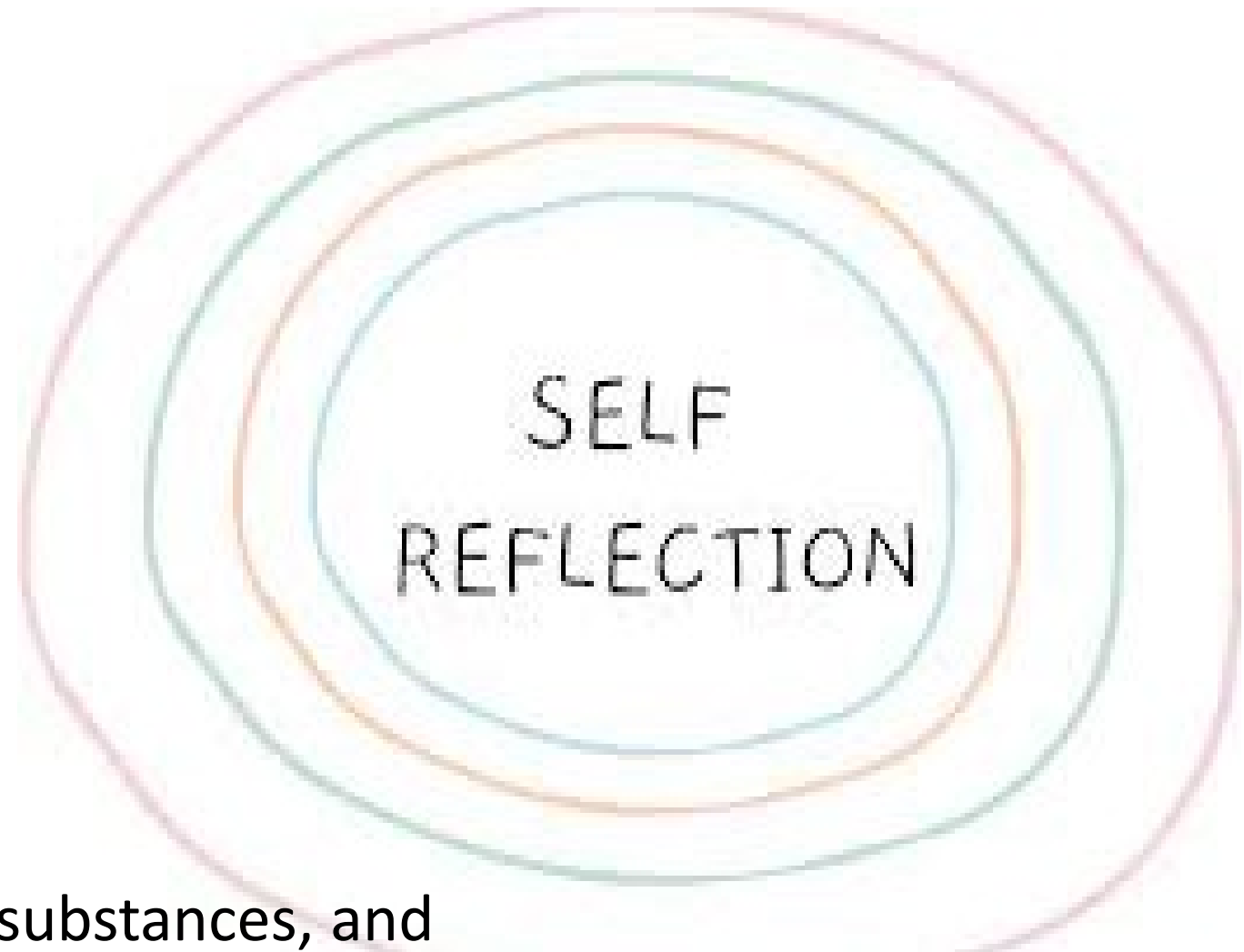
Assumptions Vs. Reality:

- Street-based vs WIC clients
 - People with and without Resources
 - Queer & Transgender Individuals
 - Athletes & Armed Forces
 - Accident & Trauma Victims
- *Substances = affordable mental health support

We are either sober or users. Where are you on the spectrum? What is the goal?



Cultural Humility



How does your relationship with substances, and experience with others who use(d), impact the way you see the world and interact with clients?

The text "Let's TALK ABOUT SEX!" is centered in a white rectangular box. "Let's" is in purple cursive, "TALK" is in white inside a blue speech bubble, "ABOUT" is in green 3D block letters, and "SEX!" is in pink 3D block letters. The scene is surrounded by various sexual health products: several purple condoms, a blue lubricant tube, a purple lubricant tube, a blue condom with a white sperm, a yellow condom with a white sperm, and a syringe. A small grey speech bubble with "u up?" is also present. The background of the illustration is pink with light blue water droplets.

Let's TALK ABOUT SEX!



Sexual Health is a state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled.” (WHO, 2006a)

Sexual Health Workshop

What does “sexual health” mean to you?

What are barriers to sexual health for you and your community?

How did you learn about sexual health?
What was the focus & tone?

Who do you discuss your sex/sexuality with?
Who do you avoid talking about sex with?



BEST PRACTICES



We operate under a Harm Reduction framework which is about meeting people where they are without judgement, and providing tools and education to help people live their best lives.



- Avoid load language
- No fear-based or policing messages
- Real people & real stories
- Information about tools
- Linkage support to providers
- Multilingual & Multicultural
- Visibility – Fliers, Socials & billboards
- Challenge stigma
- Overlaps with HIV & HCV efforts / funding

sex

POSITIVE

Sex Positivity

- Celebrates authentic sexual desire
- Welcomes all forms of consensual sexual activity
- Views sex as a natural and health part of our human experience

Why:

- Invites clients to share openly about their sexual history & partners
- Supports clients in letting go any shame around sex, which may have been a barrier to pleasure, negotiated safety and accessing services

How:

- Lean in with curiosity and questions – further your knowledge and understanding



The Pleasure Principles

Pleasure-based Sexual Health

These Pleasure Principles are designed to act as a guide and inspiration to support people and organisations to embark on the journey towards a sex-positive, pleasure based approach to sexual health. The Pleasure Principles aim to help inspire and guide you as a pleasure activist, propagandist or practitioner.

LOVE YOURSELF

To build a pleasure-inclusive world, love yourself and have kindness for yourself and others. Collaborate with and promote other pleasure champions.



EMBRACE LEARNING

Evidence and new knowledge on the impact of pleasure positive approaches will ensure more sexual health for all. Be evidence-driven and spread the love with your new knowledge.



TALK SEXY

Pleasure-positive messaging communicate positively & effectively. Adopt pleasure-inclusive language and imagery across your media and mediums.



BE FLEXIBLE

Context and culture are critical. Be adaptive in each unique context and recognise pleasure based sexual health is possible for all.



THINK UNIVERSAL

Sexual pleasure is a universal phenomenon, yet different for each individual. Recognise individual identities, context and culture to ensure pleasure based sexual health.



RIGHTS FIRST

Sexual rights are the building blocks of pleasure-based sex. Remember rights when you enable pleasure-based sexual health.



BE POSITIVE



Core to all the principles is to be 'sex positive'. Remember that, when done right and when you feel safe, sex can be very good for you!

the
pleasure
project.

*Sexual health
is for everyone.*



**You're never too
hot for safer sex.**



Sexual Health Services

- **Expansion to include STIs & HCV**
*prevention including individuals with HIV+
- **Rapid PrEP & ART starts**
- **At-home Test Kits**
- **Express STI Screening**
- **Doxy PEP & MPX Vax**
- **Sex Positive & Inclusive**

Drug User Health

STOP
HIV_{ATL}

**ATLANTA'S BETTER
WITH YOU IN IT.**

NOW PROVIDING SAFER USE SERVICES

- Sterile Syringes
- Safer Injection Kits
- Naloxone Nasal Spray
- Fentanyl and Xylazine Test Strips
- Safer Sex Supplies and Testing
- Treatment Referral

And more!

**WEDNESDAYS
FROM 5:00 PM
TO 7:00 PM**

NEIGHBORHOOD UNION HEALTH CENTER

186 SUNSET AVE. ATLANTA, GA 30314

WEDNESDAY-FRIDAY



- Reduce rates of HIV, Hep C, and injury in people who inject.
- Reduce rates of preventable overdose leading to hospitalization and death.
- Reduce barriers which prevent people who use drugs from accessing life-improving and stabilizing services.
- Create a safe and welcoming culture that is inclusive of people who use drugs.

1,275,000 people have seen the Fentanyl billboard campaign in the **last 5 months** across **15 billboards** in Metro Atlanta.

Can you tell which pill contains Fentanyl?



Test your drugs.

Doing a line?
Use a strip.

Test your drugs.

Atlanta's better
with **you** in it.

Test your drugs and
carry Naloxone.

SAY THIS . . .

person with a substance use disorder
person living in recovery
person living with an addiction
person arrested for drug violations
chooses not to at this point
medication is a treatment tool
had a set back
maintained recovery
positive drug screen

. . . INSTEAD OF THIS

addict, junkie, druggie
ex-addict
battling/suffering from an addiction
drug offender
non-compliant/bombed out
medication is a crutch
relapsed
stayed clean
dirty drug screen

Loaded Language

Avoid words like:

Disease
Surveillance
Investigation
Addict
Repeat Offender

Do not:

Manipulate or
police clients

Do **NOT** use...

- STD
- Risky / High Risk
- Unprotected
- Safe sex
- Substance Abuse
- MSM
- “Preferred” Pronouns
- Case
- DIS
- Target Population & Hard to Reach

Please use...

- ✓ STI or Sexual Health
- ✓ Exposures
- ✓ Condomless
- ✓ Safer sex
- ✓ Relationship w Substances
- ✓ Patient Identity
- ✓ Pronouns
- ✓ Individual
- ✓ Health Navigator
- ✓ Priority Populations



Getting comfortable with LGBTQ+ slang

Health Coaching: Linkage & Partner Services

- Setting the agenda
- Collaborative
- Self-coaching
- Dismantling power dynamics
- Informative / Educational
- Check Understanding
- Cultural Humility
- Trauma Informed
- Sex Positive & Harm reduction

Not – Manipulative & Fear-based



Setting the Agenda



Ask Clients what they want to discuss



Confirm that you will address the client's concerns and ask for additional items



Identify what from the client's concerns you can address today



Share the things you would like to talk about



Summarize, briefly, all the agenda items – yours and the client's

Intentional Spaces



How do you create a safe & welcoming space?

Who do you prioritize? How?

Community Engagement

Social Determinates of Health
(*individual & their choices)

Power Dynamics / Client-centered

What **YOU** want vs What **THEY** want

Location & Accessibility