final case study
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# off limits

# 01 CONTEXT

When we were assigned our final capstone project, we were asked to reflect on issues we are passionate about, drawing from our personal experiences. One issue I care deeply about is eliminating stigma from our conversations about sexual health—particularly STIs, which are an issue I rarely hear talked about openly.

I was raised in a state that mandates abstinence-only sex education, and when I learned about STIs, they were presented as a shameful consequence, something that happens to reckless people having the wrong kind of sex. This both ignores basic truths about the nature of STIs—for example, you can contract an STI even if you’ve only ever had one partner—and unnecessarily moralizes a pertinent public health issue, adding to a black cloud of stigma that hovers around our conversations about sexual health and discourages people from seeking the treatment and support they need.

STIs are normal, and it’s time we start talking about them that way. According to the CDC, they affect one in five people in the US. Yes, they can be uncomfortable and scary, but, like getting the flu, they are a fact of life and most can be easily managed with treatment. Not to mention, the less comfortable we are talking about STIs, the less likely we are to initiate conversations with our partners about how to stay safe. So, I set out to create something that sparks a stigma-free, community-minded conversation about sexual health and sexually transmitted infections.

# 02 RESEARCH

Throughout this project, we followed the IDEO framework for human-centered design. This allowed us to ground our projects in human need and to be guided by the experiences of our intended audience. In my case, this project drew heavily on user interviews and on the personal stories of the people I spoke with.

As part of the research phase of this project, I conducted over a dozen one-on-one interviews: nine in person or over Zoom, and six written interviews with people who were unable to meet synchronously. My target demographic was young people in the U.S. between the ages of 18 and 30, a group heavily impacted by STIs. About half of my interviewees had been diagnosed with an STI; the rest had not. Interviewing people from a variety of backgrounds and experiences gave me a wealth of insight upon which to base my solution.

# 02 RESEARCH

After completing my interviews, I used the IDEO framework (with the help of my group) to categorize my findings, identify some common themes. I found that many people struggle with feelings of shame when talking about sex and STIs, regardless of their STI status or whether they are sexually active, and that shame often hinders people from seeking support and from asking questions, keeping them in the dark. I also found that lack of awareness about STIs, and especially about risk and preventative measures, was very common among the people I talked to. In many cases, interviewees were aware of a lack of knowledge and expressed a desire to learn. Many said that their experiences with sex education in school and even with their own doctors had been insufficient, in many cases reinforcing the stigma around STIs.

Errors in our education system
How can you re- educate those that fell victim to poor sex education

"Abstinence only" education

STIs presented as scare tacticts

Stigmatizing experiences with healthcare providers

Belief that people who get STIs are "slutty" or irresponsible

STIs viewed as punishment (for not being "careful enough," for having sex outside of marriage)

Religious shame around sex

language of "Dirty" vs. "Clean"

Community connection:
Finding ways to connect people and hear stories to help young adults feel less isolated/ confused

Dealing with STIs/testing in the wake of assault

Feelings of shame following diagnosis

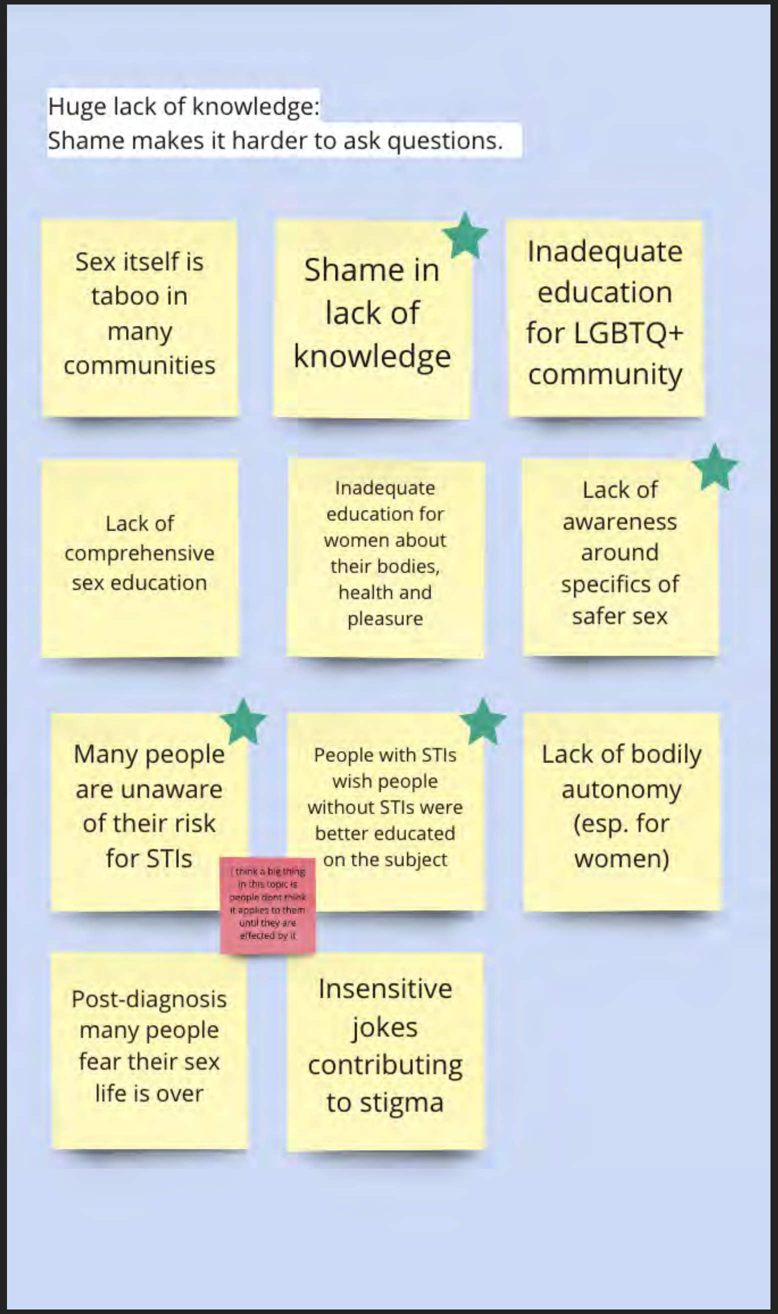
For many the psychological impact of STI diagnosis outweighs impact of physical symptoms

A need to hear other people's stories of STI diagnosis

Needing community support and connection post-diagnosis

Young people seeking information about sex in media (TV, fanfics, Tumblr, porn)

Different resource preferences depending on learning style



Huge lack of knowledge:
Shame makes it harder to ask questions.

Sex itself is taboo in many communities

Shame in lack of knowledge

Inadequate education for LGBTQ+ community

Lack of comprehensive sex education

Inadequate education for women about their bodies, health and pleasure

Lack of awareness around specifics of safer sex

Many people are unaware of their risk for STIs

People with STIs wish people without STIs were better educated on the subject

I think a big thing in this topic is people dont think it applies to them until they are effected by it

Lack of bodily autonomy (esp. for women)

Post-diagnosis many people fear their sex life is over

Insensitive jokes contributing to stigma

# 02 RESEARCH

Once I had identified significant themes from my interviews, I used the IDEO framework to create insight statements.

Among people I spoke with who had been diagnosed with STIs, one of the most important themes I noticed was a desire to know they were not alone in their experiences, especially directly following the diagnosis. This finding would guide the ideation for my project going forward.

**How might we use stories to humanize the issue of STIs and to take the fear out of factual sex ed?**

**How might we reduce the negative mental health impact of being diagnosed with an STI?**

**How might we best reach and re-educate people who received poor sex education?**

**How might we reduce the shame people feel when talking about, disclosing, or seeking information about STIs?**

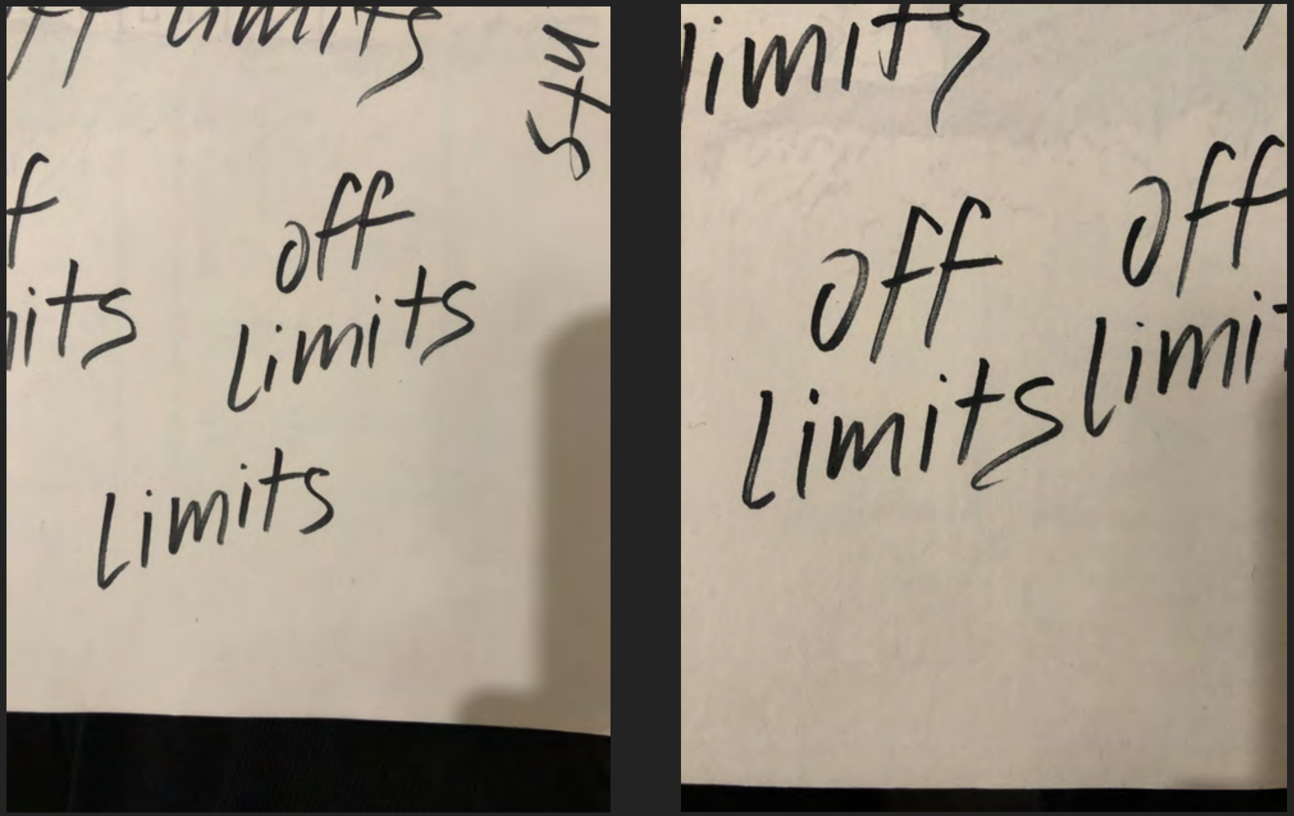
**How might we foster a culture of support for and among people diagnosed with STIs?**

**How might we demonstrate the importance of awareness about STI risks, symptoms and treatment to *everyone*—not just those who have already been diagnosed, or who are perceived to be at higher risk?**

# 02 SOLUTION

For this project, I decided to create a zine dedicated to fighting stigma around sexual health. A zine felt like an appropriate medium because zines are traditionally community-focused and often address issues that are seen as taboo. I wanted this zine to be a space for people to share their unfiltered experiences, with the wholehearted belief that “stories kill stigma” and that hearing and sharing stories can result in greater empathy for our own and others’ experiences. I decided to call it “Off Limits” as a nod both to the importance of bodily autonomy and consent, and the fact that sexual health topics are unfortunately considered “off limits” in many circles.

Through my logo ideation process, I experimented with a variety of handwritten styles to convey intimacy and approachability.



# 03 SOLUTION

As I began to construct a visual language and brand identity for the zine, I knew I wanted it to feel both polished and personal, evoking trust and empathy from the reader. I incorporated handwritten elements into the logo and the titling, as well as into quotes interspersed throughout the zine, and selected a monospace typeface that felt like the perfect mix of modern, friendly, and stark. I chose to ground my color palette in simple white and dark grey, with a bold red as an accent.

My initial moodboard:

No big deal.

People were like "oh, it's not your fault."

Typeface: Input Sans

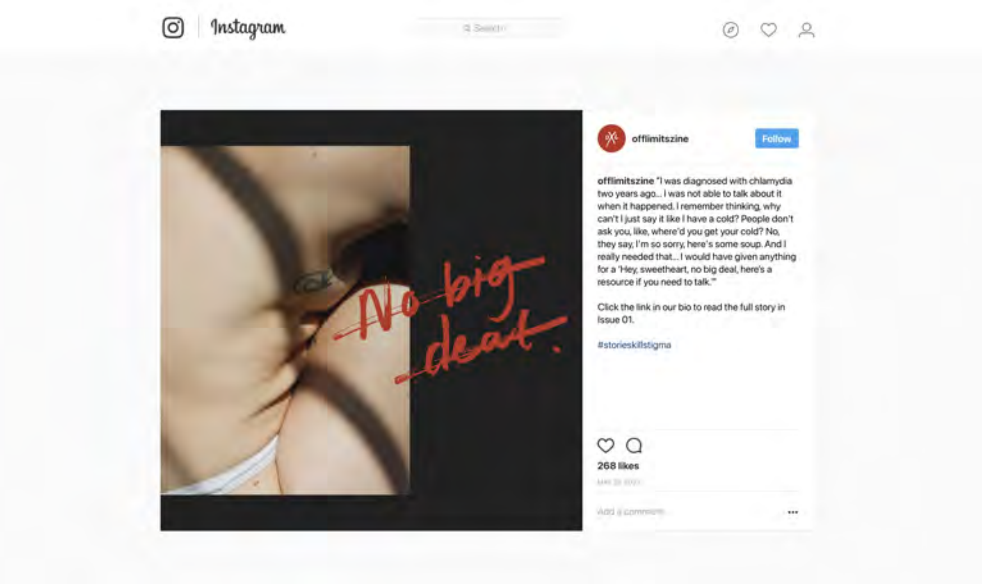
ABCDEFGHIJKLMNOPQRSTUVWXYZ
abcdefghijklmnopqrstuvwxyz

# 02 SOLUTION

My wider vision for this zine is as a container not just for people’s stories but also for their writing and artwork, and in the future, I would like to open it up to contributors. For the sake of my capstone project, though, all of the visual content would be my own. As a photographer, the way I know how to tell someone’s story best is by taking their picture, so I planned a photoshoot with one of my interviewees, Rae, weaving quotes from their interview into the feature spread along with the images. The goal was to put the focus on their relationship with their body, and the resulting photographs put a face to a story, amplifying the personal impact of their words.

# 03 SOLUTION

It was important to me to include an interactive element to the zine, as a way for people to reflect on the content and to connect with others. The last page features a reflection exercise that prompts the reader to reconsider their own presumptions and limiting beliefs about STIs. Finally, I applied the branding and the content I had created to an Instagram campaign as a way to reach new readers and contributors, encouraging people to join the conversation using the hashtag #storieskillstigma.



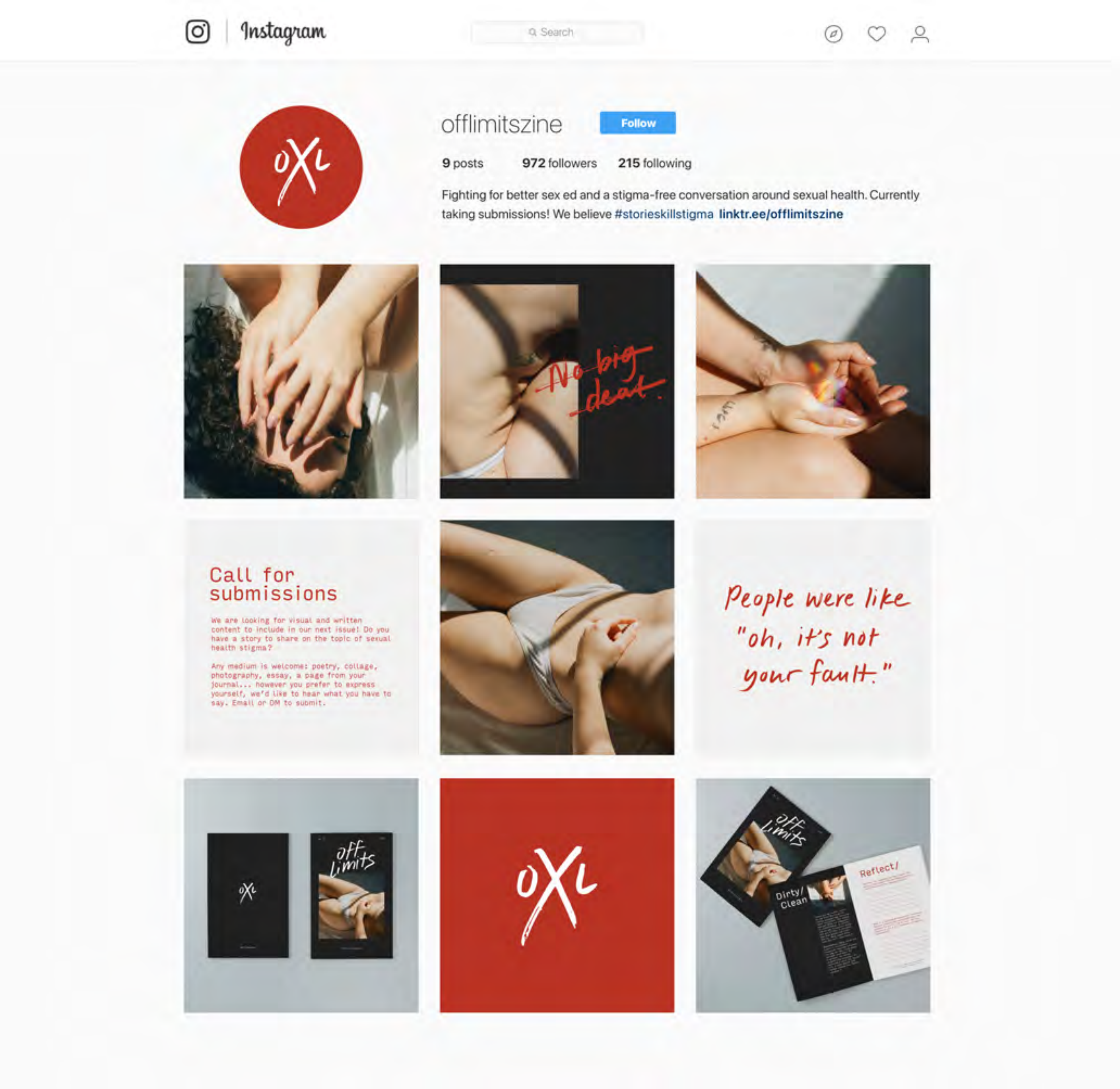
**offlimitszine**

**offlimitszine** "I was diagnosed with chlamydia two years ago... I was not able to talk about it when it happened. I remember thinking, why can't I just say it like I have a cold? People don't ask you, like, where'd you get your cold? No, they say, I'm so sorry, here's some soup. And I really needed that... I would have given anything for a 'Hey, sweetheart, no big deal, here's a resource if you need to talk.'"

Click the link in our bio to read the full story in Issue 01.

#storieskillstigma

**268 likes**



offlimitszine

**9** posts **972** followers **215** following

Fighting for better sex ed and a stigma-free conversation around sexual health. Currently taking submissions! We believe #storieskillstigma **linktr.ee/offlimitszine**

Call for submissions

We are looking for visual and written content to include in our next issue! Do you have a story to share on the topic of sexual health stigma?

Any medium is welcome: poetry, collage, photography, essay, a page from your journal... however you prefer to express yourself, we'd like to hear what you have to say. Email or DM to submit.

# 04 FINAL APPLICATION

Dirty/
Clean

These can be harmful words to use when desribing STI status because they carry the false implication that people who get STIs are unhygeinic or contaminated. In reality, anyone who is sexually active can get an STI, in the same way that anyone can catch the flu. Many people have them and don't even know it.

Nevertheless, these words are a part of our cultural vocabulary and they influence the way we talk, think about and even experience STI diagnoses. To counter stigmatizing language, try replacing a word like "clean" with a more neutral and factual phrase like "tested negative."

Reflect/

How does the language you hear impact the way you think about STIs and those who have them? How about the language you use?

What is a negative presumption or stereotype you have encountered about people who test positive for an STI? Is it true? Can you replace it with a fact statement or positive affirmation?

If you like, share your response and tag @offlimitszine #storieskillstigma

# 04 FINAL APPLICATION

# 05 NEXT STEPS

Due to the nature of this topic and the fact that it takes a movement to break down the stigma that has existed for decades, even centuries, this zine would be strongest as a collaborative community effort. In the future I hope to build out the real-world social media presence of the project and to incorporate submissions into the first print issue. Once I open it up to more stories, it is also important to me to ensure that the zine includes more perspectives from trans people and people of color, as marginalized groups often face even more intense stigma and may lack much-needed access to health and educational resources.