



Youth *KISS* Project

Knox Innovative Sexual health Strategy

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Phase 1: Sexual health conversations with young people

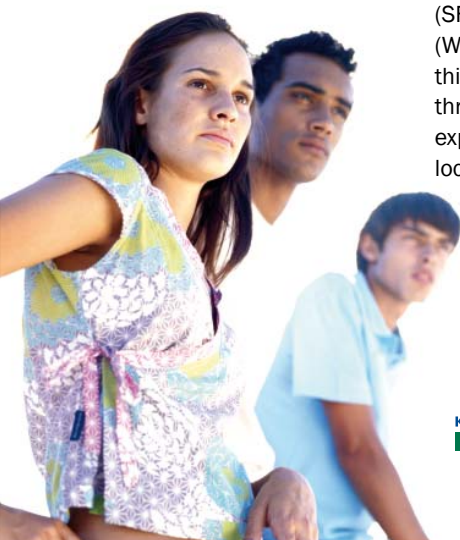
Youth KISS (Knox Innovative Sexual health Strategy) is a Health Promotion project of Knox Community Health Service. The project aims to build an evidence base for a Knox Youth Sexual Health Strategy, which will outline a number of ways to improve young people's sexual health outcomes. Our partners include Knox Youth Services (KYS), Knox School Focused Youth Service (SFYS) and Women's Health East (WHE). A particular strength of this study is the insight gained through exploring the views, experiences and knowledge of local young people.

One hundred and eleven young people, including 54 males and 57 females, were involved in the research. They were aged 14-19 years and live, work, go to school or 'hang out' in Knox. It was a priority to ensure marginalised groups of young people participated in the research, therefore young people were from the local JPET (Job, Placement, Employment & Training) program, a Year Ten TAFE course, a same sex attracted social and support program, and two local secondary colleges.

What we wanted to know

This first stage of the project, 'sexual health conversations with young people', involved gathering information from Knox young people about:

-  Where they go for sexual health information and support and why
-  What prevents them seeking sexual health information and support
-  Their experience of school-based sexual health education
-  Their attitudes towards same sex attraction
-  Challenges they experience regarding sex, pressure and consent
-  Their ideas for improving sexual health education and health services for young people.

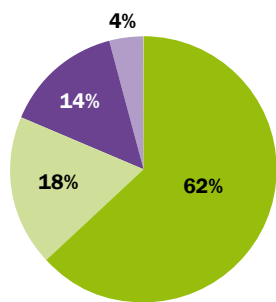


Report Findings

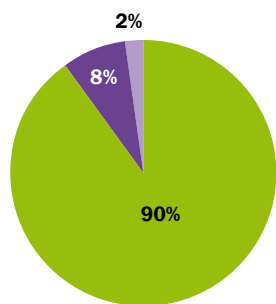
Males and females shared similar knowledge levels and views of sources of information and support; and their experience of sexual health education was similar; however gender was a major influence on how they think about and experience sexual intimacy.

The importance of confidentiality for young people

Young men



Young women



- VERY IMPORTANT
- IMPORTANT
- NOT VERY IMPORTANT
- NOT IMPORTANT

Many of the findings of this study are reflected in national and state-wide reports such as 'Secondary Students and Sexual Health' (Smith et al 2002), 'Writing Themselves In Again' (Hillier et al 2004), 'Developing Ethical Sexual Lives' (Carmody 2006), 'Being Normal is the only way to be' (Martino & Pallotta-Chiarolli 2005), and 'The Sexual and Reproductive Health of Young Victorians' (Family Planning Victoria, Royal Women's Hospital & Centre for Adolescent Health 2005).

1. Sources of sexual health support and information

Key factors that influence a young person to access a person or place for sexual health issues were knowledge, safety, comfort, physical access, affordability and promotion.

Friends

Seventy-five percent of young women favoured their female friends for support, whereas only 48% of young men would seek out a male friend. Young people however, felt friends might not have the correct information. A fear of rumours being spread across the school by friends was a concern.

"Stuff goes around pretty quickly at school"
(MALE)

"Not friends, it would ruin your friendship, because they might tell everyone"
(MALE)

Family

Young women preferred mothers (42%) as a source of information and support over fathers (24%). The opposite was true for young men, with a preference for fathers (24%) over mothers (12%). Fear of a negative reaction or embarrassment was a reason for not choosing to talk to parents.

"It's weird talking to your parents"
(MALE)

"My dad would chop it off [if I came out as gay]"
(MALE)

Doctor

Forty percent of young women and 44% of young men felt doctors were a favoured source of support and information, however few had a doctor they felt comfortable visiting, mostly due to a fear of confidentiality being broken, or a lack of 'youth friendliness'.

"They say 'we won't tell' but they do"
(MALE)

"I have a family doctor and I wouldn't be able to tell him I was gay as he'd tell my family"
(FEMALE)

"Been through three doctors; none of them were good, they didn't take me seriously because I am young"
(MALE)

School

Thirty three percent of young women, and only 12% of young men would talk to someone at school about personal issues. For those that would access support or information at school, most trusted were the Student Wellbeing Coordinator and the School Nurse, with young people much less likely to trust a teacher. Schools were considered unsafe for same sex attracted young people, and participants felt confidentiality was often not maintained by school staff.

"...can't trust teachers, they feel like they have to tell parents"
(FEMALE)

"The counsellor goes to other teachers to say stuff"
(MALE)

"I don't trust anyone, not even doctors, because of my experience at school"
(MALE)

The Media

Same sex attracted young people were more likely to use the internet for sexual health information and support, as it allowed them to be anonymous.

"I Google all the time and delete from history"
(FEMALE)

Very few participants trusted the television for sexual health information, however there was a perception that other young people did.

"Most young people see relationships on TV and think that's how it is"
(FEMALE)

"The 'Knocked Up' movie is probably making young people think that you can't get pregnant standing up"
(MALE)

Local services

This study has highlighted the need for health services in Knox to improve their accessibility to young people.

What young people want in an ideal sexual health service

- Confidentiality
- Drop in facilities
- Youth friendly staff
- No waiting lists
- Public transport close by
- Free services
- To feel safe

2. Sexual health education

“ Relationships should be taught in school, not just biology ”

(FEMALE)

“ We learnt about puberty, biological stuff, nothing about sex ”

(MALE)

“ What we had was very brief and covered stuff you already know like names of body parts ”

(FEMALE)

“ When you’re told ‘not to’ [have sex], you’ll go straight out and do it anyway ”

(FEMALE)









“ There’s no point learning about puberty in Year Ten and Eleven ”

(FEMALE)

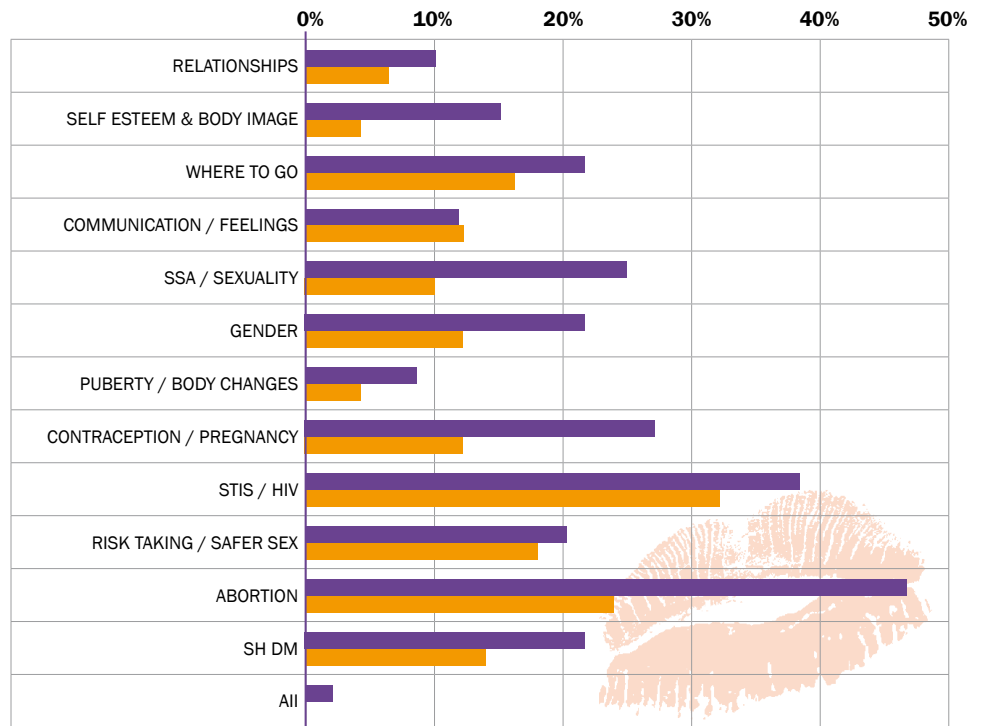
Many national and state-wide studies have focused on different aspects of young people’s sexual health. However, there is a gap in terms of data about local young people’s knowledge and views. Too often young people are not consulted about issues that affect their lives, and yet if program and policy responses to their issues are to be effective, their voices need to be heard, and they need to be provided with real opportunities to be involved in decision making. A major strength of this study therefore, is the insight gained from consulting with local Knox young people.

Many young people reported a poor experience of sexual health education at school. Common themes were that it wasn’t relevant; that it was too focussed on the biological aspects of male and female anatomy; or that there just wasn’t enough of it.

Young people’s suggestions for improving sexual health:

-  Focus more on non-biological information
-  Make it fun, interesting & relevant
-  The ‘abstinence approach’ should not be enforced
-  Deliver it more often
-  Give it more time in the curriculum
-  Make it age appropriate
-  Ensure staff are trained to deliver it
-  Deliver it in single gender groups

What young people want to know more about



3. About same sex attracted (SSA) young people

Many young people would be supportive of a friend who is same sex attracted. However schools were reported as ‘unsafe’ places for SSA young people and sexual health education was considered poor in terms of meeting their needs. Additionally young people feared being perceived as ‘gay by association’.

“ Guys are two faced, they tell girls to kiss and then spread rumours that they are lesbians ”

(FEMALE)

“ At school people get judged, it’s not a safe place; people in class bag other people ”

(FEMALE)

“ Couldn’t hang around with them, they might think I’m gay ”

(MALE)



4. Young people and sex

Pressure and sex

Young people consistently raised the issue of pressure they experienced in relation to sex. They talked about fear of rejection if they weren't sexually active, based on a need to fit in and feel accepted amongst peers. Young men talked about needing to lie to peers to avoid exclusion, and young women talked about the pressure they felt from young men. Young people also talked about the assumption that being in a relationship for a certain period of time meant they should be having sex.

“ Pressure happens every day, there's no stopping it, all the guys will say 'yeah' they have sex ”
(FEMALE)

“ It's so important for a young man to lose his virginity and if your mates are doing it, that way you can join in the conversation ”
(MALE)

“ You think more people are doing it because they give off that vibe...and boys lie, they say they are doing this and doing that, there's pressure! ”
(FEMALE)

“ There's pressure if you're in a relationship from your peers, especially if you've been going out for six months, and the girl thinks they guy wants to have sex because they are in a relationship ”
(MALE)

Consent

Young people expressed a lack of skills in negotiating their needs and desires to a partner, along with a lack of knowledge about the law regarding sexual consent. They talked about the use of non-verbal communication to express willingness to participate in sex or not, with examples of not saying 'no', and leaving a party with someone of the opposite sex, being indicators of consent.

“ There is so much pressure that like we never really consent ”
(FEMALE)

A 'no win' situation

Young women talked about the 'no win' situation they feel exists in terms of whether or not they decide to have sex. Refusing sex brings a fear of not being asked to do other sexual activities, of being labelled 'frigid' or of being 'dumped'; whereas to be sexually active can carry a sense of being used and regretting the encounter later or again being called names.

Furthermore, young people talked about the conflicting perception given to males and females who are sexually active, with young women receiving negative labels, while young men are praised.

“ You're either a slut or you're frigid, what a choice! ”
(FEMALE)

“ Girls are sluts if they do anything, for guys it's like 'high five' ”
(FEMALE)

“ Pressure for girls to perform for boys, yes ”
(MALE)

“ Girls don't like [doing] it, boys love it ”
(FEMALE)

Alcohol and sex

Participants felt alcohol made it easier to talk to a partner about sex, however, they did recognise the negative implications of mixing alcohol and sex, including the potential for a lack of control or of being taken advantage of, particularly for young women.

“ The thing about drinking is that it makes it easier to tell a boy you are interested, but like if you are really drunk then like the next day you can wonder if like [sic] you really even wanted to ”
(FEMALE)

“ You don't really know what you're doing and don't think straight and a guy might say you don't need a condom ”
(FEMALE)

Oral sex

Oral sex is perceived to be common practice amongst local young people, with young women feeling pressured to perform for young men, and a perception that most young women do not really enjoy it.

What next?

Phase 2 will involve the development of an action plan to drive the following recommendations forward, which will be developed collaboratively with local schools and organisations.

1. Ensure local young people are involved in the development of actions that will respond to the results of this study
2. Gain additional information from marginalised groups of young people not involved in this study
3. Explore strategies to improve and reorient current youth health service provision
4. Advocate for more comprehensive, consistent and relevant sexual health education in schools
5. Advocate for safe and inclusive schools and services for same sex attracted young people
6. Explore strategies and responses to increase young people's knowledge and skills in ethical sexual negotiation, including safer sexual decision-making and consensual sexual practice

For more information, and to view the full report please contact:

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