How Well Do You Know Your Parents?

Directions: Grab a pen and try to answer these questions about your parent(s). At the same time, ask your dad or mom to answer the questions, “How Well Do You Know Your Son or Daughter?” When you are both finished, talk about your answers with each other. If you only have one parent at home or live with another relative or adult, just answer all questions as if they pertain to that adult.

1. Does your mom believe in love at first sight?
2. What presidential candidate did your dad vote for in 2008?
3. Would your dad rather watch TV with the family, sit alone and read or go out to dinner with friends?
4. Does your mom gas up the car as soon as the tank is half empty or when the fuel is nearly gone?
5. Does your dad usually carry a photo of you in his wallet?
6. How old was your mom on her first date?
7. If your dad turned on the TV and found these choices, which would he pick: a football game, soap opera, old movie – or turn off the set?
8. Which of these can’t your mom do: touch her toes, do a headstand, rewire a lamp, replace the spark plugs, sew a shirt?
9. What was your dad’s first full-time job?
10. If your mom could have you do anything for three hours, what would it be?
11. How many words per minute can your father type?
12. If your parents attended college, where did they go?
13. Did your mom or dad have a nickname in high school?
14. Does your mother know how to change oil in the car?
15. How did your dad ask your mom out on their 1st date?

Adapted from “How Well Do You Know Your Parents?” Advocates for Youth - www.advocatesforyouth.org
Teens Setting Goals: Why it’s important!

Many teens go through high-school with the attitude that what happens in high-school won’t have an impact on their future. However, these teens are in for a big surprise when “the future” arrives. As adults, we understand where our teenagers are coming from because we’ve been there before, but we also have the advantage of hindsight. We see how the things that we did and didn’t do in high-school have impacted our lives. Because we have this knowledge, it’s our responsibility to help our teenagers make smart decisions while they are in high-school.

You may not think that setting goals is that important until one is in college and working towards a career, but this isn’t true. Goal setting is an important aspect that will help our teens learn how to achieve anything they want to during their lives…not just a career. This is why setting goals is a skill that needs to be worked on long before the college years. We all know that the best way to become good at something is by practice – and setting goals is no exception.

The reason setting goals is so important for teens to do is because it helps them realize that they can achieve anything they want to if they are willing to work for it. These achievements can be anything from making the varsity basketball team, getting an “A” on a term paper, getting accepted to their college of choice, starting their dream career and so much more. Having goals will not only allow your teen to dream, but it will also give them the motivation they need to reach those dreams.

http://parentingmyteen.com

* On the back of this sheet is a goal setting sheet for your teen to help them map their dream.
<table>
<thead>
<tr>
<th>What I want</th>
<th>Why I want it</th>
<th>Why I can do it</th>
<th>My action plan</th>
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My reward: ____________________________________________

My next or revised goal: ____________________________________________

Revised from www.mygoalworksheets.com
You are daily faced with situations that require you make a decision. Some decisions are easy to make and don’t have long term consequences, such as what to wear, what to eat, or which movie to go to. Other decisions are more difficult, cause internal stress and can have long term consequences.

The following is a step-by-step guide that you can follow when practicing decision making skills.

- **STATE** – clearly identify the situation.

- **CREATE** – Brainstorm possible solutions. Sometime the best solution to a situation is not immediately obvious. Good friends and parents can be very helpful during this process; talking with someone else about an issue can give another perspective and insight into the situation.

- **FATE** – Look at the positive and negative consequences of a possible solution. Look at both the short-term and long-terms consequences of each suggestion.

- **RELATE** – Honor your personal values. Personal values are the core beliefs and guidelines that direct the choices people make. They are shaped by family, culture, education and experience, and are different for different people. When people go against their values, they are likely to feel conflict and disappointment within themselves and the results of their actions.

- **INITIATE**: choose and act on the decision.

- **EVALUATE**: Check the results. Reflecting on the results of a decision can be very helpful. When things work out well, it is good to identify the specific reasons the results were positive in order to draw from them in the future. It is helpful to remember that some decisions are trial and error – and that no one makes perfect decisions all of the time.
State
- Clearly identify the situation

Create
- Brainstorm possible solutions

Fate
- Option #1
  - Positive outcome
  - Negative outcome
- Option #2
  - Positive outcome
  - Negative outcome

Relate
- Honor your personal values - Circle the values you most often demonstrate.
  - HONEST * FAIRNESS * SELF-CONTROL * RESPONSIBILITY FOR SELF AND OTHERS * TRUSTWORTHINESS * JUSTICE
- What is one value you will not compromise? Explain why.

Initiate
- Choose and act on the decision. Which option did you choose? Why?

Evaluate
- What do you think the result may be?

Adapted from Healthy Choices, Healthy Relationships; Lesson 8 “Thinking it Through” by Charlene R Kamper; published by the Dibble Institute, 2009
VALUES AND BELIEFS

This activity is an opportunity for parents to share their values and beliefs with their son or daughter. Answer the questions related to your role as parent. At the same time ask your son or daughter to do the same. When you are both finished, sit down together and discuss the responses. Where you surprised at any of the answers?

About Living Together...

My father would say

My mother would say

I would say

About Pregnancy...

My mother would say

I would say

My father would say

About Birth Control...

I would say

My mother would say

My father would say
Minor Consent Law for Health Care
This is a brief summary of the Minor Consent Law for Health Care as it relates to sexual health. For a more complete explanation, please reference the Minnesotat statutes associated with this law.

Minors may not receive health care services without their parents’ or guardian’s consent, unless specified otherwise in a Minnesota statute. Some of the areas that are specified are as follows:

Specific Services – a minor may consent for health services (Minn Stat 144.343; sub 1)
- to determine the presence or treatment of pregnancy and conditions associated with pregnancy.
- For sexually transmitted infection

Abortion - Minors seeking an abortion must notify both parents of the intended abortion and wait 48 hours, or seek judicial approval for the procedure. A court may authorize an abortion under certain circumstances. (Minn. Stat. 144.343, sub 2)

Medical Records - Parents and guardians have access to their minor children’s medical records, unless the minor legally consents for service listed under Minn statutes 144.341 – 144.347. In that case, the parent/guardian does not have access to the minor’s health care records without the minor’s authorization. However, if a health professional believes that failure to inform the parent/guardian would seriously jeopardize the health of the minor, the health professional may inform the minor’s parents of the treatment. (Minn Stat. 144.346)

Dating an Older Person
Things to consider before dating someone more than 2 years older than you -

It’s Normal to be flattered if someone older notices you. They may be able to drive, have a nice car, have money to spend or have friends you would like to get to know; but there are also other things to consider as well.

You may find it harder to say “NO” to sex and other high risk behaviors. Older teens may have more experience in relationships and may use that experience as power in the relationship. You may feel pressured to do things you are not comfortable doing or go places you don’t feel safe.

You may lose your friends. You may be spending time with him and with his friends, and neglect your own friendships without meaning to. This could be something you regret later, but find difficult to correct.

What about the law? You can find a summary of the law in Minnesota on this page as it relates to sexual contact. Even if your parents and his parents know about your relationship and allow it, the law does not!

SEX WITH A MINOR CHARGES IN MINNESOTA

“You can be arrested and prosecuted in Minnesota for having sex with anyone under the age of 16, which is defined by state law as "Criminal Sexual Conduct." The penalties for statutory rape depend on two factors: the age of the alleged victim and how much older the defendant was than the victim at the time of the act in question. If the victim is younger than 13 years old and the actor was older than 16, the court may deliver a prison sentence of up to 30 years. If the actor is under 16, the sentence will be as much as 15 years. Individuals who are convicted of statutory rape when they are between 2 and 4 years older than a victim aged 13 to 16 will face up to 5 years in prison.”

“A guilty verdict for sex with a minor will also result in you being included in the Minnesota Predatory Offender Registration, an online database maintained by the Bureau of Criminal Apprehension. You will have to provide several photographs for the purpose of allowing neighbors and other members of the community to identify you, along with your home address and details of your sex crime conviction. You will have a criminal record, which may block you from gaining employment with certain companies, as well as appearing on any background check you are required to pass for housing or a loan.”

I have the right to:

- Ask for a date
- Refuse a date
- Suggest activities
- Refuse any activities even if my date is excited about them
- Have and express my own feelings
- Say, “I think my friend is wrong and his/her actions are inappropriate”
- Speak without interruption
- Have my limits and values respected
- Tell my partner when I need affection
- Refuse affection
- Be heard
- Refuse to lend money
- Refuse sex any time, for any reason
- Have friends and space aside from my partner

I have the responsibility to:

- Determine my own limits and values
- Respect the limits and values of others
- Communicate clearly and honestly
- Not violate the limits of others
- Ask for help when I need it
- Be considerate at all times
- Evaluate whether my actions and decisions are good or bad for me
- Set high goals for myself.

From: Healthy choices; healthy relationships by Charlene Kamper; Dibble Institute

Peers have a strong influence on a young person’s life including what activities they engage in and how they feel about their own self-worth. This can be either good or bad. Positive relationships can motivate, encourage and empathize; they look out for each other’s well-being and lift each other up. Peers can also draw a young person into behaviors they would not have otherwise done on his or her own. This can be of great concern and have lasting consequences.

For a dating relationship to remain healthy there must be balance within the relationship – open communication with problem solving for mutual benefit, respect and valuing each other’s opinions, support of each other’s goals in life, accepting responsibility for self, and respecting personal identity, encouraging individual growth and independence in one’s partner. Adapted from “the Equality Wheel” Healthy Relationships, Healthy Choices curriculum.

TEEN DATING ABUSE WHEEL

It is abuse when one person in a relationship repeatedly scares, hurts or puts down the other person. The Power and Control Wheel lists examples of each form of abuse.
Depression and anxiety are very common, affecting millions of Americans. Yeah, we all have a bad day or worry about school occasionally. Depression and anxiety are different because they affect people on a more regular basis. The good news is they are treatable and most people with depression and anxiety live very full lives!

**What are symptoms of depression?**
- feeling down
- irritability, anger, restless or loss of concentration
- loss of interest in things previously enjoyed
- feelings of guilt or worthlessness or hopelessness
- change in eating or sleeping habits
- lack of motivation or energy
- thoughts of death or suicide

**What are symptoms of anxiety?**
- excessive worry
- problems sleeping
- fatigue
- muscle tension
- difficulty concentrating
- restlessness
- shortness of breath or rapid heart rate

**What to do if you are concerned you or someone you know may have depression or anxiety?**
- talk to your parents, teachers, school counselors, or doctor.
- National Suicide Prevention Hotline: 1-800-273-TALK

For more information on depression:
- [http://helpguide.org/topics/depression.htm](http://helpguide.org/topics/depression.htm)

For more information on anxiety:
- [http://helpguide.org/topics/anxiety.htm](http://helpguide.org/topics/anxiety.htm)
There are many different types of sexually transmitted infections (STIs). Some have symptoms (genital itching, discharge, pain, etc.), but many times infections do not have any symptoms. Even though they don't cause symptoms, they can cause damage to reproductive organs. So, it is important to get tested for STIs with each new sexual partner or at least once a year if you are with the same partner. STIs like Chlamydia and gonorrhea are easy to treat with antibiotics.

STIs can be transmitted through any sexual contact, including oral sex. Using condoms, even with oral sex, reduces transmission.

Quick Facts:
- Chlamydia and gonorrhea are the most common STIs. And they are treatable! But if not detected early, they can cause permanent damage to reproductive organs.
- Viral infections like herpes, HPV, HIV/AIDS, hepatitis cannot be cured, but can be managed with medications or procedures.
- There is a vaccine available to both boys and girls that can prevent HPV infections, which can cause genital warts and cervical cancer.
- Talk to your partner about STIs before having sex.
- The only 100% effective way to prevent STIs transmission is complete abstinence from sexual activity.
- Condoms reduce risk of transmission.
- Other contraception options (the pill, shots, etc.) DO NOT prevent STIs.
- If you are concerned you may have an STI talk to your doctor – testing is easy

- For more information on STIs talk to your parents or doctor.

- Check out for information on specific STIs symptoms, treatment, and prevention:
  http://www.stayteen.org/
  http://www.cdc.gov/std/
Chlamydia is not a flower
...but it is the most frequently reported infectious disease in Minnesota, with nearly 17,000 cases reported in 2011, most of them in females under age 25.

Sexual health is not just about preventing disease or having babies — it is also about who we are, where we fit, how our families thrive, what kind of relationships we value. Experiencing sexual development in today’s rapidly changing and media driven environment can be liberating, confusing and stressful for young people.

While the community at large must provide the resources and supports that young people need to be sexually healthy, young people themselves are responsible, active players in any effort to improve the sexual health of themselves and their peers, including reducing sexually transmitted infections.

Although chlamydia is easily treatable, 75% of females and 50% of males are unaware of their infections because they have no symptoms and therefore do not seek care. This results in many people not seeking treatment, allowing the disease to be spread to others. In 40% of infected females, chlamydia can progress to serious and sometimes life-threatening consequences. Untreated chlamydia infections can have dramatic consequences:

- infertility
- chronic pelvic pain
- ectopic pregnancy

Young people lead the way.

YOUR ROLE

Stay informed; use good sources.
It’s easy to find information about your sexual health online — but is it good information? Be sure by checking out who is paying for the website you are reading. Government run sites are generally safe and there are a number of local and national organizations that are geared specifically for you.

Taken from “A SPECIAL REPORT: CHLAMYDIA PREVENTION – What can Minnesotans do to support the sexual health of young people?” Minnesota Chlamydia Partnership 2012. http://www.mnchlamydiapartnership.org/
Be sexually healthy.
Figure out what it means to be sexually healthy for yourself — consider the many roles you play: student, family and community member, brother, sister, romantic partner.

Get screened every year.
Being sexually healthy means taking charge of your health. It’s everyone’s responsibility to know how to be sexually healthy and stay that way. Yearly screening for Chlamydia is recommended for all sexually active young women ages 15 – 25 and their sexual partners. Check out the local clinics that provide sexual health services. If you are an athlete, considering asking for a screening at your sports physicals.

Leadership and voice.
Your impact on our community is clear — records show that the youth vote was instrumental in the last presidential election. Extend your activism into sexual health by speaking up on the issues: good sex education at school; more adolescent-friendly clinics that are easily accessible to you and which offer testing and treatment for free; decision-making power on policies that affect you.
Contraception

All right teens, I know there are a lot of myths about contraception and sometimes it can seem like a challenge to get accurate information. There are a few important things to know about contraception:

- Contraception is a way to prevent pregnancy.
- The only 100% effective form of contraception is abstinence from vaginal intercourse.
- Unless you and your partner are ready to be parents, use contraception EVERY time you have vaginal intercourse! No exceptions.
- Contraception is the girl's responsibility only. WRONG – it is the responsibility of both people involved. It is best to talk about it with your partner before intercourse. Guys, you can contribute by wearing condoms and respecting your partner's boundaries.
- One can't get pregnant if: the guy drinks mountain dew, if the girl urinates right away, or the girl has her period, etc. Nope – contraception myths like these are common and inaccurate.

So what contraception options are available?

- There are many contraception options and if used correctly they are quite effective. Yes, there are birth control pills, which are taken at the same time every day. However, there are also hormonal patches, vaginal rings (Nuva ring), and shots (Depo). The shots are convenient because you only need to get them every 3 months. Talk to your doctor for more information.
- Condoms if used correctly reduce chance of pregnancy and sexually transmitted diseases.
- If possible, use two forms of contraception (condoms + “the pill,” for example).
- The withdrawal method (pulling the penis out of the vagina before ejaculation) is not very effective because there is sperm in the pre-ejaculate fluid.
- If you did not plan ahead or if contraception fails, there is emergency contraception. Patient's under age 16 need a doctor's prescription. For patient's 17 and older, you need to show an ID at the pharmacy. It is meant as a back-up, not a primary form of contraception.

Key points:

- Make decisions that are consistent with your value system.
- If you are sexually active, there are many contraception options.
- Talk to your parents or doctor.

Check out these websites for more information:

- http://stayteen.org
# Birth Control Guide

<table>
<thead>
<tr>
<th>Methods</th>
<th>Number of pregnancies expected per 100 women</th>
<th>How to use</th>
<th>Some Risks</th>
</tr>
</thead>
</table>
| Sterilization Surgery for Women | 1 | One-time procedure; nothing to do or remember | • Pain  
• Bleeding  
• Infection or other complications after surgery  
• Ectopic (tubal) pregnancy |
| Surgical Sterilization Implant for Women | 1 | One-time procedure; nothing to do or remember | • Mild to moderate pain after insertion  
• Ectopic (tubal) pregnancy |
| Sterilization Surgery for Man | 1 | One-time procedure; nothing to do or remember | • Pain  
• Bleeding  
• Infection |
| Implantable Rod | 1 | One-time procedure; nothing to do or remember | • Acne  
• Weight gain  
• Cysts of the ovaries  
• Mood changes  
• Depression  
• Hair loss  
• Headache  
• Upset stomach  
• Dizziness  
• Some breasts |
| IUD | 1 | One-time procedure; nothing to do or remember | • Cramps  
• Bleeding  
• Pelvic inflammatory disease  
• Infertility  
• Tear or hole in the uterus  
• Lower interest in sexual activity  
• Changes in your periods |
| Shot/Injection | 1 | Need a shot every 3 months | • Bone loss  
• Bleeding between periods  
• Weight gain  
• Breast tenderness  
• Headaches  
• High blood pressure  
• Blood clots  
• Heart attack  
• Strokes |
| Oral Contraceptives (Combined Pill) “The Pill” | 5 | Must swallow a pill every day | • Dizziness  
• Nausea  
• Changes in your cycle (period)  
• Changes in mood  
• Weight gain  
• Similarly to other oral contraceptives  
• Bleeding  
• Spotting between periods |
| Oral Contraceptives (Progestin-only) “The Pill” | 5 | Must swallow a pill every day | • Irregular bleeding  
• Weight gain  
• Breast tenderness  
• Vaginal discharge  
• Swelling of the vagina  
• Irritation  
• Similar to other oral contraceptives  
• Vaginal irritation  
• Similar to other oral contraceptives |
| Oral Contraceptives Extended/Continuous Use “The Pill” | 5 | Must swallow a pill every day | • Risks are similar to other oral contraceptives  
• Bleeding  
• Spotting between periods  
• Hirsutism  
• High blood pressure |
| Patch | 5 | Must wear a patch every day | • Exposure to higher average levels of estrogen than most oral contraceptives  
• Vaginal irritation  
• Similar to other oral contraceptives  
• Nausea  
• Vomiting  
• Diarrhea  
• Headache |
| Vaginal Contraceptive Ring | 5 | Must leave ring in every day for 3 weeks | • Vaginal discharge  
• Swelling of the vagina  
• Irritation  
• Similar to other oral contraceptives  
• Vaginal irritation  
• Similar to other oral contraceptives |
| Male Condom | 11-16 | Must use every time you have sex; requires partner’s cooperation Except for abstinence, latex condoms are the best protection against HIV/AIDS and other STIs | • Allergic reactions  
• Irritation  
• Allergic reactions  
• Abdominal pain  
• Fatigue  
• Headache |
| Diaphragm with Spermicide | 15 | Must use every time you have sex | • Irritation  
• Allergic reactions  
• Urinary tract infection  
• Toxic shock  
• Vaginal irritation  
• Similar to other oral contraceptives  
• Nausea  
• Vomiting  
• Diarrhea  
• Headache |
| Sponge with Spermicide | 16-32 | Must use every time you have sex | • Irritation  
• Allergic reactions  
• Hard time removing  
• Toxic shock  
• Vaginal irritation  
• Similar to other oral contraceptives  
• Nausea  
• Vomiting  
• Abdominal pain  
• Fatigue  
• Headache |
| Cervical Cap with Spermicide | 17-23 | Must use every time you have sex | • Irritation  
• Allergic reactions  
• Abnormal Pap test  
• Toxic shock  
• Vaginal irritation  
• Similar to other oral contraceptives  
• Nausea  
• Vomiting  
• Abdominal pain  
• Fatigue  
• Headache |
| Female Condom | 20 | Must use every time you have sex May give some protection against STIs | • Irritation  
• Allergic reactions  
• Abdominal pain  
• Fatigue  
• Headache  
• Vaginal irritation  
• Similar to other oral contraceptives  
• Nausea  
• Vomiting  
• Abdominal pain  
• Fatigue  
• Headache |
| Spermicide | 30 | Must use every time you have sex | • Irritation  
• Allergic reactions  
• Urinary tract infection  
• Vaginal irritation  
• Similar to other oral contraceptives  
• Nausea  
• Vomiting  
• Abdominal pain  
• Fatigue  
• Headache |

**Emergency Contraception — If your primary method of birth control fails**

| Emergency Contraceptives “The Morning After Pill” | 15 | Must use within 72 hours of unprotected sex It should not be used as a regular form of birth control | • Nausea  
• Vomiting  
• Abdominal pain  
• Fatigue  
• Headache  
• Vaginal irritation  
• Similar to other oral contraceptives  
• Nausea  
• Vomiting  
• Abdominal pain  
• Fatigue  
• Headache |

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*FDA Office of Women's Health [http://www.fda.gov/womens](http://www.fda.gov/womens)*  
*2007*
Make behavioral expectations clear to teens.
Have frequent discussions about the responsibilities and privileges associated with the use of technology.

Be familiar with technology kids are using.
Email, texting, IMing, chatting, gaming, social networking, web and cell phone cameras.

Become familiar with texting acronyms.
CTN=Can’t Talk Now, TDTM=Talk Dirty To Me, WYRN=What’s Your Real Name?, pron=porn, 420=marijuana, 8=oral sex, zerg=to gang up on someone.
For more translations, visit teenluresprevention.com/parents

Use teachable moments.
Local and national news stories about Internet and electronic crimes provide opportunities to discuss these issues. Google “sexting news” for related articles.

Supervise teens online and electronically.
Let them know you are monitoring them because you love them and care about their future. Don’t rely entirely on parental control software; your teens can quickly bypass these!

Google Search your child’s name in quotations.
You may be surprised what you find.

If you think your youngsters is Sexting...
Monitor their cell phone use. Check cell phone Messages (Sent & Inbox), Recent Calls (Received) and Media Center (Pictures & Videos and Downloads).

Pics don’t stay private.
Once sent, they can’t be retrieved, they can be forwarded to many other people and they can’t be erased.

Think before Forwarding.
If a teen forwards a nude pic of a minor, he/she becomes the original sender of child pornography, which is against the law – even if they’re a minor.

Images and blogs have future consequences.
They are available for the entire world to see and share. This includes school officials, law enforcement, college admissions departments and future employers.

www.teenluresprevention.com
The Impact of Pornography on Children and Young Adults

The impact of pornography on our young people and on society is a sobering subject. Dr. Bryant states, “The proliferation of pornographic materials and their ease of access are such that it is not a matter of whether a young person will be exposed to pornography but when. Exposure may be inadvertent or intentional.” She goes on to say, “Concern exists that young people are being inundated with sexual information before they are developmentally capable of integrating it into a healthy sexual identity, with ramifications for both individual and society.” Adolescence, Pornography and Harm.” Dr. Colleen Bryant; Trends and Issues in Crime and Criminal Justice; No 368; February 2009.

Cordelia Anderson from Sensibilities Prevention Services in Minneapolis says “Promoting healthy sexuality is challenging in a sexually toxic and pornified environment. The pornography industry has successfully sold the idea that porn is sex, and to be sexy is to be pornified, when the reality is pornography is robbing children, youth and adults of healthy sexuality. Pornography has become our main sex education while comprehensive sex education is censored.” http://cordeliaanderson.com/PromotingSexualHealth

As a parent, it is important to talk with your children about this issue. It is critical for young people to not underestimate the potential effects of media on themselves and in how they relate to others. While inadvertent exposure, by definition, is not a choice, the response to it is.

Media messages promoting unhealthy sexual attitudes and behaviors are serious. Images/lyrics that promote males viewing females simply in terms of sexual potential and not as entire beings worthy of mutual respect and regard are not healthy messages. Face the challenge. Talk to your teen about health.

Wolves Within

An old Grandfather whose grandson came to him full of anger at a schoolmate who’d done him an injustice said, “Let me tell you a story.”

“I too, at times, have felt a great hate for those that have taken so much with no sorrow for what they do. But hate wears you down, and does not hurt your enemy. It is like taking poison and wishing your enemy would die.”

“I have struggled with these feelings many times. It is as if there are two wolves inside me; one is good and does no harm. He lives in harmony with all around him and does not take offense when no offense is intended. He will fight only when it is right to do so and then only in the right way.”

“But the other wolf, ah! He is full of anger. The littlest thing will set him into a fit of temper. He fights with everyone, all the time, for no reason. He cannot think because his anger and hate are so great. It is hard to live with these two wolves inside me, for both of them try to dominate my spirit.”

The boy looked intently into his Grandfather’s eyes and asked, “Which wolf wins, Grandfather?”

Drug abuse and addiction have been closely linked with HIV/AIDS since the beginning of the epidemic. Although injection drug use is well known in this regard, the role that non-injection drug abuse plays more generally in the spread of HIV is less recognized.

Injection drug use. People typically associate drug abuse and HIV/AIDS with injection drug use and needle sharing. Injection drug use refers to when a drug is injected into a tissue or vein with a needle. When injection drug users share “equipment”—such as needles, syringes, and other drug injection paraphernalia—HIV can be transmitted between users. Other infections—such as hepatitis C—can also be spread this way. Hepatitis C can cause liver disease and permanent liver damage.

Biological effects of drugs. Drug abuse and addiction can worsen the progression of HIV and its consequences, especially in the brain. For example, research has shown that HIV causes more harm to nerve cells in the brain and greater cognitive damage among people who abuse methamphetamine than among people with HIV who do not abuse drugs. In animal studies, methamphetamine has been shown to increase the amount of HIV in brain cells.

Drug abuse treatment. Since the late 1980s, researchers have found that if you treat drug abuse you can prevent the spread of HIV. When people who have a drug problem enter treatment, they stop or reduce their drug use and related risk behaviors, including drug injection and unsafe sexual practices. Drug treatment programs also serve an important role in getting out good information on HIV/AIDS and related diseases, providing counseling and testing services, and offering referrals for medical and social services. [3]
How does long-term drug taking affect brain circuits?

We know that the same sort of mechanisms involved in the development of tolerance can eventually lead to profound changes in neurons and brain circuits, with the potential to severely compromise the long-term health of the brain. For example, glutamate is another neurotransmitter that influences the reward circuit and the ability to learn. When the optimal concentration of glutamate is altered by drug abuse, the brain attempts to compensate for this change, which can cause impairment in cognitive function. Similarly, long-term drug abuse can trigger adaptations in habit or nonconscious memory systems. Conditioning is one example of this type of learning, whereby environmental cues become associated with the drug experience and can trigger uncontrollable cravings if the individual is later exposed to these cues, even without the drug itself being available. This learned "reflex" is extremely robust and can emerge even after many years of abstinence.

What other brain changes occur with abuse?

Chronic exposure to drugs of abuse disrupts the way critical brain structures interact to control behavior - behavior specifically related to drug abuse. Just as continued abuse may lead to tolerance or the need for higher drug dosages to produce an effect, it may also lead to addiction, which can drive an abuser to seek out and take drugs compulsively. Drug addiction erodes a person's self-control and ability to make sound decisions, while sending intense impulses to take drugs.

What happens to your brain if you keep taking drugs?

Just as we turn down the volume on a radio that is too loud, the brain adjusts to the overwhelming surges in dopamine (and other neurotransmitters) by producing less dopamine or by reducing the number of receptors that can receive and transmit signals. As a result, dopamine's impact on the reward circuit of a drug abuser's brain can become abnormally low, and the ability to experience any pleasure is reduced. This is why the abuser eventually feels flat, lifeless, and depressed, and is unable to enjoy things that previously brought them pleasure. Now, they need to take drugs just to bring their dopamine function back up to normal. And, they must take larger amounts of the drug than they first did to create the dopamine high - an effect known as tolerance.
Talking About Sexuality and Values

**Teens:** Complete this form by writing in the appropriate column the age at which you would feel comfortable engaging in the behavior. Ask your parents to fill in the parent column, and discuss the responses.

<table>
<thead>
<tr>
<th>When is it okay to . . .</th>
<th>Teen</th>
<th>Parent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hold Hands</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kiss on the lips</td>
<td></td>
<td></td>
</tr>
<tr>
<td>French kiss</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Participate in petting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Go out in a group of friends</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Undress in front a boyfriend/girlfriend</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have sexual intercourse</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Live with someone without being in a committed relationship</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enter a committed relationship with someone</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Notes to Teens and Parents**
As you do this exercise and discuss your responses, please listen to each other. Ask the other person to talk about why he/she feels that an age is appropriate or acceptable for the particular behavior. Remember that these are individual values, so, you can be open to different views and avoid being critical or judgmental.

**Teens:** It is important to listen to your parents and consider their opinions carefully, even as you express your own values. Their experiences and wisdom may help you to make difficult decisions; but in the end, the decisions are yours to make.

**Parents:** It is important that you share your values. However, remember that as your teen moves into young adulthood, he/she will make private decisions about sexuality. You will have no control over those decisions.

Compiled by Barbara Huberman, RN, MEd, Director of Education and Outreach  October 2002 © Advocates for Youth