

## EDUCATOR RESOURCE—STBBI STIGMA CASE STUDIES

Su and Krin are queer and have been seeing each other for a few months. They have a wonderful relationship and have started to become physically intimate. Su occasionally gets herpes and is not sure how and when to tell Krin.

1. When should Su tell Krin and why?
  - If Su wants to pursue sexual activity with Krin, it is important that she tell Krin about having herpes. This way, they can build on the trust and intimacy they have already established in their relationship and talk together about how to manage the infection while maintaining physical and sexual intimacy.
  - It is important that Su tells Krin as soon as possible to maintain trust in the relationship.
  - If they have skin-to-skin contact in the genital area, herpes can typically be passed to Krin.
  - Herpes can be passed when there are visible symptoms (i.e., blisters that can form during flare-ups) or when there are no visible symptoms (i.e., **asymptomatic viral shedding**).
  - Depending on the strain of herpes that Su has, it could also be transmitted through kissing or oral sex.
2. Why might Su feel nervous about telling Krin?
  - Even though herpes is a very common STBBI, there is still a lot of stigma surrounding herpes.
  - Su might be scared that Krin will reject her because she has herpes.
3. What could Krin and Su do to reduce the risk of transmission?
  - They can use dental dams during oral sex to reduce the likelihood of transmission but with herpes, skin-to-skin contact in the genital area (including areas that would not necessarily be covered by a dental dam) can transmit the virus.
  - Krin should be made aware so that the two of them can discuss how to engage in safer sex as a couple.
  - Su needs to educate Krin about herpes and how it is transmitted. They can discuss ways to lower the chance of passing the virus and still be intimate and they can plan to go to a local sexual health clinic to discuss safer sex if they still have questions or concerns.
  - Some things that they can do to lower the chance of passing the virus include: Su taking suppressive antiviral therapy, avoiding triggers for flare-ups, and avoiding sexual activity during flare-ups.

Kira and Nial identify as cisgender and straight. They have been using condoms most of the time since they started having sex. Nial suggested Kira go on the oral contraceptive pill so they could stop using condoms altogether. Nial has had a few sexual partners in the past but he doesn't want Kira to know. When she asks if he'll come with her to get tested, he gets upset and says she doesn't trust him.

1. Is it okay to ask a partner to get tested?
  - Yes, it is okay to ask a partner to get tested because there is always some risk of STBBI transmission, especially if you have unprotected sex with each other and/or with previous partners.
  - Asking a partner to get tested does not mean that you do not trust them. It means that you want to have all the information before deciding whether to have unprotected sex.
  - STBBIs are common and often asymptomatic. You may have an STBBI from a previous sexual partner and not know it. It is better to get tested because many STBBIs can be cured if detected early. Otherwise, you may pass it on and/or develop complications that could have been easily avoided.
2. If Nial refuses to get tested, what are Kira's options?
  - Kira can refuse to have sex with Nial until he gets tested.
  - Kira can decide to have sex on the condition that Nial agrees to use condoms every time.

Nina was sexually involved with someone who had HPV (genital warts). Nina wants to start having sex with Rav but worries that if she brings up her former partner's HPV, Rav won't want to have sex with her and will think she's "dirty" and/or "slutty."

1. What are Nina's options?
  - Nina can challenge STBBI stigma by talking to Rav about her previous partner having HPV. Nina could see this as an opportunity to get closer to Rav and build trust within the relationship.
  - Nina could ask her health care provider for a visual diagnosis of genital warts and a Pap test. Nina could also talk to her health care provider about how to approach the conversation with Rav.
  - Nina and Rav could talk about using condoms to reduce the chances of passing HPV but will not eliminate the risk entirely.

2. What is stopping Nina from talking with Rav?
  - The general stigma surrounding STBBIs and the confusion surrounding HPV specifically.
  - Slut shaming might happen a lot at Nina and Rav’s school and she might be worried she will become the target of it. She might be worried about Rav telling others that she’s had multiple partners and has an STBBI.
  - Nina might feel scared and overwhelmed about the possibility of having HPV because she assumes that in all cases HPV leads to cancer. This is not the case but the fear and confusion could be keeping her from talking to Rav.
3. What would you tell Nina to give her more confidence?
  - STBBIs are more common than people realize. Having an STBBI does not make you “dirty.”
  - STBBI stigma makes STBBIs seem scarier and more uncommon than they actually are. Many can be cured and those that cannot be cured can be effectively managed if detected and treated early.
  - HPV is the most common STBBI in the world and it is estimated that 75% of sexually active people will get HPV at some point in their lives (Canadian Cancer Society, 2017). In many cases, if you have a healthy immune system, your body clears the virus on its own (similar to the common cold) but it is important to get regular Pap tests (based on the most up-to-date screening guidelines) because HPV is so common and there are often no visible symptoms (except in the case of genital warts). Pap tests are the best way to prevent cervical or anal cancer caused by HPV.

Nan and Mel have sex together but they aren’t romantically involved. Nan also has sex with two other people. Nan uses protection with one of them.

1. What do Nan and Mel need to discuss?
  - They need to discuss their expectations of safer sex with each other and all their other partners. Depending on the kinds of unprotected sex they are having and with whom, they will need to talk about safer sex in terms of both STBBIs and pregnancy.
  - They need to discuss their expectations around testing and communicating results with each other and their other partners.
2. What might be stopping either of them from discussing?
  - Both Nan and Mel might be afraid of bringing up STBBIs because they do not want any of their partners to think that they have one.
  - They might not want to scare each other off (or any of their other partners).

- Nan might be afraid of having to give up unprotected sex with one of their partners.
  - STBBI stigma makes STBBIs challenging to discuss with partners but the only way to challenge the stigma is to talk about STBBIs, safer sex, and testing as an essential part of being sexually active.
3. What are some ways to get this conversation going?
- Nan can start the conversation with Mel by asking them what their expectations are regarding safer sex and STBBI testing.
  - Nan or Mel can start the conversation by asking the other person what their assumptions are of having multiple sexual partners and/or of polyamory more generally. This might be a gateway into talking about safer sex expectations.

Trev and Bek are in a long term relationship and are talking about whether they want to explore anal sex with each other. Trev's previous partner had syphilis but Trev never got tested or told Bek about it. This is the first time that Bek has been in a relationship with another cisgender guy. Trev feels really guilty bringing it up now since they've been sexually involved in other ways but Bek is also really worried about possible transmission during anal sex.

1. Why did Trev not talk to Bek about this previously?
- Trev might not have thought that syphilis could be passed through oral sex. In reality, there is a high risk of transmission through oral sex.
  - Trev might have been afraid that Bek would think Trev was "dirty" or less attractive because of STBBI stigma.
  - Because of homophobia, STBBI stigma might be exacerbated. Trev might not want to get tested for fear that he will be stigmatized and stereotyped for being gay and seeking STBBI/syphilis testing.
2. What are Trev's next steps moving forward?
- Trev's next step is to inform Bek, especially because they have already had unprotected oral sex.
  - Trev needs to get tested. Depending on the stage of the infection, syphilis may not have symptoms or people might miss the symptoms because the infectious sores are painless. If syphilis is detected early, it can be cured with antibiotics.
  - Bek might want to consider getting tested at the same time as Trev.
  - Moving forward, they could negotiate having sex with condoms and/or get regular STBBI testing.

Mila is a cisgender bisexual woman who went to the doctor to get a prescription for oral contraceptive pills. She's been having unprotected sex with a new-ish monogamous partner (who is a straight cisgender guy) and decided while at the doctor's to get tested for STBBIs. The test results came back and she was diagnosed with chlamydia. She got treated but didn't tell her new partner, even though the doctor told her that any sexual partners would need to be notified and treated. Mila and her partner don't use condoms. *Note: in the case of a reportable STBBI (like chlamydia) a local public health nurse will often work with you to identify sexual partners that might have been exposed and help them access testing and treatment options.*

1. What is likely to happen?

- Mila's partner might have chlamydia but might not know it; most people do not show symptoms.
- It is important that Mila's partner get tested. Because of partner notification, her doctor and/or a public health professional might continue to follow-up to be sure that Mila has notified her partner and that they have received testing and treatment (if necessary).
- If Mila's partner does have chlamydia and does not receive treatment, Mila could become reinfected.

2. Why do you think Mila did not want to tell her partner?

- Mila might be afraid of being accused of having sex with another person, which she did not (she got the infection in her previous relationship).
- There is a lot of stigma surrounding chlamydia and other STBBIs. Mila might have been afraid that her partner would be "grossed out," think she was "dirty," or be mad at her.
- Because Mila is a cisgender bisexual woman, she might have been afraid that her new partner (who is a straight cisgender guy) would slut shame her based on stereotypes of women and people who identify as bisexual.

Bryn and Mira have just started dating. They have no problem talking to each other about most things. They both identify as trans and have never been sexually involved with anyone else. Both of them are shy to talk about safer sex and wonder if it's even necessary since neither of them have been sexually active.

1. Do they need to talk about safer sex? Why?

- In any new partnership that involves sex, you need to communicate about wants, needs, assumptions, and expectations involving safer sex and STBBI testing. Even if neither partner has been sexually involved with anyone else before, it is an important habit to get into and skill to develop.
  - There is an assumption that only cisgender women get pregnant, when in reality trans and gender non-binary people can get pregnant too. This assumption means that there is a lack of information that is relevant to trans and non-binary people. This assumption and lack of information also means that Bryn and Mira could underestimate the risk of getting pregnant depending on the kinds of sexual activity they are exploring.
  - Talking about safer sex does not only mean talking about STBBI and pregnancy prevention; communicating about safer sex also means communicating about consent, boundaries, trust, and general expectations of being physically and sexually intimate.
  - Without talking about safer sex expectations, both partners might make assumptions. Assumptions that are unchallenged and not talked about might inadvertently hurt the other person by inadvertently breaking their trust.
2. When they have an easy time talking generally, why are both of them shy to talk to each other about safer sex?
- Sex, and sexuality more generally, are stigmatized topics. People are often not given the tools to approach the subject of safer sex because it is stigmatized and sometimes perceived as “uncool” or something you only talk about if you are inexperienced. Maybe Bryn and Mira are each afraid of being seen as inexperienced.
  - Transphobia could also exacerbate any fear that Bryn has about talking about safer sex with Mira. Bryn may worry that because they use names for body parts that reflect their particular experience of being trans, Mira might have different names for body parts. Bryn could be worried that Mira might think that they are “weird.”
  - Mira and Bryn might not want to bring up safer sex for fear of being perceived as “rocking the boat” early in their relationship. This is a common experience within relationships, regardless of gender identity and sexual orientation.

Dane went away for the summer with some buddies. They gave each other tattoos with homemade instruments they passed around. When he got back from his summer trip, Dane went to see his girlfriend Jes right away and showed her the tattoos. Jes liked the tattoos and was really happy to see him. Before he’d left, Dane and Jes had planned that

they would have sex (penis-vagina intercourse) for the first time as soon as he was back. Jes went on the pill but still wanted to use condoms. Dane got angry and said she was accusing him of having sex with someone else on his trip. Jes relented and had unprotected sex with him. Afterward, she felt really worried and mad at Dane and herself.

1. Was Dane putting Jes at risk for STBBIs?
  - There are specific STBBIs (like Hepatitis C, Hepatitis B, and HIV) that Dane may have gotten by sharing tattoo equipment.
  - Although Hepatitis C is difficult to transmit sexually, Jes would be at risk for Hepatitis B (if she was not vaccinated) and HIV.
  - If Dane has HIV, it would be a recent and untreated infection, which would be more likely to pass onto Jes because Dane would likely have a higher viral load.
2. Why did Jes “relent” and have unprotected sex?
  - Jes felt pressure to have unprotected sex with Dane. This behaviour from Dane is coercive and does not equal consent.
  - Jes was clear about her boundaries. Dane’s behaviour shows that he did not respect her boundaries.
  - Maybe part of the reason that Jes relented was that STBBI stigma made her feel embarrassed and ashamed to use condoms with Dane. This embarrassment and shame might have made her feel frozen and unable to talk to Dane about her concerns.
3. Is there anything that Jes can do now that they have already had unprotected sex?
  - Jes can get tested.
  - Jes can refuse to have sex with Dane unless he agrees to use a condom for the duration of sexual activity.
  - Jes can break up with Dane.
  - Jes might also want to see a counsellor to talk through her feelings resulting from Dane’s sexually coercive non-consensual behaviour.