



CENTRE FOR
Urban Health
INITIATIVES



URBAN YOUTH AND THE DETERMINANTS OF SEXUAL HEALTH 2010 STUDENT SYMPOSIUM

THURSDAY, MARCH 25, 2010

The Native Canadian Centre

16 Spadina Road
University of Toronto





CENTRE FOR
Urban Health
INITIATIVES

2010 STUDENT SYMPOSIUM ON URBAN YOUTH AND THE DETERMINANTS OF SEXUAL HEALTH

AGENDA

9:00-9:30	Registration
9:30-9:45	Welcome by Jessica Yee Executive Director, Native Youth Sexual Health Network
9:45-10:00	Opening Ceremonies by Elder Joanne Dallaire
10:00-10:15	Performance by the Red Slam Collective
10:15-10:30	Shannon Orchard Young: <i>"A New Pedagogy of Sexual Education"</i>
10:30-10:45	Ashley Wynne: <i>"Social Exclusion as an Underlying Determinant of Sexually Transmitted Diseases in Canadian Aboriginals"</i>
10:45- 11:00	Jerri Clout: <i>"What is the Meaning of 'Sexual Health' in Sexual Health Peer Education?"</i>
11:00-11:15	Katie Cook & Alix Holtby: <i>"Image as Metaphor: Photovoice with LGBTQ Youth"</i>
11:15-11:30	<u>Health Break/ Poster Presentations</u>
11:30-11:45	Nakia Lee-Foon: <i>"A Systematic Review of the Efficacy of Parent Based Sexual Education Intervention Programs on the Reduction of Sexual Risk Behaviours of Black-Canadian Preadolescents"</i>
11:45-12:00	Michelle Vibert: <i>"For Love or for Pleasure: Why are Hamilton Street Youth Having Sex"</i>
12:00-12:15	Arlene Jardine: <i>"Bringing Sexy Back"</i>
12:15-12:30	Heidi Newton: <i>"Changing the Face in the Mirror: Sexually Diverse Youth, Pregnancy Involvement, and the Impact of Homophobia and Heterosexism"</i>
12:30-1:45	<u>Lunch / Poster Presentations/ Button making with LGBT Youthline</u>
1:45-2:00	Gillian Frosst: <i>"Sexual Health and Urban Greenlandic Youth: Initial Findings from the Greenland Sexual Health Project"</i>
2:00-2:15	Natalie Causarano: <i>"Adolescents, Religion and Sexual Health Knowledge Gaps in Toronto"</i>
2:15-2:30	Broden Giambrone, Chavisa Brett & Saamer Usmani: <i>"Everything That They Are: Understanding and Responding to the Needs of LGBTQ Newcomers in Toronto"</i>
2:30-2:45	Faraz Vahid Shahidi: <i>"Social Determinants of Health: A Political Economy of Migrant Sexualities"</i>
2:45-3:00	<u>Health Break/ Poster Presentations</u>
3:00-3:15	Jessica Yee: Executive Director, Native Youth Sexual Health Network
3:15-4:15	Presentation by Andrea Smith: <i>"Race, Sex, and Settler Colonialism: Activist Research Methodologies"</i>
4:15- 4:30	Student Awards
4:30-5:00	Closing



ORAL PRESENTATION ABSTRACTS

Towards A New Pedagogy of Sexual Education

Shannon Orchard Young, University of Toronto

Education plays an important role in the formation of the individual within our society because it has power to shape and inform how knowledge is produced, distributed and absorbed. Sexual and reproductive health is determined and influenced by a young woman's social location within the power dynamic that surrounds her situation, her position of privilege, her economic position, her own family and her health pressures. This paper reflects on a series of workshops developed to assist young women in unpacking the cultural and social hegemony of sexual and reproductive health within Toronto urban core. Using the role of education and the media in shaping identities and ideas about our bodies, the author facilitated the conversations understanding the ways that our bodies have been co-opted by media, a corporate and pharmaceutical agenda and the neo-liberal political organizing which has encouraged a dependence, not on ourselves, but on these forces to shape and construct ideas of normalcy and healthy sexuality. Instead of legitimizing this relationship, this paper shows how the deconstruction process allows young women to question this and begin to develop a new pedagogy surrounding their bodies. The paper argues that through participation in these workshop young women involved were able to construct their lived reality of sexual health into something that was based on advocacy and autonomy to make the right choices for their lives.

Social Exclusion as an Underlying Determinant of Sexually Transmitted Diseases in Canadian Aboriginals

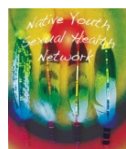
Ashley Wynne, University of Alberta

Aboriginal populations suffer a disproportionate burden of infectious disease in Canada; including high rates of sexually transmitted diseases (STDs). These disparities cannot be adequately understood without a rooted focus on the social determinants of health for Aboriginal populations in Canada. This paper outlines the ways in which institutional and individual level social discrimination has functioned as an important underlying cause of the high STD rates witnessed in Canada's First Nations, Inuit, and Métis communities. Interventions that have been developed to counter this problem will be discussed, as well as what else can be done. This paper concludes with a proposed cross-cultural peer education program aimed at increasing cultural pride and self-esteem among Aboriginal youth and countering the societal stereotypes that are often held by non-Aboriginal participants.

What is the Meaning of 'Sexual Health' in Sexual Health Peer Education?

Jerri Clout, West Ferris Secondary School

Peer education is a commonly used vehicle in sexual health education. However, among different programs and peer educators, the definition of sexual health used can be widely varied. The goal of this research was to explore the different ways in which sexual health peer educators across Ontario conceptualize 'sexual health'. Data were collected from eighteen participants in seventeen semi-structured interviews of youth (16-29) sexual health peer educators in Ontario, Canada. Community-based research principles were employed throughout this study. Youth were trained and involved throughout the protocol development, data collection, data analysis and knowledge translation phases of this project. The findings indicate that the definition of sexual health covers a vast array of topic that differs among educators, programs, organizations and settings. Common components of 'sexual health'



as described by a diverse group of peer educators include: mental and physical health, sexuality, knowledge dissemination to facilitate informed decision making and the importance of healthy relationships. While some respondents understood 'sexual health' as it related to the individual, others saw it more broadly in relation to social determinants of health and support networks. We found that for youth sexual health peer educators in Ontario, the definition of sexual health is highly variable and expands beyond physical and medical topics, including a more holistic view of health and relationships. These findings suggest that youth sexual health peer education programs are responding to the needs of youth by addressing sexual health more broadly and in the context of individuals' lives.

Image as Metaphor: Photovoice with LGBTQ Youth

Katie Cook & Alix Holtby Wilfrid Laurier University; Robb Travers, Wilfred Laurier University

Lesbian, gay, bisexual, transgender and queer (LGBTQ) youth can experience significant social exclusion including rejection from family and peers, social isolation, and homophobic/transphobic harassment and violence. This can impact the sexual health of LGBTQ youth and has been linked to increased health risk behaviours and negative psychosocial outcomes. To contextualize sexual health risk in the lives of LGBTQ youth, we examined social exclusion through the use of 'Photovoice' – an arts-based approach to research that involves photography, group discussion and reflection. Fifteen LGBTQ youth (aged 16 – 23) from Waterloo Region participated in a series of four Photovoice sessions in the summer of 2009. Participants were asked: "What are your experiences as LGTBQ youth/part of the queer community in Waterloo Region?" The first session was used to provide participants with guidelines and cameras for the project. The next two sessions were photo discussion sessions, where participants completed reflection worksheets for their photos and engaged in group discussion. Finally, participants attended a fourth session to reflect on the photovoice experience. Using a Photovoice methodology created space for participants to reflect on their experiences in the Waterloo Region and to construct images to represent those experiences. Participants put considerable effort into creating complex, metaphorical images that gave substantial insight into their experiences. In this session, we review a selection of their photographs to illustrate how images are used as metaphor by LGBTQ youth to convey important messages about their experiences and their lives.

A Systematic Review of the Efficacy of Parent Based Sexual Education Intervention Programs on the Reduction of Sexual Risk Behaviours of Black-Canadian Preadolescents

Nakia Lee-Foon, University of Ontario Institute of Technology

This article presents a systematic review of parent-preadolescent sex communication intervention programs published from January, 2000 - December, 2009. The aim was to determine the efficacy of these programs on ameliorating Black-Canadian parent-preadolescent sex communication and the reduction of sexual risk behaviours exhibited by many preadolescents. Articles were identified in CINAHL® via EBSCO host, ERIC™, MEDLINE® via OVID, Web of Science® and PubMed® using a data abstracting guide. Only intervention studies published in peer reviewed journals, involved preadolescents and their parents, presented intervention versus control groups, pre and post-intervention data, were of mixed design and performed a minimum three-month follow-up of parent-preadolescent sex communication and sexual risk behaviour were included. All studies indicated an increase in parent-preadolescent sex communication of Black parents and preadolescents as well as the reduction of sexual risk behaviours in the intervention groups post-intervention. However, mixed results concerning the long-term impact of these programs were noted three months and greater post-intervention. Additionally, no articles were located on Black-Canadian parent-preadolescents sex



communication resulting in 79% of the selected studies originating from the United States 14% the Caribbean and seven percent from Africa. The implications of this review are discussed.

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For Love or for Pleasure: Why are Hamilton Street Youth Having Sex?

Michelle Vibert, The AIDS Network (Hamilton) & University of Waterloo; Sandra Bullock, University of Waterloo; Adrian Betts, Jose Sorzano, Bridget Marsdin, & Deborah Stinson, The AIDS Network (Hamilton)

The Safe n' Sexy Project, a community-based project, assessed the sexual-health knowledge and needs of street youth in Hamilton, Ontario. The objective is to better understand why street youth in Hamilton are having sex for the first time and if/how their reasons for having sex change over time. Quantitative interviews were done with 97 youth. We asked them their reason(s) for having sex the first and most recent times. The results show: 94% of youth reported having sexual intercourse; 53% reported having sex in a loving relationship, and 15% reporting never having sex in a loving relationship. Young men identified "I was horny" (69%) and "I felt ready" (54%) as their top two reasons for their first sexual experience; young women indicated "I felt ready" (49%) and "I was in love" (26%). The men had sex most recently for the reasons "I was horny" (75%) and "I felt ready" (58%); whereas the women indicated that they "were in love" (49%) and "felt horny" (44%). In conclusion, young men and women in Hamilton have sex for different reasons. Compared to their male peers, women identify pleasure as less important than love for having sex the first time. As young men continue to have sex, they identify showing love to a partner, while being horny becomes more significant for young women. Understanding why youth have sex allows social services to counsel and educate youth on healthy relationships and safer sex.

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Bringing Sexy Back

Arlene R. Jardine (B.A. Honors, M.E.S.), York University; Rose-Ann Marie Bailey (B.F.A., B. Ed.), York University

Bringing Sexy Back (BSB) is a project developed by TAIBU Community Health Centre's Health Promoter Rose-Ann M. Bailey. BSB set out to develop an arts-based sexual health educational intervention programme for racialized and marginalized youths between the ages of 15-21. With the assistance of Arlene R. Jardine, we developed a comprehensive training curriculum for 8-10 out-of-school out-of-work racialized youths. During a 3-day intensive retreat - outside of their local communities, youths were placed through a compact education process focusing on issues around the social determinants of health associated with sexual health and Urban Arts Therapy. The Urban Arts Therapy is a way to understand and unpack sexual health mis-education and trauma for marginalized youths. U.A.T. is a combination of the arts, cultural spiritual and facilitation with a strong emphasis on dialogue. The combination of these best practices provide tools that are derived from Arlene Jardine's research in the above fields, using goal setting and strategies to assist individuals in unpacking issues around sexual health, creativity and group dialogue. This was important, as our aim was to help youths view sex in a positive way by exploring their own experiences and reflecting on the experiences of others through the arts. The healing process starts from the minute each youth experience is heard, recognized and legitimized by his/her peers. This process of legitimization is done through dramatization, verbal expression or physical expressive exercises. These peer facilitators supported the agency and the development of new methodologies to enhance peer education tools for the Malvern Community. It also increased understanding for minority youths about sexual health risks factors for STI/HIV in a culturally sensitive manner; Increased youth's capacity to use arts-based community-level intervention to disseminate sexual health education; addressed the lack of condom usage, increased safer sex



negotiation skills, understood issues around substance use and sexual decision making (alcohol and drugs).

Changing the Face in the Mirror: Sexually Diverse Youth, Pregnancy Involvement, and the Impact of Homophobia and Heterosexism

Heidi Newton (MA Community Psychology Candidate), Wilfrid Laurier University; Robb Travers (Assistant Professor), Wilfrid Laurier University.

Findings from the Toronto Teen Survey (TTS) reveal that sexually diverse youth (including gay, lesbian, bisexual and those who 'question' their sexual orientation) between the ages of 13 and 18 are 3.2 times more likely than heterosexual youth to be involved in a pregnancy (Flicker et al., 2009). Through a qualitative lens, the current study aims to examine the prevalence of heterosexism and homophobia in youths' lives. Additionally, through grounded theory, it aims to fill the gap in the literature surrounding the question of "why higher rates of pregnancy among sexually diverse youth?" Fifty-seven (N=57) ethnographically and sexually diverse youth from around Toronto or the Greater Toronto Area (GTA) were interviewed in 8 semi-structured focus groups. The data were then transcribed verbatim and coded for themes. Some of the themes that emerged are 'Normal Sexuality' – Dominant Heterosexual Representations of Relationships, 'Not Even an Accurate Representation:' Heterosexism/Exclusion in Curriculum, 'You're gay, you're bad': Homophobia in the School Environment, 'To Prove that I'm Not': Pregnancy as Proof of Straightness, and 'I could change your mind': Pressure to Conform to Heterosexual Norms. Heterosexism and Homophobia are prevalent in the lives of these sexually diverse youth and pregnancy involvement can be seen as a response to the pressures associated with both homophobia and heterosexist norms.

Sexual Health and Urban Greenlandic Youth: Initial Findings from the Greenland Sexual Health Project

Gillian Frosst, BSc (MPH Candidate, Epidemiology), Dalla Lana School of Public Health, University of Toronto, Dr. Dionne Gesink, PhD (Assistant Professor, Epidemiology), Dalla Lana School of Public Health, University of Toronto

Greenland reports the highest rates of sexually transmitted infections (STIs) in the North American Arctic. A community-based participatory research project was initiated to quantify the prevalence of different STIs in Greenland and to identify the familiar, social, cultural, and environmental factors that influence Greenland's high rates of STIs, particularly in youth. Between 2008 and 2009, 314 Greenlanders (predominantly Inuit) from the country's two largest cities were enrolled in the Greenland Sexual Health Project, Inuulluataarneq. This study was primarily interested in youth sexual health, so youth were oversampled through a mix of random sampling and volunteer enrolment from the local high school and teachers college. Participants were asked to complete a sexual health questionnaire and to provide a urine sample (males and females) and self-collected vaginal swab (females only) for STI testing. The results show that more than half (57%) of participants were between the ages of 15 and 24 years. Of these, 28% tested positive for at least one of the following STIs: *Mycoplasma genitalium*, *Chlamydia trachomatis*, *Neisseria gonorrhoeae*, or *Trichomonas vaginalis*. STI prevalence was higher in females (30%) than in males (25%). Among youth who tested positive for an STI, almost 50% did not know or believe they were at risk of having an STI. Preliminary findings indicate that trust and communication are important factors influencing sexual health. These results are being used to inform sexual health interventions, public health policy, and health care delivery in Greenland.



Adolescents, Religion and Sexual Health Knowledge Gaps in Toronto

Natalie Causarano, Queen's University

This study examined the association between sexual health knowledge and religious affiliation. Adolescents aged 13-18+ residing in the city of Toronto participated in the Toronto Teen Survey, which contained a wide range of questions regarding adolescent sexuality and sexual health. Adolescents were asked about their previous sexual health knowledge experiences and desires for eight sexual health topics. Participants who indicated that they wanted more information on that topic were classified as having sexual health knowledge gaps, and these responses were analyzed to determine if the amount of knowledge gaps (one or more gaps, or none, low, medium and high gaps groups) varied by religion. The results showed that Muslim adolescents were less likely to have one or more knowledge gap compared to those identifying as no religion. The amount of knowledge gaps also differed by both age, gender and location of sexual education. Those 18 years old and older were more likely, and 14 year olds were less likely to have one or more knowledge gaps and to be in the higher knowledge gap category than 13 year old adolescents. Compared to females, males were less likely to have gaps in knowledge, and compared to those who had never had sexual education, those who had it at multiple locations were more likely to be in the high knowledge gap group. In addition, the responses were analyzed to determine if religion was associated with being knowledgeable about the eight sexual health topics. The results show that Protestant adolescents were more likely to be knowledgeable about STIs than those who had no religion. Limitations and future research directions are also discussed.

Everything That They Are: Understanding and Responding to the Needs of LGBTQ Newcomers in Toronto

Broden Giambrone, University of Toronto ; Chavisa Brett, York University; Saamer Usmani, University of Toronto; Susan Flynn, Planned Parenthood Toronto; Robb Travers, Wilfrid Laurier University

Toronto, Canada's largest and most diverse city, is home to many newcomers from all corners of the globe. More than half of the city's population was born outside of Canada and just slightly fewer (47%) report being part of a visible minority. While Toronto is often heralded as a "multicultural" haven, the needs of gay, lesbian, bisexual, and transgender (LGBT) newcomer youth remain largely unknown. This presentation draws upon data from Teens Resisting Urban Trans/Homophobia (TRUTH), a partnership initiative between Planned Parenthood Toronto and Wilfrid Laurier University. LGBTQ youth and service providers took part in focus groups in 2009 to better understand how social exclusion impacts the well-being of LGBTQ youth. LGBTQ newcomer youth frequently experience homophobia and transphobia in their countries of origin as well as in their new city, Toronto. Moreover, youth report significant racism and systemic barriers to accessing services in Toronto. This data will emphasize the intersections between homophobia, transphobia, and racism and how these adversely impact health and well-being. While the youth in the TRUTH study do not share a single experience or identity, we hope that the chorus of their voices will spark expansion of more culturally-competent service provision across Toronto. This session will serve as a call to action for service providers and members of the LGBTQ communities to broaden their understanding of what it means to be 'gay' in Toronto in 2010.

Social Determinants of Health: A Political Economy of Migrant Sexualities

Faraz Vahid Shahidi, University of Toronto

200 000 migrants in the City of Toronto live without status. Though contributing to our local and national economies, these populations are effectively rendered 'invisible,' incapable of accessing services many



others have taken for granted, including hospital care and schools. At the same time, Toronto's more than one million immigrants living with status continue to face disproportionate levels of un- and under-employment, food and housing insecurity, disease and mental illness. The lives of queer – and otherwise gendered – migrants are particularly precarious, due to the sexualized marginalities they experience. Conversations of health equity must necessarily consider the social and political economic realities faced by these vulnerable populations. First and foremost, I suggest that health-related research and public health programs targeting migrant populations rarely consider health outcomes as the product of social or political economic forces, resulting in a theoretical – and practical – myopia that limits the ability for such work to address larger structural violences and inequalities contributing to poor health outcomes in migrant communities. Community programs and services have also, for the most part, participated in overlooking daunting, yet nonetheless critical and essential, political economic dimensions to migrant health. This, again, is particularly true in situations where care and services are delivered to queer – and otherwise gendered – migrants. Rarely are efforts made to fuse together elements of epidemiology, public health, the social sciences and participatory-action. Through the lens of 'Urban Youth and the Determinants of Sexual Health,' I attempt such an exercise, queering various aspects migrant sexual(ity) health – in particular, those aspects concerned with migrant access to community-based health and health care services – while, simultaneously, demarcating space for concerns of migration in LGBT health research and practice.

POSTER PRESENTATION ABSTRACTS

HIV/AIDS Prevention for African-Muslim Girls in Toronto

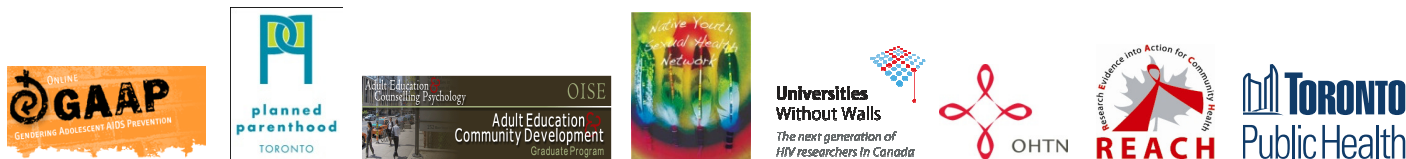
Muna Aden, University of Waterloo

Muslim youth from HIV/AIDS Endemic listed countries, have been "Access-Denied" in terms of HIV/AIDS outreach and prevention efforts in a local Torontonion context. This lack of access is due to a number of reasons; some instigated by the self, some systemic, however most are still to be defined. This presentation explores the nature of this inaccessibility at the physical and social environmental level, through the systemic challenges experienced in the deployment of one pilot HIV/AIDS Project in the Muslim community. ProjectM, also known as 'the Muslim Girls Project' is a grassroots, local ASO project, hosted by Africans in Partnership Against AIDS. To date its tenure has been 18 months. It is a project for young Muslim women by Muslim women from the 14-29 age categories with emphasis on the African community target group. The objectives of the project are to raise awareness and provide HIV/AIDS prevention education to this overlooked and vulnerable community, *in a socio-cultural, religious and linguistically cognizant manner*. Challenges to access include: (1) Inter-community (External factors): Lack of support, cultural competency between funders/providers/community; (2) Intra-community factors: Acknowledging the heterogeneity of Muslim African youth (language, culture, heritage); and (3) Spatial Challenges: Finding ideal Muslim communal space - working within existing Islamic infrastructure is ideal in reaching out to dominant Muslim community. It is recommended that the dominant Muslim community's cultural, religious, linguistic and spatial understandings and modes of discussing sexuality and HIV/AIDS prevention must be integrated and reflected in project delivery models.

Examining sexual health and HIV risk among adolescents

Meaghan Ferguson, M.A., Ontario Institute for Studies in Education – University of Toronto

The phenomena of youth sexual risk taking remains problematic and poorly understood. Unfortunately, there is limited information with respect to the various psychosocial factors that are influential in sexual



decision making and the impact these factors have on the trajectory of decision making among youth engaging in risky sexual behaviour. Previous studies have also failed to develop a comprehensive model for identifying potential risk factors leading to poor sexual health behaviour among youth. The proposed study will include 800 adolescents, equal parts male and female, ranging in age from 18-25 years. Participants will be recruited from different geographical locations in Ontario, including both urban and rural areas. The study will be conducted using an internet survey tool, Survey Monkey (www.surveymonkey.com), which will allow for a thorough questionnaire package to be easily accessible for all participants. Participants will complete both demographic information and a series of relevant questionnaires, which will help determine risk factors (psychological functioning, substance use, sexual history, sexual health, and sexual orientation); resilience factors (avoidant versus active coping styles, social support, self-esteem, perceived self-efficacy, perceived injustice and beliefs in a just world); and, sexual health knowledge and attitudes, self-perceived vulnerability to HIV, and self-perception of overall physical, psychological and sexual health. Data will be collected over 12 months and analyzed using appropriate statistical techniques and organized to develop a multi-factorial risk model. This model will identify the various factors influencing sexual decision making and draw attention to those factors most hazardous to adolescent sexual health.

Sexually Diverse Youth Designing High School Sex Ed

Heather Hunter, Wilfred Laurier University; Robb Travers, Ph.D., Wilfred Laurier University

Recently, (2006-2007) the Toronto Teen Survey (TTS) collected 1,216 surveys from youth age 13-18 living in Toronto. The TTS was one of the largest and most diverse studies on young people's sexual health needs ever done in Canada. From this study, several key factors about the sexual behaviours of sexually diverse (SD) youth were learned: a) SD youth are engaging in sexual activities at a younger age compared to heterosexual teens b) SD youth are engaging in more risky sexual behaviours such as penetrative sex at a younger age and c) surprisingly, SD youth are more likely than heterosexual youth to be involved with teenage pregnancy. These findings indicate the sexual health education is clearly not meeting the needs of sexually diverse youth. Therefore, to gain insight on this issue and follow up on the TTS, we propose engaging in Community-Based Participatory Research with SD youth in Toronto and Kitchener/ Waterloo. Specifically, we would like to conduct focus groups with SD youth to inquire about their experiences with sexual health education, and then have participants design what they believe a sexual health education class in a high school setting should look like. This presentation provides an opportunity to present some of the TTS findings and to seek audience input into the development of the project's next stages.

Sexual Health Concerns of Adolescents With and Without a Chronic Health Condition: A Mixed Methods Approach.

Tamara Landry (MA, PhD Candidate, Health and Rehabilitation Sciences Graduate Program), University of Western Ontario

This presentation will provide information concerning doctoral research being conducted using qualitative and quantitative methods to: 1) explore the sexual health and health status disclosure concerns (where appropriate) of Canadian perinatally and behaviorally-infected HIV+ adolescents, 14-24 years of age, and a comparison group of age-matched adolescents without a chronic health condition, and 2) determine available and needed support services. The proposed research will compare the sexual health and health status disclosure concerns (where appropriate) of perinatally and behaviourally infected HIV+ adolescents, and adolescents without a chronic health condition to determine which perceived concerns



of HIV+ adolescents are similar to those of all adolescents in general, and which are distinctive to each group of HIV+ adolescents. Since minimal research has explored the sexual health and health status disclosure needs of HIV+ adolescents in Canada, little is known about their concerns. In this study, 20 perinatally infected HIV+ adolescents, 20 behaviorally infected HIV+ adolescents, and 20 adolescents without a chronic health condition, will be recruited to complete a questionnaire to determine available and needed support services, and participate in in-depth interviews to explore sexual health and health status disclosure concerns. This research is intended to advance knowledge to help create and implement education, support and prevention programs tailored specifically to the sexual health and health status disclosure concerns of HIV+ adolescents, as well as minimize the risk of HIV transmission and protect the health of HIV+ and HIV- individuals.

Being in the Know: The level of HIV Knowledge among Street Youth in Hamilton, Ontario

Michelle Vibert, The AIDS Network (Hamilton) & University of Waterloo; Sandra Bullock, University of Waterloo; Adrian Betts, Jose Sorzano, Bridget Marsdin, & Deborah Stinson, The AIDS Network (Hamilton)

HIV knowledge has been tested within the school system; however, the Canadian Street-Youth Survey has not tested HIV knowledge. This study demonstrates that street youth have a high level of HIV knowledge although gaps do remain. The challenge is to assess HIV knowledge among Hamilton street youth and identify gaps/misinformation. Our approach involved interviewing 97 Hamilton youth using a 16-item HIV-knowledge scale. Questions addressed HIV protection, transmission, diagnosis and treatment. We found that the average HIV knowledge score was 75%, with 81% of youth scoring 12 or higher (mean=12.9, SD=1.9, range=5-16). Six questions scored lower than others. 57% thought parents/guardians would be contacted if they tested HIV-positive; 48% did not know of the window-period between HIV risk and testing; 43% thought there was an HIV vaccine; 38% thought that HIV could be transmitted by kissing; 27% did not know that oral sex transmits HIV; and 26% thought there was a cure for HIV. The score was dichotomized at 12; youth with a lower score were slightly less likely to have HIV-tested (47% vs 67%; $p \leq 0.10$). The youth demonstrated strong HIV knowledge. Youth were weaker regarding new information (HIV vaccine) and basic information (HIV from kissing and oral sex). Gaps in information may be the result of misunderstanding information only recently in the media. It has been assumed that street youth have poor sexual-health knowledge; this study shows most do not. Youth need to be presented with both basic and high level HIV knowledge.

Dordabis Youth – Photovoice: A reflection on the ways to incorporate art, sexual health and popular education into community-based participatory research with youth; Ciann Wilson (Masters in Environmental Studies), York University,

Through photographic examples from a photovoice project I initiated with youth in Namibia, I will discuss the recent proliferation of photovoice as a research methodology and my plan to merge photovoice with popular education to approach Community-Based Participatory Research (CBPR) with youth regarding sexual health. More specifically, I will outline my goal to work with African, Caribbean and/or First Nations youth surrounding the topics of the Human Immuno-deficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS). Notably, although remnants of the photovoice methodology are rooted in popular education, I will demonstrate my goal to further incorporate the praxis of popular education in the facilitation or curation process of a photovoice project. Thus, I plan to use socio-dramas, tableaux and other popular education-esque activities to incite discussion amongst youth and to deal with the difficult issues that surface in their photovoice projects. Moreover, in keeping with the self



reflexivity promoted by popular education, my project will entail a great deal of reflective writing regarding my situated knowledge as a researcher. In this, my project draws from several disciplines including feminist pedagogy, cultural studies, arts-informed research, Indigenous knowledge, and anti-oppression frameworks. I believe that the unique, collaborative and interdisciplinary environments created by CBPR, popular education and the photovoice methodology will better congeal with the various traditions and cultures of the youth I seek to work with. Further, this interdisciplinary fusion may also encourage health promotion and activism amongst these youth.

Crash Course: Canadian Teens in Zambia

Hana Dhanji, Wilfred Laurier University

Crash Course: Canadian Teens in Zambia is a documentary examining the journey of a group of Canadian youth into southern Africa to explore development initiatives against the looming backdrop of HIV/AIDS. Facilitated by workers from CARE Canada and the NGOs running the development projects in Lusaka, Zambia, the students are permitted access to the myriad initiatives in health and education that support HIV/AIDS affected communities. Questions surrounding access to essential medicines, treatment, prevention and cultural identity permeate the stories of the four featured youth who explore what it means to be a Canadian citizen within a global human family. The documentary speaks to the heart of the difficult issues that face teenagers in a privileged society who desire to change the world that underprivileges those without wealth or material possessions. Over the course of two weeks, the students are exposed to the hardships and successes that face the impoverished communities of Africa, and get a first-hand glimpse into what life is like for youth, similar in age, ambition and strength of spirit, living on the other side of the world. The connections that the students make transcend the intellectual plane, reaching a deeper, personal level where emotionally provocative experiences bridge the intellectual to the real; the poor to the wealthy; the developed to the developing. The documentary concludes with a message of hope for all: it is possible to make a difference. By replacing apathy with the motivation to change the world, we begin to embrace awareness, a sense of shared identity, and a positive direction for our collective future.

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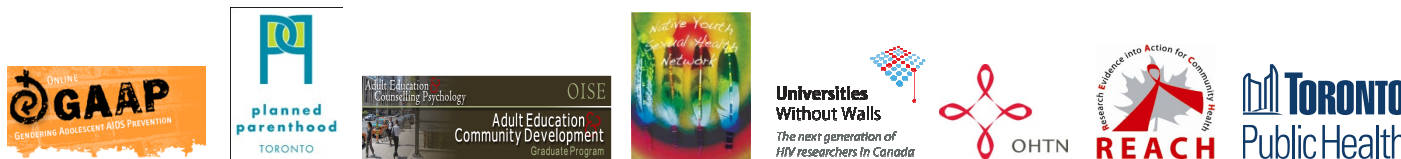
PRESENTER BIOGRAPHIES

Oral Presentations

Shannon Orchard Young: is in her final year of her undergrad at the University of Toronto. Drawn to U of T for the interdisciplinary health studies program, she found a place to combine her personal research interests within the structure academia. Focusing her research on sexual and reproductive health access during conflict and sexual identity for young women, she hopes to expand on this work in the future.

Ashley Wynne: has a Bachelor of Arts and Science in biology and anthropology from McGill University. She is currently completing an MSc in the Department of Public Health Sciences at the University of Alberta, focused on infectious diseases in vulnerable populations. She will be conducting her thesis research on HIV and tuberculosis co-infection in rural western Uganda in the fall of 2010. She currently works as a researcher on the Aklavik H. pylori project, a community driven multidisciplinary project in the community of Aklavik, NWT.

Jerri Clout: is Founder of youth4youth; a youth driven committee that engages young people to learn the facts about HIV/AIDS. She attended the 2006 and 2008 World AIDS Conferences and was named one of Canada's Top 20 Under 20 in 2008 by Youth In Motion. Jerri's mission is that youth worldwide will spread the truth, not the virus.



Katie Cook: was the research manager for the TRUTH (Teens Resisting Urban Tans and Homophobia) project. She is an MA candidate in the Community Psychology program at Wilfrid Laurier University. Katie's thesis research explores the role of choice in women's childbirth experiences using a narrative approach.

Alix Holtby: was the research coordinator of the TRUTH project. She is an MA candidate in the Community Psychology program at Wilfrid Laurier University. Her thesis research focuses on the experiences of women who have sex with women in developing their understanding of sex within a heterosexist society.

Nakia Lee-Foon Glasgow: holds a BSc from UofT. As an undergraduate, Nakia conducted research for health care agencies concerning the treatment of vulnerable populations. These experiences have led her to pursue a MHSoc at UOIT. She is currently researching Black-Canadian parent-preadolescent sex communication to determine more effective ways of reducing exposure to STIs in this population.

Michelle Vibert: is a harm reduction worker at the Hamilton AIDS Network in the cities needle exchange and street outreach program. She works with high risk individuals, specifically IDUs and sex workers. She is currently completing a Master of Science at the University of Waterloo and is interested in research that involves high-risk populations.

Arlene-Roze Jardine: has seventeen years of experience working with youth. She is currently a Masters student in the department of Environmental Studies at York University. Arlene has developed a module called Urban Arts Therapy as a best practice guide for facilitating art based programs for youth who have suffered from trauma and who are living in urban war zones.

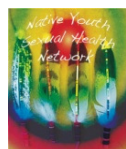
Heidi Newton: is an MA student studying Community Psychology at Wilfrid Laurier University with research interests in Community-Based and Participatory Action Research, LGBTQ issues, sexual health, HIV and Social Determinants of Health. Heidi hopes that her research will positively influence policy development and health outcomes for sexually and gender diverse people.

Samantha White: is a M.Sc candidate at Dalhousie University in the department of Community Health & Epidemiology, and received her B.Sc (Honours) from Memorial University in Statistics and Psychology. Her graduate thesis research (funded by CIHR) involves evaluating what Nova Scotia women think and feel about emergency contraception.

Gillian Frosst: is completing her Masters of Public Health (Epidemiology) from the Dalla Lana School of Public Health at the University of Toronto. Her academic interests include social and infectious disease epidemiology, Indigenous health, and culturally appropriate research methodologies. Currently, she is involved with the Greenland Sexual Health Project and works part-time for Cancer Care Ontario.

Natalie Causarano: undertook a project with Drs. Jason Pole and Sarah Flicker regarding their research with the Toronto Teen Survey (TTS), which collected information on youth sexual health in Toronto. Natalie investigated the association between religiosity and sexual health knowledge. Natalie is currently completing a MSc. in epidemiology at Queen's University.

Broden Giambrone: is an MPH in Health Promotion at the University of Toronto. Broden is interested community-based research on trans health and has worked closely with the Gay/Bi/Queer Trans Men HIV Prevention Working Group and Trans PULSE. Last year he co-organized the student-led 'Research with Pride' forum.



Chavisa Brett: is a Master of Environmental Studies student at York. Her transdisciplinary qualitative research incorporates comprehensive health, political economy, women's studies and social determinants of health in the broader context of the environment. She worked on the Toronto Teen Survey, which is a community-based sexual health research initiative.

Faraz Vahid Shahidi: is a third-year student at the University of Toronto, studying Human Biology and Health Studies. He is a member of 'Health for All', a group of professionals, students and activists advocating for the rights of all migrants, including undocumented and uninsured people, to health and healthcare services, and the right to full status for all.

Saamer Usmani: is a third-year University of Toronto undergraduate student from Karachi, Pakistan. He is working towards a major in Sociology and minors in Anthropology and South Asian Studies. After graduation, Saamer intends to pursue a Master's in Public Health, focusing on epidemiology and global health.

Poster Presentations

Ciann Wilson: hails from Westmoreland, Jamaica and currently lives with her family in Brampton, Ontario. After graduating from the University of Toronto with an Honours Bachelor of Science in Human Biology, Philosophy and Sociology, Ciann is now pursuing a Masters in Environmental Studies at York University in the subject area of sexual health studies.

Heather Hunter: is a MA candidate in the Community Psychology program at Wilfrid Laurier University. Her research interests include Community-Based and Participatory Action Research, LGBTQ issues, sexual health and school systems. Heather plans to conduct research with sexually diverse youth on recommendations for inclusive sexual health education in high schools.

Muna Aden: is a Master's in Public Health candidate at the University of Waterloo. She holds a Bachelor's degree from McMaster University in Health Studies and Psychology. She is currently completing her practicum at Women's Health in Women's Hands Community Health Centre. She also works on ProjectM with Africans in Partnership Against AIDS (APAA), a local AIDS service organization.

Tamara Landry: is a PhD Candidate in the Health and Rehabilitation Sciences, Health Promotion Field, at The University of Western Ontario. Tamara has an MA from the University of Windsor and a BA (hons) from The University of Western Ontario. Tamara's research focuses on the sexual health and disclosure concerns of HIV Positive adolescents.

Jessica Rosen: is a Seneca College student, has been working with TRIP! since the Fall of 2009, doing on-site outreach within Toronto's large - and young - dance-music scene, working directly with at-risk youth in their most vulnerable environments. A firebrand activist, she believes strongly in anti-oppressive frameworks within the healthcare and youth justice systems, and knows first-hand the effects of youth neglect in urban communities.

Hana Dhanji: is pursuing a triple major Hons. B.A. in International Relations, Health Studies and Psychology. Her academic focus is on the intersection between international relations and global health policy. Hana intends to pursue an M.A. in International Relations in London or Geneva, work for the World Health Organization and pursue a Juris Doctor degree.



Youth RIG Seminar Series
“Race, Sex, and Settler Colonialism: Activist Research Methodologies”

Andrea Smith PhD,
Assistant Professor of Media and Cultural Studies,
University of California, Riverside

Within Native studies (as well as in other fields) scholars and activists have called on researchers to “decolonize methodology” (Linda Tuhiwi Smith). Sometimes, however, these approaches often translate simply to changes in content, “culturally sensitive” methods based on a liberal multiculturalist framework, or changes in personnel. Such approaches do not wrestle with the manner in which indigenous peoples and peoples from racialized communities are definitionally defined as ethnographic objects within the academy. This talk will assess the fundamental challenges “decolonizing methodology” poses to a colonial, white supremacist and patriarchal academic industrial complex. It will particularly focus on the importance of decolonizing methodology for youth sexual health research as well as models that are currently being utilized by young women of color activists outside the academy.



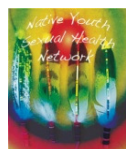
Andrea Smith is the author of *Conquest: Sexual Violence and American Indian Genocide* and *Native Americans and the Christian Right: The Gendered Politics of Unlikely Alliances*. She is also editor of *The Revolution Will Not Be Funded: Beyond the Nonprofit Industrial Complex* and *The Color of Violence*. She is also co-founder of Incite! Women of Color Against Violence and the Boarding School Healing Project.

This event is part of the *2010 Student Symposium on the Urban Youth and the Determinants of Sexual Health*. You are welcome to join us for the full day, or for just this talk.

For more information:

<http://www.utoronto.ca/cuhi/research/urbanyouthrig.html>

**March 25th, 2010, 3:15-4:15pm, Native Canadian Centre of Toronto,
 16 Spadina Road, Toronto, Ontario, M5R 2S7**



SYMPOSIUM SPONSORS

The Centre for Urban Health Initiatives (CUHI):

Through research and partnership building, the Centre for Urban Health Initiatives (CUHI) is helping to create a better understanding of the impact of physical and social environments on the health of urban residents. Located at the University of Toronto, CUHI fosters research development, collaboration and knowledge exchange between individuals committed to urban health, including academic and community researchers, community service providers, policy makers, and health practitioners. Founded in 2004, and funded by the Canadian Institutes of Health Research, Institute of Population and Public Health, CUHI supports scholarship in relevant and emerging areas of urban health, focusing to date on neighbourhoods, food security & urban agriculture, physical environments, youth sexual health, chronic disease prevention & management and environmental health justice. The Centre brings together researchers from different disciplines, provides training and mentoring for research in urban health relationships, creates opportunities for knowledge exchange, and builds partnerships between researchers, policy-makers and communities. www.cuhi.utoronto.ca

Native Youth Sexual Health Network (NYSHN):

The Native Youth Sexual Health Network (NYSHN) is a Can-America wide organization working on issues of healthy sexuality, cultural competency, youth empowerment, reproductive justice, and sex positivity by and for Native youth. NYSHN works with Indigenous communities across the United States and Canada to advocate for and build strong, comprehensive, and culturally competent sexuality and reproductive health education programs in their own communities. www.nativeyouthsexualhealth.com

Gendering Adolescent AIDS Prevention (GAAP):

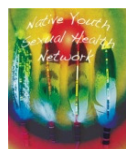
Gendering Adolescent AIDS Prevention (GAAP) includes research and educational projects in Canada and South Africa that use participatory approaches to working with young people in relation to sexuality, HIV prevention and AIDS awareness. GAAP works with diverse youth in academic and community group settings with the overall goal of creating innovative, gender-sensitive HIV education programs. GAAP is located at New College, University of Toronto. www.utoronto.ca/iwsgs/GAAP/index.html

Planned Parenthood Toronto (PPT):

Planned Parenthood Toronto is a community-based, pro-choice agency committed to the principles of equity and to providing accessible and inclusive services which promote healthy sexuality and informed decision-making to the people of the City of Toronto. We are, a fully accredited Community Health Centre, offering a full range of primary health care services, from physicals to STI testing to counseling services to flu shots, workshops on anti-trans/homophobia and sexual health topics, a peer-run phone, e-mail and MSN chat services, programming for young parents and young men, training for other service providers in the Toronto area, and so much more. www.ppt.on.ca

Toronto Public Health (TPH):

Toronto Public Health (TPH) works in many ways to improve the overall health of the population and to overcome health inequalities. They provide services to individuals and communities, and they advocate for public policies that make our city healthier. TPH services are funded by City Council and the Ministry of Health and Long-Term Care. TPH is governed by the Board of Health, comprised of elected councillors and citizen representatives. TPH strives to make their services accessible and equitable to all residents of



Toronto. The TPH sexual health program includes the AIDS and Sexual Health Info Line (free and anonymous sexual health counseling by phone), sexual health clinics, community workshops, STI follow-up and counseling, Needle Exchange Program (The Works), and consultation, support, resources and programming in the areas of birth control, sexually transmitted infections, parenting (raising sexually healthy children), healthy relationships plus much more. www.toronto.ca/health

Ontario HIV Treatment Network (OHTN):

The Ontario HIV Treatment Network (OHTN) is a collaborative network of people with HIV, community-based agencies, health care providers, government policy makers, educators and researchers. The network supports and conducts high quality research to help end the HIV epidemic, and shares the best available evidence with all those who can put that knowledge into action. The OHTN is an active partner in Ontario's HIV/AIDS strategy and is committed to improving the health and well being of people living with and at risk of HIV in Ontario. www.ohntn.on.ca

Centre for REACH in HIV/AIDS- "Universities without Walls" training initiative:

The mission of Universities Without Walls (UWW) is to develop a new generation of HIV researchers across Canada who are highly skilled in interdisciplinary HIV research. Funded by a Canadian Institutes of Health Research (CIHR) Strategic Initiative in Health Research grant, UWW is a national interdisciplinary program for learning, mentorship, training and research that connects academics, community members and policy makers. UWW is closely linked to, and serves as, the educational arm of the CIHR Centre for REACH in HIV/AIDS. The first group of UWW Fellows has started their program in January 2010. A call for applications for the second batch of Fellows is expected to go out in late 2010. www.centreforreach.ca

Ontario Institute for Studies in Education's Adult Education & Community Development Graduate Program:

OISE's Adult Education and Community Development program provides a place to study and contribute to theory, practice, and policy concerning adult learning in organizations, communities, workplaces, and social movements in local, national, and international contexts, and to do so in creative and innovative ways. One of the largest and oldest graduate programs in Adult Education, the program enjoys an international reputation for its critical and interdisciplinary approach to the field. www.oise.utoronto.ca/depts/aecp/ae

