



SESSION 8 - TALKING ABOUT RELATIONSHIPS AND SEX

AIM OF SESSION

The aim of this session is not to give parents all the information on sexual health and education as there is not enough time, and this form of information needs to be related to the individual teenager. The objective is for parents to have a greater awareness of today's sexual health issues, to have a better understanding of media and peer influences on teenagers and to encourage parents to engage in conversations with their teenager about sex and relationships. It is important to state that this session is to support parents and enable them to initiate conversations about relationships and sex with their teenagers as opposed to just giving them information on the topic. It is important to give prominence to parents own beliefs and values, with the objective of helping parents to feel better able to communicate to their teenager these beliefs and values, in such a way as not to impose them but ensuring the parents own values and beliefs are considered in the teenagers understanding and decision making.

WELCOME PARENTS AND FEEDBACK

Please note that this feedback session may take a long time, as parents are discussing how they have implemented strategies learnt during the previous week. Depending on the previous session, this may be natural and logical consequences, the use of praise, or there may be questions relating to the optional drug session. Depending on the length of feedback and length of time needed group facilitators are to decide themselves when a natural break should occur.

INTRODUCTION TO TOPIC

Many young people lack adequate sexual health knowledge. Developing a sense of sexual identity is a key task of the transition to adulthood. Staying safe, healthy and happy through the process is important. Wide variation in age of a teens sexual debut is part of the normal spectrum of adolescent development. The average age of heterosexual sexual debut is:

- **UK is 16 – 17 years.**
- **Australia, USA, New Zealand – 17 years**
- **Finland, Norway, Sweden and Denmark – 16 years**
- **China, India, Singapore - 22 years**

The percentage of young people identifying as lesbian, gay or bisexual, is increasing, however data is incomplete as many young people are still processing their sexual identity. Sexual identity and gender identity are distinct, and data on gender identity in the UK and across the world are currently limited.

Many teenagers don't use contraception – and they may have no idea at all about the risks of sexually transmitted diseases. A lot of youngsters aren't aware that under-age intercourse is illegal.



Sexually Transmitted Infections (STIs) are more common among young people than any other group. Young people are the group least likely to access sexual health services. Factors that young people have raised as important to them are opening hours, location, convenience, publicity, privacy and confidentiality. The most common STIs contracted by young people are:

- **Gonorrhoea**
- **Chlamydia**
- **First episode genital herpes**
- **Syphilis**

Globally in 2023, an estimated 13 % of adolescent girls and young women give birth before they were 18 years old. Countries in Africa have the highest teen pregnancy rates in the world.

The conception rate for under-16s in the UK, USA and Australia has reduced. However, the UK still has one of the highest teenage birth rates and STIs amongst countries in western Europe.

3. SEXUAL HEALTH

What age can you quiz; either as a large group or in pairs ask the parents to complete the quiz. The group facilitator is to read out the questions.

Note the quiz starts with a list of warm up questions which are related to general living and then the quiz goes onto more sexually related questions. In a large group the facilitators are to read out the answers but also give time to enable parental discussion. This can be broken down into sections if facilitators are concerned about time. Group facilitators from outside the UK will have to review this quiz to make it factually relevant for their own country.

4. OPTIONAL

In pairs discuss the most useless piece of advice regarding sex that they were told as a teenager/ young adult. OR discuss the most useless piece of advice regarding sex that they have been told/ heard from a teenager/young adult i.e.: you cannot get pregnant if you have sex standing up!

BREAK – HAVE A 10 MINUTE BREAK AND OFFER COFFEE, TEA ETC.



5. WHAT YOUR TEEN NEEDS TO KNOW

Caution is needed in discussing sexual health as the parents in the group will have a range of knowledge, values and views on sex and on their expectations for their teenagers. This is to be an information giving section and group facilitators are to avoid assumptions and bias towards their own values. The key aspects of the information given to the parents are based on how parents give advice to teenagers about the consequences of sexual behaviour i.e.:

- STD's (sexually transmitted diseases) i.e.: Herpes, syphilis, Chlamydia, gonorrhoea.
- Pregnancy.
- Use of birth control.
- Abstinence: known to 'older' generations as heavy petting, where there is no sexual intercourse.
- How drink and drug effects choices.
- Date rape: the dangers and how to keep safe.
- Responsible sex: being safe means having sex with consent, using condoms and reliable birth control.
- Pronouns.
- Sexuality, orientation and gender identity.
- Supporting your young person with coming out.

This section can be delivered in a range of formats, depending on the group:

- A **Lecture style** – where the group facilitator states the relevant information from the parent handouts.
- B **Open discussion** on how to talk to teenagers about sex and relationships, list top tips on the flip chart.
- C **Pairs** – Put each of the key headings of consequences of sexual behaviour in envelopes and then in pairs ask one of the pairs to pick an envelope. Each pair is given time to consider how they would discuss this with a teenager, then feedback to the larger group.

OPTIONAL HANDOUTS

It is useful to have leaflets for the parents on sex education. This can be obtained from health clinics, school nurses, county councils' health promotion departments and libraries.

HOME CHALLENGE

END OF SESSION



OPTION C - LIST OF CONSEQUENCES.

Cut the table into sections and place into individual envelopes.

How would you discuss “STD’s (sexually transmitted diseases) i.e.: Herpes, syphilis, Chlamydia, gonorrhoea” with your teenager
How would you discuss “Pregnancy” with your teenager
How would you discuss “Use of birth control” with your teenager
How would you discuss “Abstinence: known to ‘older’ generations as heavy petting, where there is no sexual intercourse” with your teenager
How would you discuss “How drink and drug effects choices” with your teenager
How would you discuss “Date rape: the dangers and how to keep safe” with your teenager
How would you discuss “Responsible sex: being safe means having sex with consent, using condoms and reliable birth control” with your teenager.
How would you discuss “Pronouns” with your teenager
How would you discuss “Sexuality, orientation and gender identity” with your teenager
How would you discuss “Supporting your young person with coming out” with your teenager.