

Season 2 Episode 8: Teen Sexual Health  
*[intro music Sun Through Shade]*

**HANNAH:** Imagine you are a high school student in your very first relationship. You are considering being intimate with your partner, but you have no idea where to begin. You've read a lot of different things about sex online, and heard things from your peers, but you aren't sure if that information is right.

**ABBY:** While your school offers sexuality education, it was part of the health class curriculum this year and only lasted a few days. A lot of the information didn't feel like it applied to your situation, and you still have so many questions about being safe and making sure you are ready to have sex. You wish there was somewhere you could go or someone you could trust to help you.

**HANNAH:** Sexuality and sexual health are central parts of human life. As young people grow up, they need to learn how to be safe, healthy, and secure in sexual situations and to understand, respect, and celebrate their own sexuality and the sexuality of others. This sets them up for healthy adult lives.

**HANNAH:** Before we get started, though, here's a quick quiz. In the U.S., how many states currently require young people to obtain parent or guardian consent in order to receive an abortion? We will reveal the answers to this question at the end of the next episode on sexual assault and misconduct on college campuses.

**ABBY:** In this episode, we wanted to learn more about sexuality education programming and sexual health services for young people. We spoke with Ellen Saliaries, the Director of Sexuality Education at Annex Teen Clinic, to learn more about this important public health topic. We hope you enjoy our interview with this amazing sexuality education professional.

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Abby: Okay. Our first question for you is just, um, can you tell listeners, your name, your position and a little bit about the work that your organization does

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Ellen Saliaries: Yeah, my name is Ellen Saliaries, I'm the Director of Sexuality Education at the Annex Teen Clinic my pronouns are she and her

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Ellen: The Annex Teen Clinic is a nonprofit clinic located in Robbinsdale, Minnesota, which is just outside Minneapolis. And our mission is helping young people take charge of their sexual health.

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Ellen: We do that through low cost or no cost sexual health services and sexuality education for young people. We also do training for youth, serving professionals and workshops with parents and caregivers.

Hannah: Yeah, how did you become interested in your current work.

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Ellen: Yeah, you know, I know, it's, there's got to be other people that this is their experience, but it seems like there's two ways people kind of get into working in sex ed.

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Ellen: They're either the person who was the expert for all of their peers, you know, in middle school and high school.

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Ellen: Or they were people who did not have great experiences with sex ed. I am more in the latter group, um, I-you know, in high school and into college, I became really engaged with feminism and thinking about

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Ellen: The inequalities and disparities and ways that people are oppressed based on their gender. And as I kind of continue to move through my undergrad program.

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Ellen: As a sociology major I became interested in health and sociology and at the time my undergrad program. I went to Grinnell College.

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Ellen: And Iowa was starting a student led sexual health group. So I joined that group. Um, it was a lot of handing out condoms and organizing study breaks and talking to people and they dropped by the office.

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Ellen: And so I became really engaged with that because of the power and recognizing

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Ellen: Yeah, because there. It's really powerful. The impact of just a little bit of education. Sexuality is deeply personal,

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Ellen: you know, it's often very stigmatized and that has a huge impact on people's lives on their relationships,

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Ellen: you know, their ability to live the life that they want to be healthy, all of those things. And so it became interested in it for really that reason. And I think being a pretty relationship-oriented person.

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Ellen: My experience has been sex ed is very relationship oriented like really trying to connect with people and support them,

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Ellen: and recognize that everyone has different needs and working hard to make sure that we're meeting people where they're at. I'm during my

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Ellen: MPH program at the U (University of Minnesota), I volunteered at Family Tree Clinic, which is in St. Paul, which is a really great experience.

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Ellen: And really worked on connecting with people in the field, my mentor through the School of Public Health was a grant manager for a big family planning grant through the state.

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Ellen: And so I was really excited when I graduated to get the opportunity to work at the Annex.

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Ellen: And I've really grown in my understanding of, like, working with young people and youth development, which has been really great.

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Ellen: I also have continued to work with Dr. Brady from the School of Public Health. Yeah, you're like kept familiar, um,

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Ellen: So I did my culminating experience with her and then I've continued to publish that work. So we publish one half, which is on young people's thoughts about sexual pleasure. And then the other one was young people's thoughts about like anxiety related to having sex. So, yeah.

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Abby: Could you describe reproductive justice as though you're describing it to someone who knows nothing about it.

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Ellen: Mm hmm. Yeah. So the way that I think about a reproductive justice and like the definition I use for it comes from

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Ellen: An organization called Sister Song which was really foundational in the reproductive justice movement and they still are tremendously important.

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Ellen: And so I think prior to giving the definition. I think it's important to say how

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Ellen: reproductive justice as a movement was really started by women of color who were frustrated by the fact that the current work being done around reproductive rights and reproductive health was really white-centric and didn't acknowledge the ways that

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Ellen: people of color were impacted by oppression related to their race, ethnicity, so that being said, the definition for reproductive justice is

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Ellen: The human right to maintain personal bodily autonomy have children, not have children, and raise those children in safe and sustainable communities. So,

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Ellen: It's broader and then what people often think about it. I think a lot of people think of reproductive justice and think it's really focused solely on

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Ellen: abortion access or access to contraception - which is definitely super important and part of reproductive justice - but it's also thinking about how

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Ellen: we can have all the types of contraception in the world, but if people can access it because they don't have transportation or they can't afford it, then you know we're really not having the impact that we're intending for it to have.

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Hannah: And how would you, how would you describe, like the relationship between sex ed and reproductive justice. I think a lot of times those can get confused as the same thing.

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Ellen: Mm hmm. I think sex ed

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Ellen: that is fact based inclusive trauma informed and accessible is really important in forming the foundation of work for reproductive justice, and I think it's a really important part of it.

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Ellen: When young people, when all people have access to the information they need to understand themselves, to understand their experiences, their relationships.

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Ellen: Their values and how they came to those values, they're more likely to be able to make choices that are best for them.

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Ellen: And I think understanding that it's important that they can advocate for themselves and healthcare settings is really important.

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Ellen: There's probably a lot of people who don't think that they

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Ellen: Like feel, have any connection to reproductive justice, like, oh, that's just for, you know, the people that are really

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Ellen: You know, working on increasing access to abortion. Right. It's just those people, it's the people that are really passionate about that. But I think when people are able to really understand it. They can recognize that it's important for everybody.

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Ellen: And so I was glad to hear that you all were doing this.

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Ellen: And I think the more that people are able to think about their values and think about what's important to them.

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Ellen: The more they're able to recognize the intersection between different parts of their lives and how that impacts their sexual selves their reproductive selves - right? - the more they understand how

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Ellen: a pregnancy happens, the more they can understand the impact that relationships have or climate change, right, or the ability to have safe, sustainable housing in all of those things.

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Ellen: And people believe that it's important, right, that it's worth fighting for. And it's worth being able to speak up about it.

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Hannah: Yes. Next question. Like really ties in you've touched on it already about like, why do you think reproductive justice is something we need to be concerned about what are the potential negative consequences of ignoring this issue.

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Yeah.

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Ellen: I think

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Ellen: Sexuality is part of every aspect of our lives and so

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Ellen: People definitely do ignore, ignore their sexuality, but you know by ignoring it, we're really denying people the ability to be in control of themselves and their lives.

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Ellen: By not engaging in work or discussion around reproductive justice. I think we are complicit in continuing the oppression that is already existing and dramatically impacting people's lives.

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Ellen: And we know that people like their health can be dramatically impacted and people die. People die because they don't have access to what they need, or, you know, we look at, you know, the horrible disparities around maternal mortality, particularly for black people.

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Ellen: And people are dying because we're not engaging in the fact that, you know, our systems are not set up to serve everyone the same way. And people are making

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Ellen: Assumptions about what people need or people's health and choices that have tragic impacts on people's lives and their families lives.

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Abby: Before we move on to the next question. I have a little bit of a follow up question from something that you mentioned earlier.

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Abby: I noticed that you use the term trauma-informed.

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Abby: As it relates to sex education. So I'm wondering if you could share a little bit about just what trauma-informed care looks like in general, and then how it relates to sex ed.

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Yeah.

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Ellen: It relates to understanding that people have experienced a variety of trauma in their life, and that has an impact on them and our role as sexuality educators

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Ellen: Is to know that we can never know the experiences of the people in a group that we're working with, or a classroom.

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Ellen: But our job is to, like, help people get the information and support that they need. And in order to do that we need to operate from the position.

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Ellen: that there are people in our space that have experienced trauma and there are things that we can do to try and minimize

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Ellen: the ways that that trauma is activated or experienced in our work. I think, you know, clear examples relate to talking about sex itself or about sexual activity.

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Ellen: Um, if educators are only talking about sex happening in the context of people choosing to have sex, for example, like

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Ellen: When you choose to have sex. Use a condom. You know, people decide to have sex, and this is how they know they're ready. We're ignoring the fact that for a lot of people

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Ellen: They have experiences where they're not able to choose to have sex and not acknowledging that does harm to people and it can keep people from

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Ellen: Feeling like those experiences are validated and that they deserve to have the support and resources that they need. So that is one aspect of it.

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Ellen: Other aspects include like being transparent in our work explaining you know why we're talking about. We're talking about what the plan is for that day.

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Ellen: Having opportunities for shared like leadership and discussion where young people can like ask questions and make decisions can also help as part of trauma-informed education.

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Abby: So our next question, is can you share a specific example of how advancing reproductive justice improves the health and well being of the young people in the communities that you serve.

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Yeah.

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Ellen: So I talked a little about how sex ed is foundational in my mind for reproductive justice. Um, another thing.

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Ellen: Another example I can provide is we have a few youth leadership councils, where the young people are deciding what they want to advocate for and they're doing peer education. They're doing different projects within their school

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Ellen: And we've had some groups who participated in program review. For example, we do a lot of work with Hennepin County is teen pregnancy prevention initiative Better Together Hennepin and

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Ellen: We do a big program review at the end of the year where we go through and say, how can we make

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Ellen: This whole project more inclusive happened with this project more trauma-informed and young people from those youth leadership councils, whether they're

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Ellen: sharing their experiences talking about what they needed and that is advancing reproductive justice having people who are receiving the services or the information or need

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Ellen: You know, they need to be involved in what's happening to them. It only is improving, what we're doing and supporting their health and well being.

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Ellen: Another youth leadership council, a couple of years ago.

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Ellen: With support from staff at the annex went to their district's health curriculum review committee to advocate for starting sex ed earlier in their district.

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Ellen: At the time it was starting really the eighth grade.

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Ellen: And they based on their experience and from talking to their peers really knew that it needs to start earlier.

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Ellen: Needed to start even in elementary school. So going and being able to talk and advocate for themselves with district leadership had a huge impact.

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Ellen: Where we worked with elementary school teachers to start teaching some sex ed and that is a huge impact. I mean,

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Ellen: There are young people who are, you know, starting in puberty in fifth and fourth grade right and to have information about

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Ellen: Your anatomy is hugely important to understand what's going on when it's something that's really scary. And often people are uncomfortable talking about it.

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Ellen: Um, I think it's also super important for understanding things related to gender and sexual orientation, which has a huge impact on people's health and well being.

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Ellen: And relationships and consent, all of that is super important. I think when

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Ellen: I as a sexuality educator, we as an organization, are at our best and working and reproductive justice is when we are supporting the people

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Ellen: who are directly impacted in, you know, advocating for themselves developing programs like offering solutions and then doing everything we can to help ensure that those things happen.

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Hannah: Thank you. Yeah, that's, I think that's a really comprehensive perspective on how engaging

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Hannah: So our next question kind of talks a little more about underserved populations in regards to reproductive health. Can you tell us a little bit of the history about why some groups might be more like considered underserved in reproductive health.

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Ellen: I think if you look at any

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Ellen: Group of people with a shared identity or experience, that is, you know, experiencing structural

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Ellen: oppression of any kind. That also happens in their reproductive health care and sexual health care experiences. Um, I mentioned earlier

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Ellen: maternal mortality disparities. So, people of color historically have been very underserved and harmed by the healthcare system and reproductive healthcare. Other groups would include folks who are queer LGBTQ

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Ellen: folks with disabilities, young people.

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Ellen: Folks are deaf, deaf, blind, hard of hearing folks who are maybe learning English or English is not their first language, people who are incarcerated.

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Ellen: A lot of people. Um, and I think at the root of all of that.

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Ellen: Is

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Ellen: People's like inability to

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Ellen: recognize their own assumptions and biases and their own mindset around difference. And then how they're enacting that so

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Ellen: You know, reproductive

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Ellen: Health care professionals dismissing the concerns of black women around their health when they're pregnant right that is coming from, you know, their biases and assumptions, some of which you know might come from their training, but

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Ellen: Is having a huge impact. When we look at folks who identify as LGBTQ. There's assumptions about you know what they're at risk for in terms of sexually transmitted infections or

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Ellen: That they would want to have children or not. Right. And then people not having the education or training to support people

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Ellen: I think there's providers who don't necessarily feel well equipped to talk with a queer couple about how they can start a family, um, you know, and our system is just not super well equipped to

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Ellen: Work with folks who maybe have disabilities are folks who need materials and education in another language.

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Abby: Our next question is related. Um, how are those who are historically underserved are those populations being better addressed now or are there still gaps and health equity in this area.

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Ellen: There's been a lot of forward movement. I think people in my experience are really working on examining their thinking and their mindset and how that impacts what they're doing.

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Ellen: And motivations behind what they're doing. I think so much

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Ellen: Of sex ed and the way that people have worked with young people around their sexual reproductive health.

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Ellen: Is focused on like controlling young people, because that's so much of how our society thinks about young people like

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Ellen: Oh my gosh, they're out of control, their hormones are under control, they you know their brain hasn't developed to make smart, you know, "smart choices."

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Ellen: And so, so much of what how people were working with young people around sexual reproductive health was trying it was focused on control, and that is something that people have really been interrogating and recognizing like

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Ellen: Young people will make the choices that are best for them if they're given the information and support that they need.

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Ellen: And if our goal as healthcare providers as educators as people who work with young people is to support young people in developing the skills they need, you know, to be successful in their life.

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Ellen: Then we need to help them figure out how do you make the best choice for yourself around what method of birth control works for you. How can you develop the skills to advocate for yourself in a relationship? So I think people are really working on that in the sex ed field.

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Ellen: You know, in the handful of years that I've been working in it. I think there's been really a trend to incorporate positive youth development into our work, to really focus on being trauma informed and inclusive and accessible and broadening beyond what all those words mean like

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Ellen: What does it mean to be accessible for, you know, trans youth and what does it mean to be accessible for like

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Ellen: Folks who are the children of immigrants. Like, what does it mean to be inclusive of people who, you know, have experienced poverty, right. So really,

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Ellen: Thinking of the complexity of young people of all people's lives and how we can address that. There's been a lot of effort to engage the communities.

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Ellen: impacted by our work in the care and the services and the program in which is great. I've seen efforts to work on diversifying the healthcare field. I think that is also I think all these things are both like forward movement and gap a little bit. Um, yeah.

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Hannah: So are you hopeful about the future of reproductive justice?

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Ellen: It's so tricky because there is

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Ellen: On the one hand, the politics side of things, right, which is really complicated. And I think in recent years, seen, you know, like who's been appointed to the Supreme Court that has not been helpful about um

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Ellen: You know some things related to legal access to abortion, for example, but I'm generally a pretty optimistic person.

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Ellen: And I would say I'm generally pretty hopeful. I think the more that everybody involved in the field is growing and committed to the hard work of understanding, you know,

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Ellen: Racism, you know,

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00:30:34.710 --> 00:30:41.940

Ellen: Our role you know as allies as white allies a straight allies, as you know,

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Ellen: People supporting others, I think.

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Ellen: Will slowly incrementally get better really the way I think about my work and my ultimate goal is that

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Ellen: I believe for people to have what they need to be healthy, to be able to you know make the choices that they want for themselves. We need to have pretty broad social change.

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Ellen: And I believe that we can get there by engaging more people in thinking about this work and thinking about their own experiences of sexuality and thinking about how

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Ellen: You know, food access impacts reproductive health. You know how you know school policies are impacting all those things, the more that people are engaged, the more I think we can create kind of a network of people

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Ellen: That eventually, I don't know the timeline, can lead to that broad social change. So I'd say generally

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Ellen: I'm hopeful on a long term, but there's definitely some things

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Ellen: That have been happening for a long time that worry me. You know, trends around

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Ellen: abortion restrictions, you know, for example.

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Abby: Our last question.

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Abby: for you today is how can people be more involved in supporting work that advances reproductive justice within our healthcare system.

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Abby: And maybe you could talk a little bit about

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Abby: How Can adults, be more involved and then also if there's ways for, for youth to be involved too.

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Ellen: Yeah, I think something that everyone can do is working to just become more educated and informed. There's a lot of great resources out there.

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Ellen: We did a discussion couple years ago, I don't know. It was a couple years ago, um, where staff read Killing the Black Body by Dorothy Roberts, which is a really

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Ellen: Great book that I'd recommend, um, you know, following organizations and new sources I read a lot from Rewire which is a nonprofit news organization focused on reproductive health and reproductive justice, um,

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00:33:22.410 --> 00:33:27.840

Ellen: You know, just doing the work to really understand like where you're coming from.

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Ellen: You know, and sometimes

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00:33:32.400 --> 00:33:36.030

Ellen: Our intentions, and impact, do not match.

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00:33:38.880 --> 00:33:40.800

Ellen: You know, and we can't control that.

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00:33:42.660 --> 00:33:52.950

Ellen: Like we have to do our best to really be real about how we're doing our work and be willing to be uncomfortable and change when we need to.

221

00:33:55.380 --> 00:34:21.150

Ellen: And then listen. Listening to people that are most impacted by oppression and and justice and letting those voices be centered and have... let them guide where we're going. And supporting organizations. A lot of folks have opportunities for people to volunteer or show up in advance donations

222

00:34:22.830 --> 00:34:23.280

Ellen: Yeah.

223

00:34:24.540 --> 00:34:25.680

Ellen: I think

224

00:34:26.850 --> 00:34:36.930

Ellen: Also yeah like I mentioned earlier, just thinking broadly about how everything is connected to this work and

225

00:34:38.460 --> 00:34:40.920

Ellen: having conversations with people about it.

226

00:34:42.120 --> 00:34:49.110

Ellen: I've had a lot of really great conversations with people. Um, I have been a volunteer

227

00:34:49.800 --> 00:34:56.280

Ellen: teacher with the Minnesota Literacy Council for the past five years. So working with adult English language learners and

228

00:34:56.730 --> 00:35:04.830

Ellen: I've had a lot of great conversations with people about how like that is part of reproductive justice work. I'm not, you know,

229

00:35:05.520 --> 00:35:09.930

Ellen: Talking with the people in my class about here's all these methods.

230

00:35:10.410 --> 00:35:26.730

Ellen: You know, a family planning. Here's all these things, but in supporting them and their goal for learning English, I'm helping them be better able to understand when you know the school counselor calls them and leaves a voicemail, you know about their children or, you know,

231

00:35:28.200 --> 00:35:40.770

Ellen: Being able to understand what a medical providers seem to them. So I think just having more conversations and thinking about how all those things connect is important because it's the truth. Right.

232

00:35:43.290 --> 00:35:49.140

Ellen: For young people at a lot of schools, there's opportunities to

233

00:35:50.430 --> 00:36:09.000

Ellen: be part of groups that are working on issues like this a lot of schools have gender, sexuality alliances, which often are thinking about, you know, issues around sex ed around being inclusive trauma-informed, things like that, um,

234

00:36:10.230 --> 00:36:19.200

Ellen: Yeah, there's always a lot of opportunities to go to advocate at the Capitol, there's usually days related to

235

00:36:21.630 --> 00:36:32.550

Ellen: Like youth and LGBTQ issues to, you know, access to abortion to school policy to dating violence, all of those things.

236

00:36:32.970 --> 00:36:44.310

Ellen: Are opportunities to go and stand up for what your values are. And you want to happen, but also to connect with other people and be open to collaborating and learning from others.

242

00:37:23.010 --> 00:37:25.800

Ellen: Mm hmm. You know, and I think especially

243

00:37:26.850 --> 00:37:49.770

Ellen: Where we are right now as a country and city. Um, I think people need to be super real. About like where they're at and how they're thinking and, you know, around reproductive justice around police violence around racism around all of these things. Um, and recognize where they're at.

244

00:37:50.910 --> 00:37:53.070

Ellen: Be okay with being uncomfortable.

247

00:37:59.520 --> 00:38:18.870

Ellen: Yeah, and do the work for you know I'm all the time versus when there is, you know, thousands of people's energy behind it. It's kind of easier to engage and do the work. Right. But we have to be able to continue to sustain

248

00:38:20.190 --> 00:38:26.670

Ellen: Our work that we're doing internally and the ways that we're supporting our community and working towards the change we want to happen.

[move to section where we talk about what reproductive justice is]

256

00:38:57.480 --> 00:39:00.660

Ellen: There's probably a lot of people who don't think that they

257

00:39:01.830 --> 00:39:09.360

Ellen: Like feel, have any connection to reproductive justice, like, oh, that's just for, you know, the people that are really

258

00:39:10.200 --> 00:39:24.450

Ellen: You know, working on increasing access to abortion. Right. It's just those people, it's the people that are really passionate about that. But I think when people are able to really understand it. They can recognize that it's important for everybody.

259

00:39:25.680 --> 00:39:27.540

Ellen: And so I was glad to hear that you all were doing this.

*[outro music Night Air]*

**HANNAH:** Thank you so much, Ellen, for taking the time to speak with us. We hope that this episode has helped our listeners better understand the topic of sexual health among young people. Please join us for our next episode, where we will hear from Hanin Arqasous about being a volunteer with the Aurora Center for Advocacy and Education. We will also share the answers to our quiz questions. Thanks for listening.

Resources:

Annex Teen Clinic - <https://annexteenclinic.org/>

Better Together Hennepin - <https://www.hennepin.us/bettertogether>

Book Review of Killing the Black Body by Dorothy Roberts -

<https://penntoday.upenn.edu/research/revisiting-killing-the-black-body-20-years-later>

Rewire - <https://www.rewire.org/>

Minnesota Literacy Center - <https://www.literacymn.org/>