Talk soon. Talk often.

A guide for parents talking to their kids about sex
Talk soon. Talk often. was developed by the Western Australian (WA) Department of Health following research that found a need for resources to support parents and families as the primary sexuality educators of their children.


In 2018, the WA Department of Health commissioned a project to inform a second edition of Talk soon. Talk often. An online survey was offered to parents and professionals working in relationships and sexuality education. Face-to-face consultations were held in Perth and regions throughout WA. Parents were asked how they approach educating their children about sex, reproduction, sexuality and relationships. They were also asked what kind of support they need to help them communicate more effectively with their children on these topics and how the first edition of Talk soon. Talk often. could be improved.

Findings from these consultations guided the new design and addition of content on: stereotypes and expectations; family values; special needs; child sexual abuse; family and domestic violence; online safety; sexting and image sharing; pornography; sexual and gender diversity; consent; pleasure; and respectful relationships.

The quotes in Talk soon. Talk often. are from the parent consultations.

The cartoons in Talk soon. Talk often. are by Georgia Richter.

Rift Photography was commissioned to capture images of local Western Australian families.

The WA Department of Health would like to thank the parents and families of WA who generously contributed their time, thoughts and images for the new edition of Talk soon. Talk often. and our professional collaborators for their expertise and guidance.

**Acronyms**

LGBTI – Lesbian, gay, bisexual, transgender, intersex  
RSE – Relationships and sexuality education  
STI – Sexually transmissible infection  
WA – Western Australia  
EC – Emergency contraception
## Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Introduction</strong></td>
<td>1</td>
</tr>
<tr>
<td>Foreword</td>
<td>2</td>
</tr>
<tr>
<td>What you told us</td>
<td>4</td>
</tr>
<tr>
<td><strong>When and how to start talking</strong></td>
<td>5</td>
</tr>
<tr>
<td>When and how do children learn about sexuality?</td>
<td>6</td>
</tr>
<tr>
<td>10 reasons for talking about sexuality (soon)</td>
<td>10</td>
</tr>
<tr>
<td>What the research shows</td>
<td>12</td>
</tr>
<tr>
<td><strong>What are my values?</strong></td>
<td>13</td>
</tr>
<tr>
<td>What are my values?</td>
<td>14</td>
</tr>
<tr>
<td>Respectful relationships</td>
<td>15</td>
</tr>
<tr>
<td>Stereotypes, roles and expectations</td>
<td>17</td>
</tr>
<tr>
<td>What are the values I want to share with my child?</td>
<td>20</td>
</tr>
<tr>
<td>A special note to fathers</td>
<td>22</td>
</tr>
<tr>
<td><strong>Ages and stages</strong></td>
<td>23</td>
</tr>
<tr>
<td>Ages and stages of sexuality</td>
<td>24</td>
</tr>
<tr>
<td>Birth to 2 years</td>
<td>25</td>
</tr>
<tr>
<td>2 to 5 years</td>
<td>26</td>
</tr>
<tr>
<td>5 to 9 years</td>
<td>28</td>
</tr>
<tr>
<td>9 to 12 years</td>
<td>30</td>
</tr>
<tr>
<td>Puberty</td>
<td>35</td>
</tr>
<tr>
<td>12 to 14 years</td>
<td>39</td>
</tr>
<tr>
<td>14 to 17 years</td>
<td>43</td>
</tr>
<tr>
<td>Some WA stats</td>
<td>46</td>
</tr>
<tr>
<td><strong>Keeping children safe</strong></td>
<td>47</td>
</tr>
<tr>
<td>What is child sexual abuse?</td>
<td>48</td>
</tr>
<tr>
<td>Keeping children safe from child sexual abuse</td>
<td>49</td>
</tr>
<tr>
<td>Family and domestic violence</td>
<td>51</td>
</tr>
<tr>
<td>Online behaviour and safety</td>
<td>52</td>
</tr>
<tr>
<td>Respectful relationships and sexting</td>
<td>54</td>
</tr>
<tr>
<td>Porn and other sexually explicit material</td>
<td>57</td>
</tr>
<tr>
<td>How do I talk to my kids about porn?</td>
<td>58</td>
</tr>
<tr>
<td>Section</td>
<td>Page</td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>Kids and teens with special needs</td>
<td></td>
</tr>
<tr>
<td>Supporting a child with a disability</td>
<td>60</td>
</tr>
<tr>
<td>Supporting children and adults with a disability</td>
<td>61</td>
</tr>
<tr>
<td>Supporting a child with Autism</td>
<td>62</td>
</tr>
<tr>
<td>Diversity</td>
<td></td>
</tr>
<tr>
<td>What is sexuality?</td>
<td>64</td>
</tr>
<tr>
<td>What is sexual identity?</td>
<td>65</td>
</tr>
<tr>
<td>Same-sex attraction</td>
<td>67</td>
</tr>
<tr>
<td>Parenting a child who has come out</td>
<td>69</td>
</tr>
<tr>
<td>What is gender identity?</td>
<td>71</td>
</tr>
<tr>
<td>Parenting a child who is gender diverse</td>
<td>72</td>
</tr>
<tr>
<td>Parenting a child with intersex variations</td>
<td>74</td>
</tr>
<tr>
<td>Tips for talking</td>
<td></td>
</tr>
<tr>
<td>Top 20 tips for talking about sex</td>
<td>76</td>
</tr>
<tr>
<td>Conversation starters</td>
<td>78</td>
</tr>
<tr>
<td>What to do if they just won’t talk</td>
<td>80</td>
</tr>
<tr>
<td>Preparing young people for healthy sexually active lives</td>
<td>81</td>
</tr>
<tr>
<td>Preparing young people for healthy sexually active lives</td>
<td>82</td>
</tr>
<tr>
<td>Pressure, unwanted sex and sexual assault</td>
<td>84</td>
</tr>
<tr>
<td>Key messages for young people about sex</td>
<td>86</td>
</tr>
<tr>
<td>What is sexual consent?</td>
<td>88</td>
</tr>
<tr>
<td>What does the law say?</td>
<td>89</td>
</tr>
<tr>
<td>How do you know if you are ready for sex?</td>
<td>90</td>
</tr>
<tr>
<td>Preventing unplanned pregnancies and STIs</td>
<td></td>
</tr>
<tr>
<td>Contraception</td>
<td>92</td>
</tr>
<tr>
<td>Pregnant?</td>
<td>94</td>
</tr>
<tr>
<td>What young people need to know about STIs</td>
<td>95</td>
</tr>
<tr>
<td>Relationships and sexuality education</td>
<td></td>
</tr>
<tr>
<td>Relationships and sexuality education in schools</td>
<td>98</td>
</tr>
<tr>
<td>WA Department of Health resources</td>
<td>100</td>
</tr>
<tr>
<td>Resources</td>
<td></td>
</tr>
<tr>
<td>Services and websites</td>
<td>102</td>
</tr>
<tr>
<td>Books (and other written resources)</td>
<td>106</td>
</tr>
<tr>
<td>Reference list</td>
<td>110</td>
</tr>
</tbody>
</table>
Introduction
Most parents and carers know that, just like learning how to play or talk, sexual development is a part of human development. Most parents know and believe that talking to their kids about sexual matters is important. And they are right – it does make a positive difference.

The problem is that many of us grew up at a time when talking about sex within the family wasn’t done. We feel we don’t have a model to copy. This is especially true for men. At least girls usually got some information about periods and babies (from Mum), but boys (who are now men) often missed out on any sort of parent talk about bodies, sex and relationships. If you were a same-sex attracted, transgender or intersex child then you may have had even fewer conversations that felt relevant to you.

We can be so worried about getting it right, perfectly right, that we end up saying nothing at all.

Here’s the good news. Helping your child towards a happy, healthy sexuality does not come from ‘One Big Talk’ that you have to get perfectly scripted. You might also be glad to know that talking with your children about sex will not make them go out and do it. In fact, talking about sex with young people has the opposite effect.¹

It’s not one big talk, but lots of little conversations. Repeated.

Life presents lots of opportunities to chat, ask opinions and make comments, embrace these opportunities to revisit conversations – little and often. By doing this, your child will have learnt the most important message:

They can talk about this subject with you.

With our generation, our parents – sex was just a taboo subject. Whereas this generation, we’re more open about it. Back when I went to school, some people had sex education, and a lot of people didn’t. It made it easier if you had something.

– Parent

Foreword
What is sexuality? It’s not just sex.

‘Sexuality’ covers feelings you have about your body, growing up, identity, sexual feelings and expression, gender, making babies, love and closeness, personal values and relationships.

Fundamentally it’s about caring for (and enjoying) yourself, your body and others.

Love makes a family.

Families and parents come in all shapes and sizes – this book is for anyone who plays a role in raising a child. Nuclear family, sole parent, extended family, heterosexual, same-sex, gender diverse, living between two households, with biological children, adopted children, donor children, kinship carers, with or without custody of children, co-parents, foster parents, grandparents and step-parents. All family and parent types can raise healthy, happy children – the sexuality or relationship status of a parent or caregiver is not the determining factor.

We want kids to learn to care for and enjoy themselves and their bodies, and to care for others. We want them to enjoy caring, equal, respectful relationships. We also want to prevent unwanted pregnancies, sexually transmissible infections (STIs) and non-consensual sex.

Talking a little and often, and going over the same topics makes a positive difference to your child’s sexual health and relationships.

I’ve probably never sat down and discussed the birds and the bees. It’s not been like that. They’re boys, and you go, we’ll have a bit of a chat about that now. It’s not even if they ask, it’s as if something goes ‘ping’ in my head, and I can connect bits of information. It’s been little bits of information as they are ready to absorb it really.

– Parent of boys 11, 13 and 16
Parents talk to their children about relationships and sexuality more often and in a more natural and open way when they feel confident.

We looked at what current research advises and asked parents in WA what they would like to know to make them feel more confident. Parents said:

**We want knowledge**

“I just want to know what’s normal, what to expect with my kids.”

“Is that too much? Is that enough? Are they going to listen to me?”

“What things are they going to come across compared to what we did at their age?”

**We want ideas on how to deal with all the sexual information in the media**

“How do we protect our kids online?”

“Kids have access to so much more information than we ever did. They can just sit down and Google ‘sex’.”

“Sexualised images are everywhere – all over social media, on music videos, on TV.”

**We want to know how to share our values with our children**

“What do I do when my child wants his girlfriend to stay over? How do I share my views without shutting down our relationship?”

“How do I encourage talking about sex without encouraging them to have sex?”

“What do you do when a topic is suddenly thrust upon you and you don’t have a book or website to go to?”

**We want to know how to keep communication going**

“What age do we start talking?”

“What do I say? Will they listen to me?”

“I want to talk but my daughter doesn’t!”

*Talk soon. Talk often.* provides information on these topics and offers opportunities for you to consider your own values and position on a range of issues to do with sex and relationships.
When and how to start talking
When and how do children learn about sexuality?

When should we start talking? **Soon. Now.**

Whether we talk or not, children learn important messages both in and out of the home that will lay the foundations for their sexual development.

The question is not whether children will learn about sex and sexuality, rather, what and how do we want them to learn? At home? At school? In the media? Online?

**At home**

Home is the first place for a child to learn about feeling safe, close and connected. Home life provides opportunities for lots of ‘teachable moments’. Enjoying bath time, learning when it’s OK to be nude, learning how to take care of their body and asking questions about going to the toilet are situations where education about accepting our body begins. As children get older, reactions to puberty, questions about sex or the arrival of first love and romantic partners will continue the ‘home schooling’.

**Ideally children learn early that they can talk to their parents and trusted carers and ask questions.**

We’ve always tried to be quite open with our kids and built on discussions, given information and terminology since our kids were small. When questions have been poorly timed or I haven’t had the answer I’ve always been honest and let them know I’ll get back to them later.

– Parent of boys 5, 8 and 10
When and how to start talking

At school

Beyond stories swapped between children in the playground, the way schools manage everyday events has a lot to teach kids too. Does a child know what to do if they get their period at school? If young children are found to be showing each other their private parts, is there panic? Or are children taught that curiosity is OK but showing our private parts at school isn’t appropriate?

Secondary school corridors and changing rooms are the sites for both excitement and despair about friendships, bodies, belonging, being liked and being loveable. By the end of high school over half of all young people will have had sexual intercourse. Some schools run programs that give young people a chance to make informed choices and think about values around this part of their lives. (See page 98 for more information about Relationships and Sexuality Education programs in schools.)

Finding out what your child’s school is teaching is a good way to get the conversations going at home.

The younger they are, the less embarrassing it is for them. Because they have always known and it’s not a big secret - they can just come and talk to me. If they hear something in the playground, they can ask me and they know what I’m going to say is going to be open and honest.

- Parent of boy 8 and girl 10
When and how do children learn about sexuality?

In the media

Media messages play a big role in shaping how kids feel about their bodies, gender norms and ideas about sex. Media that only focuses on looks rather than who a person is can hurt kids’ self-esteem. Kids are taught to be critical of their own bodies (and our criticism of our own bodies only adds to this). Media is not very diverse and various groups are not often represented. Finding examples of positive body images will help support your child’s self-esteem (and even your own!).

When ‘normal’ for a boy equals being tough, never vulnerable, (always) heterosexual and having a large muscular body, or when a girl bases her self-worth on being pleasing and pretty (or sexy), then it’s time to find some different media messages. We can try to make sure our kids know the difference between made-up, photoshopped media beauty and real-life beauty, on-screen love and real love, and the dangers of negative body image.

Children and young people also make their own media, and it can be great to ask what makes a ‘good’ selfie for girls compared to what makes a ‘good’ selfie for boys, or if kids can challenge these stereotypes.

Media plays a big part in educating our children, whether we like it or not. We need to use the ‘teachable moments’ that arise in the media to challenge negative messages and share our own values.

I used to criticise my own body a lot – fat bits, wobbly bits, stretch marks, too pale, wrinkles. After having my daughter I made the decision to try to be positive about my own body and to be very careful what I say and do in front of her. I want her to be happy that she has a strong and healthy body.

– Parent of girl 7
Online

Mobile technology means kids have easy access to unsupervised internet and social media use at all times of the day. Ever younger children expect to have a tablet or phone and we can’t expect all of our relatives and friends to have internet filters on their devices. There is a strong chance that children will see sexually explicit images, pornography or violent images online.

Primary school children find violent news stories or sexual images the most upsetting, and teenagers find online comments and relationship issues the most challenging. Mobile phones and online spaces allow kids to get closer, much sooner, with someone they are just getting to know. Children usually report problems occurring with others of a similar age rather than unknown adults they have met online; however, it is impossible to really know how old someone is, or what their intentions are if they are only interacting with this person online. (See pages 52–53 for tips on how to keep kids safe online.)

Whatever the device or app they are using, the key messages remain:

- You can come to me if you are worried.
- We treat one another with kindness and respect.

Keeping up to date with the latest social media apps and games is so difficult as they evolve so quickly.

– Parent of girl 7 and boy 11
**10 reasons for talking about sexuality (soon)**

01. Many children want to know
   Many younger children are curious about how babies grow, and how they ‘started’. Talking to them openly and honestly shows that they can come to you with their questions.

02. It sets the stage for later conversations
   Give children (and yourself) practice being comfortable talking about sexual matters before they are older and reluctant to discuss the topic. Showing them that you are willing to help them find the answers to their ‘tricky’ questions when they are younger will encourage them to seek help from you when they are older.

03. It helps children cope better with puberty
   Kids worry ‘Am I normal?’ and ‘When will it happen?’. Learning what to expect and how to manage it helps children to become independent and confident. Puberty is tough for those who are the first (and last) to develop. Some girls experience breast swelling at age 8 and some boys have late growth spurts. Explaining that there is a wide range of ‘normal’ when it comes to how our bodies (and minds) change and develop throughout our life can be reassuring.

04. It ensures boys get included in sexuality education within the family
   Boys often miss out on sexuality education within the family. Mums tend to provide more discussion on this topic but may know less than dads about boys’ development. Boys are often left to learn about sex and sexuality via the internet.

05. It shows your kid you ‘have their back’
   Tell your kids it’s not OK for relatives or others to make observations about their breast development, weight gain, skinniness or any other commentary on their bodies. This is a good way of showing your kids they have the right to have their bodies respected.

06. It helps young people make healthier choices
   Research shows that children whose parents talk with them about sexuality and who receive good sexuality education at school are more likely to: start sex later; have sex when they are ready; have consensual sex; are less likely to have an unplanned pregnancy; and less likely to get an STI.
10 reasons for talking about sexuality (soon)

07 It can help protect them from sexual abuse

Keeping discussions about sex and bodies a secret can help sexual abusers keep their crimes secret. Open discussion at home gives children permission to talk with you about sex and sexual body parts which makes them feel safe to ask questions and let you know if they are worried about something. Regular reminders that their body is their own and that no-one can touch them without their consent helps protect them in both their early and later years.

08 It can make life easier for kids who are not traditional ‘boy’ types or ‘girl’ types

There is more than one kind of boy and one kind of girl, but kids can suffer if they don’t follow the expected norms. Children who are transgender or intersex, or kids in LGBTI families can find themselves excluded too. If we start early to question rigid gender stereotypes we can prevent a lot of misery and help to broaden everyone’s options, ultimately contributing to kids’ wellbeing and sense of belonging.

09 It allows you to share your family values

Having open discussions offers lots of opportunity to share your values and beliefs. Using examples from social media and TV allows you to discuss topics hypothetically. Offer suggestions for how you would hope your child to respond in that situation.

10 It shows them that it’s OK to talk

The research tells us that children may not come to you if they have a question – they are waiting for you to raise the topic first. They may be embarrassed to reveal that they are interested or, in the case of older teens, worried that you will assume they are sexually active. Show them it’s OK to talk by taking the lead and starting conversations.
Here’s what the research into parent–child communication shows.⁶

- Communication is best when parents are clear and direct AND listen to their children’s views and welcome questions.

- Many parents truly expect their children will come to them when they have questions, but children also expect (and want) parents to start these conversations.

- Fear that parents will judge them stops young people raising the topic of sex (“If they’re talking about it, they’re doing it!”).

- Grandparents, aunts, uncles, older siblings and other carers can be very helpful as an alternative or extra source of information and support.

- If a child has shared that they are same-sex attracted or transgender it can be extremely upsetting to them if the parent never brings up the subject again. One way of showing a child that they are loved and accepted is to send the message that it’s OK to talk.

- More research needs to be done into how parents can support the healthy sexual development of kids who are gender diverse and sexually diverse.

- More research needs to be done into how parents can support the healthy sexual development of children born with intersex variations.

- More research needs to be done into how parents can support healthy sexual development in children with cognitive differences such as Autism.

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I feel really honoured that she is able to come to me with this. I don’t have all the answers, but I can help her find out.

— Parent of girl 17
What are my values?
What are my values?

When you have kids, you assume that you’re immediately going to know what your values are. But it becomes a lot greyer as you go along. And also, because we’re so time-poor, I don’t think you sit down and really assess what your values are. And then it all creeps up on you.

– Parent of girls 14 and 16

Our individual values are shaped by our own set of life experiences – our upbringing, family, culture, religion, significant life events, peers, media, social norms and education. Our values are not often consciously chosen. They are based on deep beliefs that we learn when we are so young that we accept them without question (until we are encouraged to do so, or we are old enough to actively question them). These early beliefs are communicated to us largely non-verbally but also through what we are told (or not told) and how it is said.

Our values influence our attitudes, behaviours, decisions and relationships.

People often think that what they value is a universal belief or fact, but values are personal opinions that differ from person to person and can change over time. Our values are very personal and are often held with great conviction, so people can feel personally attacked if someone disagrees with their core values or tries to inflict their values on them.

The more aware we are of our own values, the clearer we are in expressing them and communicating them to our children. The more effectively we communicate our values, the more likely our children are to incorporate those values.

Throughout each section of this book, you will be given opportunities to think about your values, why they are important to you and how you can communicate them to your child.
There are many different kinds of relationships – acquaintances, friends, best friends, family, companions, romantic, sexual, intimate. The level of contact and connection in each of these relationships differs but the one thing that remains a constant is the need for respect – both giving respect and being respected. As parents, we value respect enormously. We hope that our children will respect us, that they will respect others and that they will respect themselves. We also hope that they will be respectful of their belongings, the environment and the law.

Respect is about showing that you value other people through your words and actions. You treat other people with care and you consider how your words or actions may affect them.

Respectful relationships are about:

- feeling safe
- trust and honesty
- being valued and cared for
- being free to be yourself
- listening and being heard
- being able to disagree or say no without fear of being criticised or hurt
- being supported to make your own choices
- being encouraged to grow, learn and succeed
- being able to make mistakes
- working out arguments by talking and compromising.

Learning how to put these things into action in relationships with family and friends will help lay the foundations for respectful romantic and intimate relationships later in life.
What you can do

- Talk to your child about the qualities of respectful relationships. Point out examples of respectful and disrespectful behaviour in the media.
- Praise your child for respectful behaviour. For example, “It’s great that you realised you needed to walk away and calm down when you felt angry. It’s so important not to take our anger out on other people.”
- Naming how you feel when you are frustrated, angry, disappointed, excited, nervous, happy, etc. is a great way to model to your child how to communicate their feelings in a clear and assertive way. Being able to communicate our feelings can help to avoid misunderstandings and conflict.
- Help your child to be empathic – ask them how they feel in different situations and get them to think about how others might be feeling too. Show them how to read body language to give them clues as to how someone might be feeling inside.

- Encourage your child to stop, think and then speak their minds in a calm way.
- Show them how to ask for things in a calm, assertive manner (without being passive or aggressive).
- Help your child develop problem-solving skills by asking them to name the problem and how they are feeling in words so you can discuss it and find a solution together. You might need to help them by saying something like, “I can see you are feeling frustrated, shall we sit down and work out what we can do?”
- Model how to seek clarification by repeating back what you heard them say, “So what I hear you say is...and I think that means...”
- Develop decision making skills by helping your child to think through options and consequences before acting.
- Teach them conflict resolution by negotiating with them on some things but also being clear on the things that are non-negotiable.

I think it’s important that we model what a respectful relationship looks like at home. That doesn’t mean we always get it right. We make sure we show our kids how to disagree respectfully and say sorry when we make mistakes.

– Parent of boy 11 and girl 12
The desire to support kids to be themselves and enjoy their natural interests and skills is something most parents have in common – we want them to be happy and fully developed human beings. Many parents are aware of how gender stereotypes can limit their kids’ potential, shape their later career prospects and get in the way of good mental health and respectful relationships. Research also makes us aware of the links between rigid gender stereotypes, gender inequality and violence against women and children.7

Gender roles (that is, how we expect girls and boys to behave) are taught right from birth and influence all of us – what we wear, how we behave, what interests we have, how we feel about ourselves, and how we relate to one another. The media plays a large role in this – TV shows, news, music videos, adverts, games and apps, magazines, social media. We are constantly bombarded with stereotyped images and messages – firefighters are men, nurses are women, dads don’t change nappies, mums like to bake, men have to be tough, women cry lots. These stereotypes have been part of our everyday culture for such a long time that we may not be aware of how we subtly reinforce them and the impact this can have. Despite aiming for equality, many parents feel more comfortable with young girls playing with trucks than they are with young boys playing with dolls and we still hear people praise boys for being strong and girls for being pretty.7

Parents are important sources of information when it comes to attitudes and values and providing positive role models. We need to model gender equality and respectful relationships while challenging stereotypes and discriminating behaviours.

Restricting what people can and can’t do based on gender stereotypes only limits what they can achieve. We want to maximise our children’s potential.

My Dad always said things like, “Don’t scream like a shiela!” and, “Don’t be a big girl’s blouse!” He said it so often that I found myself saying it too without even realising. I think I might show him the YouTube clip #LikeAGirl – that really hit home to me how much of an impact our words can have!

– Parent of girl 7
Things to consider

- Who decided blue was for boys and pink was for girls? What clothes are your children ‘allowed’ to wear?
- What behaviours are OK for one gender but not OK for another? For example, how do your family members respond when your daughter cries? Is this different when your son cries?
- It is common and normal for kids to dress up in mummy’s or daddy’s clothes without it meaning that they are gay, straight or transgender. How do you react to your daughter wearing a tie or your son wearing a dress?
- What sports, hobbies and activities are your kids expected to be interested in or allowed to participate in?
- “You throw like a girl.” “She’s such a tomboy.” “Real men don’t cry.” “Boys will be boys.” How do you respond when people say these things?
- Does your daughter feel she has to spend time and money on her appearance in order to be accepted? Does your son feel he has to be muscular and competitive to be a ‘real man’? Do you reinforce or challenge these feelings?
- Is your daughter raised to believe that only boys have sexual desires or masturbate?
- Will your son feel like he has to push for sex just so he can be seen as a real man by his friends? Will a man he knows and respects challenge these kinds of beliefs?
- Will your child be shamed or teased if they don’t follow ‘the gender rules’?
- How do gender stereotypes affect the way you see yourself? How does it affect your behaviour?
- How can stereotyped gender roles affect your child’s future goals and relationships?
What you can do

- Enjoy your beautiful kids’ natural interests and qualities. All genders can be graceful, tender, caring, tough and competitive. We should embrace this.
- Find examples in the media that show diversity – kids of all genders being strong, sensitive, powerful, quiet, artistic, caring, leaders, etc.
- Give your kids someone to look up to – show them a range of role models, including people following non-traditional interests and jobs.
- Make fun of adverts and movies that show girls waiting for their knight in shining armour to save them, or the hyper-masculine hero who can’t handle a baby or express his feelings.
- Ask your kids what it means to ‘man up’. Does it mean being tough and showing no emotion? Imagine if you had to be like that all the time – what effect would it have on your mental health? What would it mean to ‘woman up’?
- Teach your kids how to deal with difficulties and conflict using assertiveness rather than aggression, physical power or passiveness.
- Support friendships between boys and girls, and reject ideas of boys versus girls.
- Reflect on the values and characteristics you admire in a person. Praise your child for their positive attitudes, behaviours and strengths – not just the way they look.
- Does your daughter stand on the sidelines? Encourage her to take her turn.
- Stand up for your kids if they are criticised for being ‘wrong’ in the way they express their gender.
- Have a look at theline.org.au (Parent and carers section) for assistance in talking to your older children about gender stereotyping, respectful relationships and how this relates to sex and consent.

Challenging gender stereotypes means allowing our kids to be free to be themselves, ensuring they are treated equally and that they are respectful of others.
It can be useful to spend some time thinking about what is important to you and how you might want to respond if these values are challenged. You might like to use the following questions to start a discussion with your partner or other important adults in your child’s life to get a sense of the degree to which your ideas are the same and what you might do in these scenarios. Some of these dilemmas are very complicated and you might need to list the pros and cons to help you decide on the path to take. You can (and probably will) change your mind as circumstances change, but it is important to be prepared and think about these things in advance.

What are the values I want to share with my child?

Your 5 year old sees two people having sex on TV and asks you what they are doing. How much do you want to tell them?

Your 14 year old has fallen in love (or lust) with a 16 year old. You are concerned that it might be getting a bit ‘hot and heavy’. Should you interfere? Do your feelings change if your child is in love with someone of the same sex?

You discover that your young teen has been sending nude pictures of themselves to their new partner. What do you do?

Your son recently identified as transgender and wishes to be called ‘she’ and ‘her’. How do you respond?

You have been brought up very strictly and have taught your children a strong moral framework about sex, which you believe should be kept for after marriage. You find a packet of condoms in your 17 year old’s jeans pocket. How do you deal with this? Does your reaction change if they are a girl or a boy?
What are my values?

What are the values I want to share with my child?

Your 16 year old tells you they are having sex with their partner of the same age and would like to have him/her sleep over sometimes instead of having to find a quiet spot elsewhere. You have a 12 year old at home as well. Until now you have discouraged both from early sexual activity. What do you say?

Your 13 year old daughter had a friend sleep over last night. Looking at the online history of her iPad, you discover that someone has been viewing pornography. Should you say anything to the children? Should you say anything to the other parents?

Your daughter confides in you that her boyfriend forced her to have sex when she was drunk. How do you handle this, including the fact that there are legal issues?

You notice some information about gay support groups in your 17 year old’s bedroom. Do you say anything? Does your reaction change if they are a girl or a boy?

Your 15 year old has become uncommunicative and sullen since making a new group of friends. You are concerned that they are mixing alcohol and other drugs with risky sex. What can you do to help your child be safer?

Your 17 year old tells you he is planning on having sex with his partner when they go off to the city for the weekend. You think they are both too young for this and you are worried about protecting them against unplanned pregnancy or STIs. What could you do?

Your daughter confides in you that her boyfriend forced her to have sex when she was drunk. How do you handle this, including the fact that there are legal issues?

You notice some information about gay support groups in your 17 year old’s bedroom. Do you say anything? Does your reaction change if they are a girl or a boy?

Your 15 year old has become uncommunicative and sullen since making a new group of friends. You are concerned that they are mixing alcohol and other drugs with risky sex. What can you do to help your child be safer?

Your 17 year old tells you he is planning on having sex with his partner when they go off to the city for the weekend. You think they are both too young for this and you are worried about protecting them against unplanned pregnancy or STIs. What could you do?

Throughout this book you will find lots of suggestions of how to support your child in situations such as these.
In the past, many dads did not talk to their kids about sex and relationships. It was understood to be a woman’s responsibility. Now, most parents want to be equally involved in their children’s lives, so we are seeing a shift in sharing the job of initiating conversations about sex and relationships too.7

Young Australians talk about the weight of gendered double standards in (heterosexual) sexual relationships, where boys aren’t expected to control themselves and girls are accountable for contraception, sex and even their own sexual assault (e.g. blaming what she was wearing). When dads don’t talk to their kids (both sons and daughters) about sex it continues the cycle of young men feeling ill-equipped to talk about intimate issues. Worse still, it runs the risk of confirming stereotypes that boys and men bear no sexual responsibility, such as ‘they can’t help themselves’ or ‘boys will be boys’.

In a recent survey of WA high school students, teens were half as likely to use their fathers as a source of information than their mothers – so dads need to take the lead and show that they are open to having these conversations.10 If you haven’t started talking to your kids from a young age, it can be daunting to make a start. When you first talk to your kids about sex, you may well face their discomfort. If you’re feeling uncomfortable, it won’t hurt to acknowledge this by something like, “I’m not sure what to say, but I think it is really important that we can talk about this. When I was a boy the only thing I knew about girls/puberty/sex was...”

**Tips for dads**

- Start when the kids are really young so that you both get used to it.
- Pick the bits that you do feel comfortable talking about and find books for the bits that you don’t.
- If you are a single parent of a child, together you might decide on another adult your child can go to with questions in case they don’t feel comfortable talking to you about some topics or if they want a different perspective on things.
- Remember, kids want to know about your values and beliefs – not just about periods and wet dreams.
- Tell them how you think people should treat each other in relationships such as being valued and respected, respecting each other’s boundaries and the importance of consent.
Ages and stages
Ages and stages of sexuality

Children are not devoid of sexuality. They have their own brand of sexuality that corresponds to their age and stage of life. Sexuality starts when a baby is first conceived and develops throughout their lifespan. Just like all the other areas development, it is normal and healthy for a child’s sexuality to grow as they grow into adolescence and adulthood. Going through these stages of development will help them enjoy their adult sexuality.

A person’s sexuality, much like their personality, is assembled over the years from different components: the brain and the body’s natural growth and development; experiences as a child; and the way the child ‘reads’ the world. While there are differences among children, there are general ages and stages that children and young people go through.

It can be overwhelming for parents, who wonder what is normal and how best to support their child at each stage. But remember, love, support and acceptance go a long way in helping your child to feel safe and to make informed choices. The following sections will give you an idea of what to expect, what you can do to support and guide your child, and how to answer some of those ‘curly’ questions.
What to expect

Sexuality for a baby is not like sexuality for an adult. Feeling closeness, safety and love is the start of learning to expect and to have loving relationships. Babies learn about the world through touch. Just as they enjoy playing with their fingers and toes, they will play with their genitals too, because it feels good. It’s normal and healthy. Baby boys have erections and baby girls’ vaginas lubricate (get wet). These are reflex responses and part of healthy development.

What you can do

- Start using the correct words for body parts now, such as vulva, vagina, breasts, penis and testicles.
- Naming body parts and answering questions about their functions helps create an open atmosphere.
- Sometimes one or both of a baby boy’s testes do not descend into the scrotum at birth or over the next few months. This is normally picked up and monitored as part of your baby’s regular health checks, but if you have any concerns, speak to your doctor.

Do we need to say ‘vulva’?

Yes. Children need to know there is a name for the parts of the female genitals on the outside of the body and ‘vagina’ is incorrect. The vagina is the inside tube leading up to the uterus (womb). The vulva is the outside part made up of the clitoris and the labia (inner and outer lips). Using the correct terminology helps you speak about all body parts without embarrassment so that children have the language to ask questions, seek help and explain any changes of concern accurately. Using the proper words right from the start helps avoid confusion. It’s important your child knows that, like all body parts, vulvas come in many different shapes, sizes and colours.
What to expect

You might have noticed that your 2 to 3 year old likes being naked and is very curious about other people’s naked bodies. Because genitals are usually covered, they are especially interesting. They will notice differences in bodies and ask “Why?” or “What’s that?” Body functions, especially going to the toilet, are also of great interest. Many children will touch their own genitals for comfort or pleasure and this is normal and healthy.

As part of their fascination with bodies, they might want to look at and touch other kids’ and adults’ bodies. Many children may start to play ‘you show me yours and I’ll show you mine’ out of their curiosity with their own and others’ bodies. Gentle reminders about private body parts and rules around touching are helpful at these times.

They may also ask lots of questions about bodies and where babies come from. A simple, accurate explanation like, “Babies grow in a special place inside the body called the uterus” is usually enough.

What do I say when my child asks “Where did I come from?”

You could ask them, “What do you think?”. This serves a few roles – it clarifies what they are asking, it gives you some time to think and gauge your answer accordingly, and it shows that you are happy to have the conversation. Usually, telling a very young child that the baby starts as a tiny egg inside the mother’s body is enough.

Four and 5 year olds can understand that a baby grows in the uterus, and that you need a sperm (like a seed) and an egg (a very tiny egg) to make a baby.

What do I do when I find them ‘playing doctors’?

It’s common for kids to be curious about each other’s bodies and ‘playing doctors’ can be a way that they explore their own and others’ bodies. Sometimes this can turn into ‘naked play’ and ‘you show me yours and I’ll show you mine’. If the children are a similar age and they all look happy (rather than distressed) then tell them to get dressed and keep their clothes on when they are playing. If you have a good book handy (see page 108 for a useful list) try telling them that it looks like they are very interested in bodies and you’ll get a picture book that explains the body. You will need to tell the other child’s parents. They may do things differently in their family, but they will want to know.
### What you can do

- Continue teaching that every part of the body has a name and its own ‘job’ to do. Read picture books that name body parts and explain rules about touching. (See page 108 for a list of useful books for young children.)

- If children are touching their genitals in public places, distract them or tell them that it is something to do at home, in private.

- Teach your children that their “No” will be respected, whether it’s in playing and tickling or hugging and kissing. Stop when they want you to stop. Don’t force your child to kiss or hug. This supports them to learn about consent and teaches them to listen to early warning signs that help them stay safe.

- A child’s foreskin should never be pulled back by force. Once the foreskin is easily pulled back, teach your son how to do this as part of normal washing in the bath or shower. Most boys will be able to pull their foreskin back easily by age 5 but others may not be able to until they are in their teens.

- You can let your children know when you want privacy or do not want your body looked at or touched. This is good modelling of how to request their own privacy and reinforces messages of consent.

- Talk to your child about the difference between ‘good’ and ‘bad’ secrets and that no-one should ask them to keep a bad secret. (See pages 48–50 for more information on how to keep children safe from child sexual abuse.)

- Does your son want to wear a tutu? Does your daughter want to be Superman? Let them be themselves. Rigid gender stereotypes has led some people to worry that this type of normal role play is a reflection of a child’s sexual or gender identity when it is simply part of important imaginative and creative play. (See pages 17–19 for more information on stereotypes.)

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**We enjoy watching YouTube about ‘conceiving to birth’ and books about the human body are always around my house. My children are very familiar with body parts and functions.**

– Parent of boy 1 and girl 4
5 to 9 years

What to expect

By the age of 6, most children will show an interest in how babies are made and may ask how the egg and sperm get together, which will involve a simple explanation of sexual intercourse. From about age 8, if they are curious they are likely to look it up online, so it pays to get in first. Talk about how you want them to come to you with any questions, rather than going online.

Children are likely to hear stories about sex in the playground, and pick up that sex is a ‘rude’ topic. They may still ‘play doctors’ or ‘you show me yours and I’ll show you mine’ but are usually more likely to stop when adults pass by. They need to know that some parts of the body are private and remind them about rules about touching. (See page 106 for a useful list of books.)

Around age 8, children begin forming new friendship groups based on common interests. Children who have different interests and ways of expressing themselves may have more trouble fitting in and will need support with this.

Some of the messages children receive about how girls should dress or how boys should ‘man up’ can affect their wellbeing. Children might start to be critical of boys who like ‘girl’ things and girls who like ‘boy’ things. Many children (and adults) do not fit current feminine and masculine stereotypes and it is unfair to have rules about who can like what. (See pages 17–19 for more information on stereotypes and expectations.)

What should I do when my child touches himself/herself?

Masturbation (touching your own sexual parts for pleasure) is normal and healthy for children and can start long before puberty begins. Children (and adults) can find it comforting and enjoyable. If they are doing it in a public place, try to distract the child or tell them that it’s something to do in private.

Parents and teachers should only be concerned if a child is masturbating very frequently, in public and private places. This should be further investigated. The Sexual Behaviours in Children & Young People resource listed on page 106 offers a traffic light framework for age related sexual behaviours and how to identify and respond to them.
What you can do

- Use books to start the conversation about how babies are made. If the children haven’t asked, start with, “Have you ever wondered how you were born?” (See pages 26 and 33 for ways to answer this question.)

- Some children at this age may feel modest. Respect their privacy in the bathroom.

- Make sure all children know that they can say “No” to touching that they do not want (including from family members).

- Talk to your child about the difference between ‘good’ and ‘bad’ secrets or surprises and that no-one should ask them to keep a bad secret. (See pages 48-50 for more ways to keep your child safe from sexual abuse.)

- Ask your child to make a list of people (both inside and outside of the family) they trust and feel safe to talk to if they need help.

- Some girls will begin breast development and periods by age 8 or 9. Having conversations with your kids about ‘growing up’ and changing bodies helps to prepare early starters.

- Do your relatives assume your boy loves sport or your girl loves frilly dresses? Is your son allowed to play with dolls? Restricting what our kids can and can’t do based on their gender only limits what they can achieve (and we want to maximise their potential). Parents have the most influence – start challenging gender stereotypes now (if you haven’t already). (See pages 17–19 for more information on stereotypes and expectations.)

- If your child feels they do not fit in because of gender stereotypes, remind them that the way of being a boy or girl in your town or their school is only one way to be a boy or girl. Focus on the qualities of being a good person, and find examples of different types of people.

My daughter knew from the age of 2 that to make a baby you need a sperm and an egg. When, at 6, she asked how the sperm got to the egg, I had a little panic attack in my head. I hid my panic as best I could and said, “The sperm comes out of the penis and goes inside the vagina.” My daughter’s response was, “OK. Can I have some toast please?”

- Parent of girl 7
Puberty can start as early as age 8. Often it starts at age 10 or 11 and continues past age 18. Girls usually start earlier than boys. At around age 9 or 10, children might notice their friends’ bodies, or their own, changing.

As children turn 10 or 11 they often worry “Am I normal?” Children start to compare themselves (and their families) with the rest of the world. Girls might worry about breast development and periods. Boys often worry about penis size and wet dreams. Nearly one in two boys experience temporary swelling of the breasts. Extra hormones can increase a child’s sexual feelings and they may start to masturbate more often. This is all normal. These can be embarrassing topics to ask about so do not expect that your children will come to you. Raise the topic, leave books around and tell stories about your own puberty. (See page 106 for a list of useful books.)

Children may feel attracted to others. This might be played out in ‘who loves who’ games and some children will be very interested in having girlfriends or boyfriends. And many children will have no interest at all.

Gay, lesbian and bisexual people often recognise at an early age that they feel ‘different’, but it may take years before they can put a name to it. If you openly challenge negative comments about being LGBTI it will help your child if they are privately wondering about their own sexuality.

Friendships will be the most important concern at this age, and children often enjoy learning skills for how to get on with each other. Some children may start communicating with friends through social media and will need guidance on how to have respectful (and safe) friendships online.

One of the strongest feelings for most children will be the desire to fit in. The changes that they are experiencing or watching their peers go through are enough to make a child feel self-conscious. Many children will compare their bodies to others that they see in the media and in real life. Most media images are unrealistic and over-sexualised and can have an impact on a child’s view of themselves and how they think they should look and act. Young people need guidance on how to interpret these media messages.
What you can do

- Providing information about puberty BEFORE it happens is important to help your child understand what is happening.

- Puberty is not just about physical changes to the body. It is also a time of huge emotional and social change. Let your child know that their brain is changing and growing and this can affect their emotions and interactions with friends and family. Reassure your child (and yourself) that this is a normal part of puberty and that they can talk to you about how they are feeling.

- Tell your children about when you went through puberty – it can be reassuring for them to learn when you started noticing changes and it gives them a clue about when it might start for them. Talk about how you felt, and how you managed periods or wet dreams.

- Try to be positive about puberty and celebrate that this is the time that your child is starting to grow from a child to an adult. Being positive and open helps to remove embarrassment and encourages open communication.

- Give them love and support if their friends start changing. Acknowledge it can be tricky when people are at different stages – when friends suddenly go boy or girl crazy and no longer want to play on the swings with them at lunchtime. Having crushes can change friendships, but that is a natural part of growing up.

- Talk to your child about the apps and games they are using or try them out yourself (especially if they have online chat options). Remind them that they can come to you if they come across anything upsetting online. (See pages 52–58 for tips on keeping your child safe online.)

- Provide opportunities to discuss the differences and similarities that your child notices about themselves and your family. Encourage respect for diversity and remind your child that respecting differences doesn’t mean that you have to agree with them.

- Talk to your child about the unrealistic images on social media and TV. Teach them to determine what is real and what is filtered, photoshopped or sensationalised.

- Repeat topics and previous conversations – little and often is the best way to create open communication.

- School programs help normalise puberty so that children who have started to develop are not singled out and made to feel self-conscious. Ask your school what they are doing in this area.
What do I do if my 11 year old has been looking at porn?

Don’t panic. Accidental or intentional, a one-off look at porn is not uncommon. While you may prefer it didn’t happen, children are curious, and it can be exciting for them. So, we don’t need to make them feel ashamed or bad about doing this. It’s ok to feel worried or anxious about this; you may need to give yourself time to calm down and collect your thoughts. Try to turn it into a ‘teaching moment’. Tell them porn is meant for (some) adults and it can be a problem because it doesn’t show what real sex and relationships are like. And it gives kids wrong ideas about what sex is, too. If it’s violent porn then you need to tell them that violence is wrong. (See pages 57–58 for more information on how to talk to your kids about porn and other sexually explicit material.)

My main concerns are around pornography and how easy and early they could be introduced to this. I can control what’s in my home but with mobile devices and Wi-Fi, as they get older, it’s getting harder to control what they see.

– Parent of boys 5, 8 and 10
How do I explain how babies are made and born?

“To make a baby you need a seed (sperm) from a man’s body to join with a tiny egg (ovum) from a woman’s body. This is how the egg and sperm get together – when two adults feel loving towards each other, they can really enjoy touching each other’s bodies. Sometimes they decide to have sex. In sexual intercourse, a man’s penis gets stiff and a woman allows the man to put his penis inside her vagina. It feels good for both of them. The sperm comes out of the penis and goes up into the vagina. Sometimes (not always) an egg from the woman connects with a sperm, and that might develop into a baby.

The egg that has joined with the sperm travels to a place in the woman’s body called the uterus, where it settles in to grow. It will keep growing for about nine months – this is called pregnancy. When the baby is ready to be born, the muscles in the uterus contract and push the baby out through the vagina, which stretches so that the baby can get through. That is how the baby is born.”

I feel like one of the really important things is to be totally honest because I don’t want her to grow up and think, “Gee my mum led me to believe that babies were born through people’s bellybuttons”.

– Parent of girl 9

How do I explain the different ways people can have babies?

“There are different ways a sperm and an egg can meet:

- a man and a woman can have (penis-in-vagina) sex
- a doctor can help in a process called in vitro fertilisation (IVF) – a sperm and an egg can be taken from the man and the woman and joined in a dish. This fertilised egg is then put into the woman’s uterus to allow the baby to grow.”

“There are different ways people can have babies or become parents:

- sexual intercourse – when a man and a woman have (penis-in-vagina) sex
- adoption – when a baby is born and given to another person or family to raise
- IVF – when a sperm is joined with an egg outside of the body and then put into a uterus to grow
- surrogacy – a woman grows the baby in her uterus for another person or family
- stepchildren – when someone has had children with one person and then starts a relationship with another person, these children become the new person’s stepchildren.”
9 to 12 years

How do I explain sex beyond ‘making babies’?

“When people are older their sexual feelings can get even stronger and sometimes they want to share those feelings with someone else. Sometimes people have sex to show love and affection. Sometimes a man and a woman have sex to make babies. People also have sex because it feels nice and exciting.

Some people call having sex ‘making love’ because it is a way you can share very strong feelings and private moments with another person. It is something for older people to do, not children.

When a man and a woman have sex, it does not always make a baby – that only happens if the man’s sperm and the woman’s egg are in the right place at the right time. If a man and woman want to have sex, but they do not want to make a baby there are things they can do. For example, there are special medications (not just any medicine does it) they can get from the doctor that will stop the sperm and egg joining up.”

What do I say if my child asks how two women or two men (same-sex attracted people) have sex?

For your 9 year old you might like to say: “People have sex to show love and affection. They have sex because it feels nice and exciting. When two adults (of any gender) feel very loving or attracted towards one another they can really enjoy touching each other’s bodies in many different ways. This can happen between people of the same sex or other sex. Sex can mean different things to different people – it can mean anything people do together to give each other sexual pleasure.”

For your 12 year old, you might like to add: “Sex is more than just penises and vaginas – it is hugging, kissing and touching genitals too. It can include oral sex and anal sex.”
Puberty

You may find your child has lots of questions about puberty, or you may find that you need to start the conversations. Providing information before puberty happens is vital for your child to understand what is happening to them. Remember – it’s not about one big puberty talk, it’s about offering bits of information when teachable moments arise (and you may have to help those moments to happen). Here are some examples of how to answer common puberty questions.

What is puberty?

“Puberty is when your body starts to change from a child’s body to an adult one – a body that is (usually) able to make a baby. It will happen gradually over a number of years. Everyone is different. Puberty can start anywhere between the ages of 8 and 15, but often it will start around the age of 10 or 11 and continues past 18.”

What usually happens during puberty?

grow taller

hair on upper lip and chin

gain weight

erections

wet dreams

brain changes and develops

pimples and acne on face, neck, chest and back

voice deepens

testicles start to make sperm

hair grows in armpits and around genitals

penis grows

feelings of attraction towards others

ovaries start to release eggs (ova) and menstruation begins (periods)

gain more independence and responsibility

mood changes – feeling emotional, annoyed, giggly, excited

breasts grow

hips widen

sweat more and get body odour
Ages and stages

What are erections?

“An erection is when the penis gets hard and sticks out from the body – this happens when extra blood flows to the penis. Boys get erections from the time they are babies but as they get older it happens more (especially during puberty). Boys can get erections because they are nervous or excited, but sometimes it just happens for no obvious reason! This can be embarrassing, but other people don’t usually notice it as much as the boy does.”

What are wet dreams?

“During puberty, the testicles start to make sperm and semen, and sometimes while sleeping this semen leaks out (about a teaspoonful). This might be because of a ‘sexy’ dream or because the penis was stimulated when it rubbed against the sheets. For some boys it happens once or twice; for others, more often. Girls can have ‘sexy’ dreams too; they may find that their vagina is more wet than usual when they wake up. If you have wet dreams, it is normal. If you don’t have wet dreams, that’s normal too.

You may find you need to wash your underwear, pyjamas or bed sheets after a wet dream. You might want to tell a parent, you might not. If you don’t want to tell, you can just take the underwear, pyjamas or sheets off and put them for washing.”

What is body odour (BO)?

“During puberty you will probably start to sweat more and sweat that dries on your body may begin to smell. You may need to have more showers, use deodorant and wash your clothes more often.”

What are periods?

“A girl will usually begin her periods about two years after her breasts have started to swell. When she reaches puberty, her ovaries start to release an egg (called an ovum) about once a month. The egg travels from the ovary along a tube towards the uterus. Every month the uterus gets ready for the egg to arrive by building a thick, soft lining. If the egg does not connect with a sperm (i.e. get fertilised), the egg and the lining of the uterus will pass out through the vagina. It looks like thick blood and is called a period. Once a girl starts releasing eggs (which can be before she gets her first period), she is able to get pregnant if she has penis-in-vagina sex.”
What do I use for my period?

“There are a few options for soaking up the period blood as it passes out through the vagina. Some of the methods include:

- pads – these stick on to the underwear and come in lots of shapes and sizes
- tampons – which go into the vagina
- period underwear – special underwear designed to soak up period blood. This kind of underwear can be expensive initially but can be washed and reused
- reusable cloth pads – made from cotton or bamboo, these pads can be washed and reused
- menstrual cup – a plastic cup that goes into the vagina and is taken out, washed and reused. It can take a little getting used to
- some folded up toilet paper/tissue – if you get stuck without any of the things above.

Each method has pros and cons and it can take some experimenting before you find the method that works best for you.”

Girls often want to know:

- What will I do when I get my first period?
- How will I know when it is coming?
- What will happen if I get my period at school/ during a sleepover/on camp?
- How do I dispose of pads or tampons in the school toilets?
- Do tampons hurt?
- Can a tampon fall out?
- Can I go swimming?
- Do I have to use tampons?
- How much blood comes out?
- How often do I have to change pads/tampons?
- Will I get blood on my shorts?
- Will other people be able to tell if I have my period?

My mum was very open. She celebrated menstruation with a gift and a special dinner out. I will do the same with my daughter.

– Parent of girl 4 and boy 6

When my periods started, I was given an information booklet and told that I couldn’t have sleepovers anymore. I don’t want it to be like that for my daughters.

– Parent of girls 9 and 10
Puberty

Top tips for helping girls manage their periods

- Show tampons, pads, period knickers and menstrual cups before a first period. Show how they work using coloured water. This is also a good way to show how much blood normally comes out during a period (only a couple of tablespoons over 3 to 5 days) and how much the products can hold. It is often possible to get free samples and starter packs online.

- Most young girls use a pad for their first periods. If they want to try a tampon, try those with a special tube (called an applicator) to help slide it into place. It’s good to practise using tampons at home first.

- Create a special period pack – a pencil case or wallet with some pads or tampons, a spare pair of knickers and a plastic bag (for used knickers and pads).

- Point out that some toilet cubicles at school should have a disposal bin. Discuss what to do if a bin is not there.

- Talk about who to go to at school if clean underwear, a pad or tampon is needed (trusted teacher or adult, school nurse, friend).

- Show how an ‘emergency’ pad can be made out of toilet paper.

- Show how to soak blood-stained undies in cold water at home before putting them in the washing machine.

- Explain that during the day, a pad or a tampon needs to be changed every 4 to 6 hours and help make a plan for days at school or out of the house. Help them decide the best way to manage their period at night time.

At my school we hold a ‘girls circle’ afternoon for Year 6s that includes: education about menstruation and how to management it; staff and community members sharing their ‘first period’ stories; and small group Q&A time. The aim is to normalise this part of puberty and provide support.

– Deputy Principal and parent of girls 13 and 16
As children reach puberty and their bodies change, they can become extremely self-conscious. The opinions of friends and classmates become more important as they develop more independence from you. Many young people will start to use social media apps (if they haven’t already). Media role models and online friends (that they may not know in real life) can also have significant influence on young people’s attitudes and behaviours.

Along with this independence, comes a new awareness of their own thoughts and feelings. They might want more space to work things out in their own way. They may have trouble explaining what they are thinking and feeling, which can be extremely frustrating for them and the people around them.

The way the world sees and responds to your child changes too. A girl developing breasts may find herself getting sexual attention she’s not ready for. Children who go through puberty earlier and appear older are able to access the adult world more readily. Children who are different to gender norms or transgender may start to feel more distressed by the stronger societal pressure to fit in.

Crushes that children have had in the past may begin to turn into something more like sexual attraction. Some will begin to wonder (if they haven’t already) about when they can have a girlfriend, boyfriend or partner. This is a normal, healthy and exciting part of growing up. As sex hormones surge, so do sexual feelings and they may (re)discover masturbation. Some young people become sexually active (deep kissing, close touching) by age 14 and a small number will start having sexual intercourse. Or, your child may have NO interest in romance – there are lots of ways to learn and enjoy life without partnering up.

I would love to get ideas on how to better teach and support my kids to make confident and considerate decisions. I want to encourage my teenagers to feel confident about their own wishes and boundaries, so that they don’t feel pressured by peers’ experiences and expectations, and they don’t put pressure on others either.

– Parent of boys 4 and 11 and girl 8
What you can do

- Don’t stop offering hugs if this has been a part of your relationship. They need you now more than ever. Respect their wishes if they look reluctant, but keep offering.

- Continue conversations about respectful relationships (with family and friends) and explain that the same qualities are important in romantic relationships: trust, respecting boundaries, freedom to be you and fun. Talk about the pros and cons of being in a relationship. Talk about all the ways you can enjoy life without partnering up. And discuss what they might do if they were having difficulties in a relationship. (See pages 15–16 for more information on respectful relationships.)

- Talk to your child about who they ‘follow’, ‘like’ and chat to on social media. Remind them how important it is to be able to determine what is real and what is not when it comes to information, images and people online. Make sure they know that online communication and social media posts need to be respectful too. (See pages 52–56 for more information on online behaviour.)

- Fathers often talk about ‘losing their little girls’ as they begin to grow up. If dads can find a common interest with their daughters, this can help keep the connection alive.

- Discuss with your child who they would talk to if they needed an adult’s ear but were reluctant to come to you. Show them reliable websites to go to for support and information too. A list of resources and services can be found at the back of this book.

- Talk about different situations so that they have real-life skills and knowledge. For example, you could ask, “What advice would you give if your friend was getting lots of unwanted texts?”

- Revisit the ‘how-to-make-a-baby’ conversation. Make sure they know that a girl can get pregnant the very first time she has sex – even if they do it standing up, during her period or if the boy withdraws his penis before he ejaculates. Explain (or remind) them that contraception is needed to prevent a pregnancy. (See page 42 for how to explain contraception.)
What do you hope for your child’s first experience of sex?

Take a deep breath and start to think about talking about sex, not in a ‘when you grow up and get married and make babies’ kind of way, but about your child’s first experience of sex. Many parents hope that their children will be older, sober, in love and in a respectful relationship. The hope that it will be their choice rather than feeling forced into it and that they will use contraception. The list goes on!

Think in terms of how you want their first sexual experience to be, rather than closing your eyes and just hoping they don’t do it. This way your conversations are more likely to give them what they need – guidance about values, feelings and safety. Ask your kids to think about what they want their first experiences to be like. This can help them mentally and emotionally prepare to have a positive experience. If they can talk about their hopes with you, they will be more likely to be able to voice them to a sexual partner. Research shows that educating kids about sex actually delays their first sexual experience and helps them make safer choices when they do decide to have sex.²⁸ (See pages 81–96 for ways to prepare your teens for health and safe sexually active lives.)

In Western Australia, 52% of high school students have had sexual intercourse.¹⁰ Sexual behaviours reported by Year 10s include:

- 68% deep kissing
- 45% giving oral sex
- 43% vaginal sex

I am going to be really open and honest with my kids. I want them to be able to come to me and talk about anything. Sex is not a bad thing, it’s a good thing. I want them to know it is meant to be pleasurable.

- Parent of girl 4 and boy 6
How do I explain contraception?

“Contraception is something you do or use to prevent a pregnancy. If a man and a woman want to have sex and they don’t want to have a baby there are things they can do to stop the sperm and egg joining up (which means there is no pregnancy). Contraception can be many different things:

- a tablet that is taken each day
- an injection every few months
- an implant that goes into the arm
- a small device that goes inside the vagina or uterus
- tablets that are taken in the first few days after sex
- a condom (a special cover that is rolled over the penis).”

(See pages 92–93 for more detailed ways of explaining the different forms of contraception to young people and where they can go to access contraception.)

What do I do when my child says things like, ‘That’s so gay’ or ‘You throw like a girl’?

“You may not have meant to be hurtful, but when you say ‘That’s so gay!’ (or ‘You throw like a girl’) you are saying that being gay (or being a girl) is bad or stupid, and that is hurtful. Language like this is unacceptable, there are many other ways to express your feelings about something without being disrespectful and hurtful to others.”

There are plenty of parents who haven’t talked with their kids about sex and values, or going on the Pill, or anything like that. So, we really need to be able to say to our kids, well, we haven’t talked about this so far, but we think it is really important, and here’s what we want you to know...

– Parent of girl 15
A young person in this age group has two important tasks:

- to become an independent person who is separate from their parents
- to develop a sense of who they are.

Part of the task of discovering “Who am I?” for a young person is to get their head around their sexuality. Not necessarily the act of sex, but about feeling attractive, loved, popular, good enough and like they belong. Their assumptions about what’s normal, common and good influence how they feel about themselves and how they treat others.

Friendships at this age mean more than they ever have. Friends often determine what is ‘acceptable’ behaviour and this is also true for what is ‘acceptable’ sexual behaviour. Despite all the bad news that we hear, first romantic relationships can have a very positive effect on your child’s development. They are learning about being close with someone. Young people in this age group most often report that their close romantic relationships are positive and satisfying.²

Young people highly value the sexuality education they get from school, but say it is too biological. They want more opportunities to talk about feelings, love, what’s OK and what’s not OK and solving common relationship dilemmas. They value and want to know their parents’ beliefs about sex and relationships.²

Right from the word go we tried to develop bedtime rituals that will last into high school years. It’s a great time for sharing and catching up on the day.

– Parent of girl 10 and boys 13 and 16
**What you can do**

- Sexuality is only one part of the whole person. Help young people keep it in balance by taking an interest in their sports, schooling, friendships and media, as well as their growing interest in looking good and going out.

- Staying connected to and feeling loved by their family remains extremely important. Even if it is a few minutes here and there, finding little moments to connect and check in is vital.

- Having a sense of a future, with goals and life to look forward to, makes looking after themselves important. Talk to your child about their aspirations and help them set goals.

- Who does the emotional work in your family? Are both partners involved in relationship problem solving? Do you set a positive example around conflict resolution? Help kids see that in respectful relationships both people share the load.

- Find old photos of your teenage years. Show off the hairstyles and the clothes, but most of all use it as a conversation starter to talk about how you felt about your appearance, relationships, parents and sex. Ask your teenager if they think things are different for young people now.

- Tell your child about contraception and using condoms. It won’t encourage them to have sex. If you feel conflicted, your teenage children are old enough to understand an apparent contradiction: “I care about you, and even though I don’t want you to do this, I do want to make sure you look after yourself and others.” It’s much more effective than telling them to just say no. (See page 92–93 for more information on contraception.)

- Talk about ways for them to handle different situations, like parties with alcohol and other drugs. The Alcohol and Drug Support Line provides good information and advice. (See page 102 for a list of reliable services and websites.)

- Although we want to encourage our kids to come to us with any medical concerns, some young people worry about their parents’ reactions and judgement, which can stop them seeking help at all! It is important that they know that there are always options. If they are uncomfortable seeing the family doctor, they might need help finding alternatives. At age 15, show them information online about how to get their own Medicare card. And if you use My Health Record, explain to them that their account becomes private at age 14.
How do I help my child to have respectful (romantic) relationships?

The topics of romance, lust and love (not to mention unrequited love!) are complex and require sensitivity, but the answer isn’t to avoid them altogether. The good news is, all of the great work you have done teaching your child how to be a kind, caring and empathetic friend has already paved the way for conversations about what makes a respectful romantic partner.

Many parents have wisdom about respectful (and disrespectful) relationships but feel insecure about their ability to talk to their kids about it. What do you wish you could go back and tell the 16 year old you? Can you share some of the lessons you have learnt with your teen? You might like to share some of your own stories of how you fell in love or how you had your heart broken, how a relationship you had was respectful or disrespectful. And don’t forget to ask questions too. “What qualities do you admire in a person?” “How do you know if someone really cares for you?” Remember that between 5 and 20% of young Western Australians identify as same-sex attracted so try to keep your conversations inclusive by referring to a ‘partner’ rather than presuming your teen will have a boyfriend or girlfriend.

There is no denying that the media can have a very negative impact on the way young people learn about relationships, but the media can also be used to your advantage. By talking about shows, songs and social media posts you can broach relationship issues in hypothetical ways that help to make conversations less personal or confronting for your teen. (See page 15 for more information on respectful relationships.)

How do I help my child with their first relationship break up?

It doesn’t matter who you are or how old you are, it’s never easy to deal with the feelings and thoughts following a break up with someone you care about.

Kids Helpline (1800 55 1800) has some terrific advice for young people (and their loving parents), such as encouraging young people to talk with supportive people, to keep busy (make a plan), to do things they enjoy and to avoid social media for a while.

A shoulder to cry on and lots of love and offers of hugs can be all they need to know that you are there to help them get through though this.
In 2018, a national survey was conducted online with Australian Year 10 to Year 12 students. The following statistics are from the WA report.¹⁰

### Some WA stats

**Most students have engaged in some form of sexual activity. Year 12s report the following sexual behaviours:**

- Deep kissing: 83%
- Touching partner’s genitals: 76%
- Touching own genitals: 95%
- Giving oral sex: 65%
- Vaginal sex: 55%
- Anal sex: 22%

**Year 10 to 12s self-identified sexual orientation:**

- Heterosexual or straight: 74%
- Bisexual: 15%
- Gay or lesbian: 5%

**The last time vaginal sex took place, the contraception used was:**

- The pill: 41%
- Condom: 49%
- Withdrawal: 21%

**The last time vaginal and/or anal sex took place, it took place at:**

- Home: 33%
- Partner’s house: 41%
- Friend’s house: 13%

**In relation to sexting, in the previous two months:**

- Sent a sexy written text: 45%
- Received a sexy written text: 58%
- Sent a nude/nearly nude pic: 36%
- Received a nude/nearly nude pic: 50%
- Received pic from boyfriend/girlfriend: 45%
- Received pic from friend: 47%

**Feel confident or very confident to talk about sex with:**

- Mother/female guardian: 25%
- Father/male guardian: 14%
- Doctor: 39%
Keeping children safe
Keeping children safe

Sadly, sexual abuse of children is common across many cultures and communities and rates in Australia continue to rise.\textsuperscript{11} Children are usually abused by someone they know, even relatives and family friends. All kids of all ages and genders are at risk. Most abusers pay special attention to the child and ‘groom’ them until a normal, friendly relationship can be manipulated into a sexual one.

We can learn from stories of adult survivors of child sexual abuse. They say that as a child, they didn’t tell anyone of the abuse because they were too scared. The abuser would threaten harm to them or their family, or the child felt there was no-one they could trust to talk to. The child also believed that they were somehow responsible for being abused.\textsuperscript{12 13}

When parents take the lead and talk about bodies, listen to children’s worries and respect their concerns, they are showing their kids that it’s safe to come to them.

**What is child sexual abuse?**

Child sexual abuse is when an adult or someone older or bigger uses a child for their own sexual pleasure. It includes many different activities such as:

- sexual touching of the child or adult
- oral sex, vaginal or anal penetration
- indecent exposure
- exposing children to sexual acts or pictures
- enticing children to engage in sexual internet chat (e.g. through games).

Rather than just expecting my daughter to give her a hug, my friend always asks, “Would you like a hug?” I love this really simple way of teaching consent.

- Parent of girl 7

**Safety checklist for your child**

- It is NEVER OK for anyone to touch the private parts of my body and ask me to keep it a secret (even if it is someone I know or I like).
- It is NEVER OK for anyone to ask me to keep a secret if it makes me uncomfortable, or I know it’s wrong (even if it is someone I know or I like).
- I CAN SAY NO to touching that is NOT OK. I can say “No!” or “Don’t do that” or “I am going to tell”
- If I have a problem, I will tell an adult I trust.
Keeping children safe from child sexual abuse

For younger children

- Encourage children’s curiosity about their own bodies. Teach them the correct names of all their body parts. If you talk comfortably, it will be easier for them to tell you their concerns.

- Explain that no-one has the right to touch or ask to see their private parts without good reason (such as when they are at the doctors).

- Explain that no-one has the right to show their private parts.

- Tell them they can refuse to do or look at anything with an adult or child that they feel is wrong or frightens them. We can encourage them to say “No”; however, it is hard for a child to say no to a bigger child or an adult. Encourage them to tell you whenever they are worried about what others want them to do.

- Explain that sometimes adults do things that are not OK and they should tell you if this happens.

- Respect your child’s wishes to not kiss or cuddle other people.

- Many abusers make children keep their abuse a secret, often using threats. Teach them the only OK secrets are those that give someone a nice surprise (e.g. a surprise birthday party).

- Work out with your child which key people (both inside and outside of the family) they can trust to ask for help if they are frightened and you aren’t there.

- Think about who you trust to look after your children or to be alone with them.

We are reading books on being the ‘boss of your body’ like Everyone’s Got a Bottom.
– Parent of boy 2 and girl 5
Keeping children safe from child sexual abuse

For older children

- Know about your children’s daily world – where they are and who they are with.
- Know how they use the internet – what websites, social media apps and games do they use? Be aware of the games that have text and video chat features.
- Talk to them about the kinds of things they share online. Online predators can turn ‘innocent’ chat into sexual chat and image sharing very quickly.
- Show them how to share their location on their phone with you (and ensure that they aren’t sharing their location with people they don’t know and trust).
- Show them how to send a ‘coded’ text message or phone call if they need a way out of a tricky situation. For example, your child’s friends are pressuring them to get in the car with someone they don’t feel comfortable with. They send you a message with the code word and this is your signal to phone them and tell them that for family reasons they have to come and get them immediately.

How can schools support this?

Protective behaviours lessons are part of the Health and Physical Education Curriculum and are mandated in WA schools. Find out what your child’s school is doing and support their program by continuing conversations at home.

Safe4kids.com.au is a WA organisation that specialises in child protection education. The preventative program is designed to combat child abuse by teaching children protective behaviours and body safety.

Where can I get help for someone that has been sexually assaulted?

There are many support services available to people affected by child abuse. (See pages 102 and 104 for details of support services.)

In cases of recent sexual assault, go to your nearest hospital or doctor. The Child Protection Unit at Perth Children’s Hospital has a specialised service for children and their families. The Sexual Assault Resource Centre (SARC) has a 24-hour emergency helpline (08) 6458 1828 or 1800 199 888 for people from 13 years and older.
Family and domestic violence is now recognised as a serious and widespread problem in Australia with a significant amount of young people experiencing or living with violence.\textsuperscript{14} Violence is not only physical. It includes psychological, economic, emotional and sexual violence and abuse, and a wide range of controlling and intimidating behaviours.

Research shows that:

- on average, one woman a week and one man a month are murdered by a current or former partner\textsuperscript{14}
- 1 in 6 women and 1 in 9 men were physically or sexually abused before the age of 15\textsuperscript{14}
- 1 in 6 women and 1 in 16 men have experienced physical and/or sexual violence by a current or previous partner since the age of 15\textsuperscript{14}
- more than two-thirds (68\%) of mothers who had children in their care when they experienced violence from their previous partner said their children had seen or heard the violence.\textsuperscript{14}

These social problems are ultimately preventable. To prevent violence we need to understand it and talk about it. Popular culture, social media, advertising, peer groups and our own families can expose children to harmful message that stereotype men and women and support violence. These messages can limit young people’s ability to see alternatives and build the skills they need to create respectful and equal relationships of their own. We need to be sure our children understand what a respectful relationship looks like so that they can recognise signs of a disrespectful relationship and seek help if needed.

**What you can do**

- The qualities of a respectful relationship are largely the same for all kinds of relationships (friendships, family relationships, romantic relationships) so these conversations can start at a very young age. Talk to your child about the qualities that are important to you. (See page 15 for more on respectful relationships.)

- Point out examples of respectful and disrespectful behaviours in the media and discuss these with your child. Ask them, “What do you think you might do in a situation like this?”

- Ask your teen, “What do you think is important in a relationship with a girlfriend/boyfriend?” “How do you want to be treated?” “What kinds of behaviours show you that someone truly cares for you?”

- Make sure your teen understands what makes a respectful sexual relationship. Talk to them about consent and the law. (See pages 81–96 for ways to prepare young people for healthy sexually active lives.)

- Show them where to find help and support if needed. \url{1800respect.org.au} is a 24-hour counselling and support service for people affected by family and domestic violence and more services can be found on page 101.
A recent international survey involving 10,000 children aged 9 to 16 asked, “What bothers you online?” Children aged over 13 said that other people’s behaviour (usually friends and peers) was the most troubling thing. “Other people saying mean things” was the number one concern among children as they reached high school. Younger children were more concerned about seeing pornography. Violent news content was also highly disturbing to them.\(^4\)

Kids’ online activities change as they get older, and the proportion of children identifying things that bother them online rises quickly between the ages of 9 to 13. Children and teenagers will look up information about growing up, sexual development and/or sex. Teenagers want to belong and connect and social media is central to their cultures. They may have close calls with ‘creeps’ who try to make contact with them, but most of their contacts and challenges will be with local friends.\(^4\)

**What if my child is going on a play date or a sleepover – how do I let them know our rules for keeping safe online?**

Here is a suggestion for how to start a conversation with the other parent/s:

“I’ve heard lots of stories about kids coming across porn online, so we have some rules when using technology:

- online play must be in a public place – no iPads or phones in bedrooms
- if a device is needed to watch a movie in their bedroom, download the agreed movie and shut off the Wi-Fi (and discuss what movie ratings you let your kids watch)
- if something pops up on the screen and they are not sure what to do, they can come to an adult for help (and they won’t get in trouble).”
Online behaviour and safety

What you can do

- Start the conversation about respectful behaviour online.
- Build your child’s empathy by asking how they think they would feel if an embarrassing photo (pic) of them was posted, or a nasty comment made.
- Teach kids to say kind (rather than unkind) things online.
- Discuss with them how being the subject of harassment and bullying is not the victim’s fault.
- Ask how they stay safe online.
- Make sure your child knows not to give personal details online (even a photo in school uniform can give away their location).
- Ask if they know where to go for help, where to find safety advice, how to use privacy settings and how to use the report or block functions on services they use.
- Help them bookmark the good stuff and block the bad stuff online. Tell them what is OK and not OK to share.
- Discuss with them how no photos or videos can be taken of someone else and posted online without that person’s consent.
- Tell them not to use their phones to take photos or videos of other people in private spaces such as bathrooms and changing rooms.
- If your child tells you they have seen porn or violence on-screen – remain calm. Praise them for telling you about it. If you explode and ban all access they won’t tell you next time.
- Visit esafety.gov.au for lots of parent-friendly resources and advice on internet safety.

It’s so easy to come across things (online) by accident – even with all of the safety filters. I think the best thing we can do is make sure our kids can come to us if they come across anything that worries them.

- Parent of girl 7

Kids’ rules for online communication

- No sharing personal details (e.g. your school or address).
- No unkind messages.
- No photos (of any kind) to be taken or shared without a person’s knowledge or consent.
- No sending sexual comments, pics or videos.
- If you receive sexual content, tell a trusted adult and delete the content.
- If you come across anything worrying online, tell a trusted adult.
Respectful relationships and sexting

Sharing sexual images, messages and videos are other ways in which young (and older) people explore being sexual with another person. This is often referred to as ‘sexting’ but many young people don’t use this term (or consider things like sharing a porn clip in their group chat with friends as ‘sexting’). In most cases, the pictures stay private because the couple are respectful of one another’s privacy. Things go wrong when people (often girls) are pressured into sending a ‘sexy selfie’ or ‘nude’. In those circumstances the image is more likely to be shared without consent, presumably because the ‘receiver’ has already shown they are less respectful of the sender’s boundaries.

What if someone sends an unwanted ‘sexy pic’ to your teenager?

If your child is sent unsolicited nude or sexual pictures, messages or videos on their computer, tablet or mobile phone, tell them to:

• delete the pictures or videos immediately
• let the sender know that they don’t want to receive any more of these pictures or videos
• never forward these images on to other people because this is a crime.

Sexting and the law

Sexting is a crime if it involves a person under the age of 18 (or someone who appears to be under the age of 18). It is also a crime when it involves harassing people of any age.

When sexting involves someone under 18, it can be considered creating, distributing or possessing child pornography. A picture is considered to be child pornography if it is offensive to the average person.²⁶

Existing laws are not designed to ‘catch out’ young people sharing consensual sexts with their partners; they are designed to protect children from exploitation. However, even if a young person under the age of 18 sends their own picture to their partner or someone else who says it’s OK, they can still be charged under current Australian Commonwealth laws.

WA’s intimate image laws came into effect in 2019. These laws make it an offence to distribute (or threaten to distribute) an intimate image of a person without their consent. Courts can also issue a ‘take down’ order to remove images online.

For more information, yla.org.au uses straightforward language and scenarios to explain the laws in each state. Youth Law Australia provides free, confidential legal information and help for people under 25.
Respectful relationships and sexting

What you can do

• Teach your kids about consent and image sharing right from the start. Got a photo of their first day at school? Ask their permission before you post it online. Have a conversation about it, and how, you can share their picture with others.

• Talk with your kids about when it is OK to share someone’s picture – and when it is not.

• If your child is LGBTI (and they haven’t come out to everyone), they may be at risk from someone outing them by sharing their image or information online. Let your child know that they will always have your support.

• Remind them of the basics of respectful relationships. Pressure from a partner to share an intimate image, or pressuring someone to send an image, is not respectful.

• Make sure you include both sons and daughters in discussions about respecting other people’s boundaries.

• Make sure they understand that it is illegal in Australia to send a nude photo or sexts (of themselves or of someone else) if they are under the age of 18.

• Let your teenager know that they can always come to you if they are worried about images they have sent. Talk about who they could go to instead of you, such as a school counsellor or Kids Helpline (1800 55 1800).

• Show your teenager how to get online images removed by reporting them on esafety.gov.au.

What can my child do to stop other people from sharing images of them?

There are a number of things to try to stop images being sent around:

• social media apps like Facebook, Instagram and Snapchat have ‘reporting’ and ‘blocking’ functions

• esafety.gov.au provides help on cyberbullying and getting photos removed

• privacy settings can be set to allow users to review photo tags before they appear on their own or their friends' newsfeeds.
Respectful relationships and sexting

What if someone your child knows keeps sexting them (after they’ve been asked not to)?

Sexting can also be a form of harassment, for example:

- if someone keeps bothering you with requests for a naked picture
- if someone sends you a naked picture you don’t want
- if someone threatens to send a naked picture of you to other people.

Sexting that involves harassment can be considered a menacing, harassing or offensive use of the internet or a mobile phone. This is a crime that can be reported to the police.

Consent applies to ‘sexting’ too.

Considerations for young people:

- Do I really want to do this?
- Does the person receiving the sext really want it?
- Is it legal? (e.g. sexting/nudes)
- Do I have consent to share this image with anyone else?
- Am I being repeatedly asked and pressured to send pics? OR Am I putting pressure on someone and making them feel uncomfortable to send a pic?
- Am I doing it to ‘belong’, or is it something I personally want to do?
- Why am I sending this? Am I hoping that if I send the pic that I’ll be liked?
It is very easy to come across porn online even on what may seem to be age appropriate sites. Pop-ups, links in YouTube and games where people can create rooms or characters are all ways in which children can come across porn accidentally.

Children and young people are often curious about sex and bodies and may seek it out as part of their self-education. The number of children exposed to porn increases at around age 9, probably because their sexual curiosity starts around this age, and because they are becoming more independent online.  

Is pornography harmful?

The evidence on the effects of porn on young people is hard to find. What seems clear is that boys who watch a lot of violent pornography (i.e. weekly) have more aggressive sexual behaviour. This is an important finding as it highlights that those who watch violent porn regularly need to know that forced and violent sex is never acceptable, and is illegal.

When it comes to the effects on girls, more research attention has been paid to the effect on their self-esteem. It appears that pornography can affect both girls’ and boys’ self-esteem by presenting them as sexual types with unrealistic body images that they feel they have to live up to.  

Is a one-off exposure to pornography likely to do lasting harm?

It may be unpleasant and offensive for your kids, but no more effect than that. In a survey of 9 to 16 year olds, the 9 to 11 year olds were the most likely to be upset by sexually explicit media. Many children and young people are already aware that this type of material does not represent a happy, healthy, positive kind of sex.

Their response can be lessened or heightened by the ways in which families interact and discuss what is seen. Tell your children your beliefs and concerns about porn and be sure to let them know that porn does not represent all sex or sexual relationships or body types.

So what do we do?

In the first instance, it would be good idea to stop children’s and young people’s exposure to pornography, especially violent porn. Internet and mobile phone access to porn is difficult to control. It is worthwhile putting blocks and safe searches on your home devices, including gaming consoles (go to esafety.gov.au to find out how).

We have little control over our relatives’ and friends’ devices and internet filters, and blockers are not able to prevent everything coming through, so talking with our children has become a necessity.
**Keeping children safe**

Ideas for what to say to your 8 or 9 year old.

- “Good websites for you to visit are usually fun, with things for kids to do and see. They have words and videos that are right for your age and they don’t let kids talk to people they don’t know.”
- “Some websites can have pictures and videos that might be scary or upsetting.”
- “As you get older you might have questions about bodies, babies and sex. It’s good to be curious and is a sign that you are growing up. If you have questions come to me.”
- “There are good reasons why we don’t want you to look this stuff up on the internet, unless we know that it’s a safe site.”
- “Some sites have pictures of nude people. These are meant for some adults, not for kids. If you find something like that online, don’t show other kids. You can tell me and you won’t get into trouble and you won’t have your screen time taken away.”
- “If you’re unsure about a site, come and ask me.”

For more tips on how to talk to your kids about porn have a look at the free resource *The pornography problem plaguing parents in the digital age* ([drkristygoodwin.com](http://drkristygoodwin.com)).

How do I talk to my kids about porn?

From about the age of 12, talk to your kids about what you want them to know about sex.

- “There is nothing wrong with sexual interest and sexual feelings.”
- “Porn is meant for (some) adults. Some adults enjoy watching porn. Some don’t.”
- “Some people watch porn thinking that they can learn about sex but porn often doesn’t show what real sex and relationships are like. Sex should be a mutually enjoyable and consensual experience; something shared together rather than a thing ‘done to’ someone.”
- “Porn is especially a problem if it encourages the mistreatment of people. Some porn is violent and violence is never OK.”

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I worry that young people watch porn to learn about sex. I hope they realise that there is a massive difference between porn and reality.

- Parent of girl 7 and boy 10
Kids and teens with special needs
Parents of children and teens with a disability may face added worry when considering talking to their kids about sex. But according to the Sexuality Education Counselling and Consultancy Agency (SECCA), the issues and concerns people with disabilities have around sex and sexuality are no different.

Although there can be some added barriers for kids with a disability in learning about healthy relationships and sex, such as communication, these can be overcome. There are a lot of great resources around and highly trained professionals available to consult with who have a lot of success in dealing with these issues. Having a group specifically dealing with relationships and sexuality for disabled people in the community is critical.

SECCA provides specialist sexuality and relationship counselling and educations services across WA for people with a disability and their significant carers. As well as one-on-one counselling, SECCA provides training in protective behaviours, menstrual management and duty of care, and also works with agencies to tailor-make workshops to suit specific needs.

It’s not always easy to know where to start when talking to your child with a disability about sex and answering their questions, but SECCA staff reinforce that there are plenty of ways parents can help their kids. SECCA has a comprehensive library of resources dealing with the wide array of issues around relationships and sexuality for people with disabilities. A resource list can be found on the website secca.org.au. Parents can also receive information through SECCA’s counselling service or by consultation over the phone.

And in answer to that tricky question many parents ask, “Is there a right or wrong time or age to start talking?” SECCA staff suggest we look at the bigger picture:

If we define sexuality education as instilling self-worth, self-value and self-esteem, then sexuality education should begin as soon as a child can comprehend what you are telling them.

The SECCA App is a free resource that includes illustrations and lesson plans to support access to relationships and sexuality education for people of all ages and abilities.
The People 1st Programme (PIP) believe that people with a disability must be acknowledged as sexual beings who have the right to make informed choices about their sexuality, sexual and reproductive health, and relationships.

PIP supports people with a disability through counselling and education around respectful relationships, protective education and sexuality. They offer one-to-one sessions developed specifically to suit the needs, age and ability of the individual. Topics include the following:

- resilience and self-esteem
- feelings
- public and private concepts
- protective education
- puberty and hygiene
- menstruation
- masturbation
- friendship skills
- sex, consent and the law
- sexual diversity
- safer sex practices and STIs
- contraception and pregnancy choices
- men’s and women’s health
- respectful relationships including couples counselling
- cyber safety, sexting and bullying
- assertive communication

PIP provides services in Perth, Albany, Bunbury and Busselton and also through outreach services in Joondalup and Mandurah. They also provide services via video conferencing.

PIP also offers services for parents, carers and other service providers. They have a comprehensive school program with tailored sessions suited to primary and secondary students and workplaces, which are delivered in consultation with staff.

PIP is a registered service provider with the National Disability Insurance Scheme (NDIS) and is a project of The Family Planning Association of WA (Inc.) trading as SHQ (Sexual Health Quarters).

(See page 107 for a list of books to support parents with children who have special needs.)
Talk soon and talk often to your child with Autism. As for all children, sexuality needs to be addressed with your child who has Autism from an early age and according to their ability to understand. The Autism spectrum is wide: people with Autism may have a very limited grasp of spoken language or may speak with an extensive vocabulary. Regardless of their ability to express themselves and to understand others, most are likely to have difficulty with social communication and social relationships. The ways that are proven to work best for people with Autism to learn in other subject areas will apply in teaching them about sexuality too.

In guiding your child you must take into account the characteristics of Autism. Autism WA suggest some ways to help you do this:

- Introducing correct body part names from an early age is especially important for your child with Autism as they are inclined to be very literal in their use of words. Try to teach them names and concepts in a clear, straightforward way.

- Keep in mind that people with Autism generally understand information more easily when it is presented visually. Use pictures, diagrams and lists (and avoid lengthy verbal explanations) to help your child understand.

- Self-esteem (as for all children) is especially important for your child who has Autism. Their difficulties with social relationships might have weighed heavily throughout their young life and be intensified with adolescence. Help them to gain a strong, positive sense of self.

- People with Autism are often perfectionists, expecting perfection in themselves and others. Try to find the balance of boosting self-esteem and remaining respectful of others.

- People with Autism often have difficulty planning ahead and considering consequences. Social stories can be helpful ways to address these difficulties as they are a gentle way of guiding your child towards a better outcome, keeping in mind other people too. Develop the ‘story’ with your child by using words, pictures or a combination of both. Keep the ‘stories’ simple and clear and read the story often.

- Help your child to make a list of rules relating to self and others. People with Autism often take rules extremely seriously (often feeling they should never be broken) so care must be taken in the way that rules are worded. A valuable rule for your child might be, “I am a good person. I deserve good people in my life”.

(See page 107 for a list of helpful books.)
What is sexuality?

Our sexuality is a central part of what makes us uniquely who we are and is a major influence on our thoughts, feelings and actions. A large part of growing up is working out who we are, and finding our place in the world. So, like all other aspects of life, understanding sexuality can take some time for young people (and adults) to figure out.

Sexuality is not just about sex. It involves many things and is deeply personal. It’s about relationships, personal values, culture, love, closeness, attraction, thoughts, lust, romantic feelings, sexual feelings, identity, expression and behaviours. Sexuality isn’t defined by who you have sex with, it’s about how you feel and how you choose to identify yourself. It’s about who you find attractive – physically, emotionally, romantically and sexually. You may be attracted to women or to men or to both or to neither. You may have an emotional attraction to someone but not want to have sex with that person. You may have a physical attraction to someone but not want to have a relationship with them. How we are attracted to people and the strength of those attractions can change over time. Everyone’s sexuality is different and these differences form a normal part of the broad range of human relationships and experiences.

As your child is growing up and going through puberty, they are already navigating complex changes to their body, their brain, their hormones and their relationships. They are exploring and managing strong feelings. Learning to understand their sexuality can be exciting, confusing, intense, scary, confronting, relieving, overwhelming, difficult or easy. Most people know from a very young age who they want to have relationships with, but for others it can take some time to figure out. Sexuality can be the same for some people all their life and for others it can be more fluid or change over time. The most important thing to remember is that sexuality is not a choice, it is a natural part of who your child is and everyone has the right to feel comfortable and accepted for who they are.
Sexuality identity is complex and diverse. It is not necessarily as simple as being ‘gay’ or ‘straight’, but there are some common terms and definitions to help understand some aspects of sexuality. It is important that people are able to choose which words they feel comfortable with. They might find that the term they choose changes over time or they might not wish to put a label on their sexuality at all.

**Heterosexual**
Attracted mostly to people of the opposite sex or gender (e.g. women who are attracted to men or men that are attracted to women). This is sometimes referred to as being ‘straight’.

**Homosexual**
Attracted mostly to people of the same sex or gender (e.g. men that are attracted to men or women that are attracted to women). This is sometimes referred to as being ‘gay’. ‘Lesbian’ is a common term for women who are same-sex attracted. Between 5 and 10% of WA teens identify as gay or lesbian.¹⁰

**Bisexual**
Attracted to both men and women. This does not mean that the attraction is evenly weighted, a person can have stronger feelings for one sex or gender. About 15% of WA teens identify as bisexual.¹⁰

**Pansexual**
Attracted to partners of any sex or gender.

**Asexual**
Not sexually attracted to anyone (or someone who has very little sexual attraction).

**Fluid**
Sexual attraction changes in different situations or over time.

**Queer**
Some people refer to themselves as ‘queer’, which can include a variety of sexual identities (and gender identifies). Some people find this term offensive as it has previously been used to hurt and insult people.

All of these terms can be confusing for some parents, but knowing all the definitions is not what is important. The most important thing for your child to know is that...

“You are not defined by your sexuality or gender. You are you, and we will always be here to love and support you.”

There are lots of different ‘normals’. Normal is such a different thing for so many different people. Being gay or homosexual is just another version of love and normality. So we talk about that with our kids.

– Parent of boys 17 and 19
What you can do

Make sure your child knows that:

- Understanding yourself can take time and it’s normal to have times where you feel unsure about your sexuality.

- There is no rush to figure out your sexuality – take your time. It’s OK and normal for people to take time figuring out what works for them.

- Having a crush on someone (or sexual thoughts about someone) who is a different gender to who you are usually attracted to, does not mean that you are gay, straight or bisexual.

- You may not have any sexual interest in anyone – and this is normal too!

- You don’t need to have sex to know that you are straight, gay, lesbian or bisexual.

- Everyone has the right to be themselves without having to explain this to anyone.

- Only you can decide what sexual identity best describes you. Many people find the labels don’t fully explain their attractions and that’s OK – you don’t need to have a label at all!

- If you are struggling with your own sexuality there is lots of support available. Qlife.org.au offers phone and webchat support from 3pm until midnight every day and Kids Helpline is always open (1800 55 1800 or kidshelpline.com.au). There are also lots of other helpful services at the back of this book.

What is sexual identity?

What is homophobia and transphobia?

Homophobia is the fear, hatred or discomfort with people who are homosexual (gay, lesbian or bisexual). Transphobia is the fear, hatred or discomfort with people who are transgender or gender diverse. This can take many forms – hurtful ‘jokes’, stereotyping, name-calling, isolating people, bullying, discrimination and abuse.

In Australia, it is against the law to discriminate against someone because of their sexual orientation or gender identity. However, discrimination still occurs.

Young people who experience homophobia or transphobia often feel alone and afraid. They may not feel able to tell anyone what is happening, so it is important for parents to ask questions and keep the lines of communication open. If a young person is feeling threatened or harassed in any way it is important that they get help straight away. See the list of helpful services on page 102.

The Equal Opportunities Commission eoc.wa.gov.au can also assist if you wish to know more about your rights or if you want to issue a complaint.
I think my child is gay

For whatever reasons, you have started to think that your child might be gay, lesbian or bisexual; that is, attracted to people of the same sex. Concern and love for your child, and a history of hearing that ‘gay = wrong’, causes some parents to feel they need to do something. Even a behaviour as harmless as a boy playing with dolls can cause some parents to panic. It is very sad that our history of gender stereotyping and fear of same-sex attraction causes so much worry about natural and normal behaviour in children. So here is what you can consider to continue being a loving and helpful parent:

• It is common and normal for kids to dress up in mummy’s or daddy’s clothes without it meaning they are gay or straight.

• It is common and normal for boys to play with dolls and girls to play rough without it meaning they are gay or straight.

• You can’t control your child’s sexual orientation. It is not caused by you and it can’t be changed by you.

• Approximately 5% of young people in WA identify as gay/lesbian and 15% identify as bisexual. ¹

• If your child does happen to be same-sex attracted, this is just one part of their identity. They are still the same person.

What you can do

• Give them time to explore their identity and find out who they are for themselves. A child may not be aware of their own sexuality until they are much older.

• Aim to be a ‘tellable’ parent: give your children some positive messages that show you are open to talking and embrace diversity. For example, use something in the media to make a positive comment about LGBTI people, or about parents who support their LGBTI kids, or about women and men who follow their interests, careers and passions outside of narrow gender stereotypes. Your child may even ask you a question to ‘test’ you. If you don’t know what to say, it’s OK to be honest. Saying something like, “When I grew up it was rarely talked about, so I feel like I’ve got a lot to learn”, lets your child know that you are prepared to have open-minded discussions.
When my child came out

My son was 19 when he told me that he is gay and that he’d known this since he was 15 years old. My first fleeting thought was that the future I had envisaged for him wouldn’t be the traditional ‘married with a wife and two children’ scenario. This was swiftly replaced by the realisation that I hadn’t been there for him when he probably needed me most. With the trials and tribulations of high school it must have been a difficult few years for him. He’d always got on well with both sexes so it had never crossed my mind that he might be gay.

By the time he’d told me, he had already told his friends. His admission about being gay made no difference to them or to us. He is still the same person he has always been – the same person that we have loved and cherished all his life. Knowing about his sexuality is the only thing that is different.

We hope that our children will grow up to be happy and healthy in their adult lives. I think our son is on the right path and he knows he has his family’s support.

I once said to him that I was most sad that he’d known for four years that he was gay and hadn’t told anyone and that I wasn’t there for him. He replied, “It’s alright, Mum. Don’t be sad. I wasn’t ready to come out as being gay. I was still getting used to being who I am.”

– Parent of boys 17 and 20
You might have always had a bit of a feeling about it or it might come as a complete surprise.

You may be accepting and OK with this disclosure and you may feel closer to your child as a result of it. Your child may be happier and feel safe to now have personal conversations with you knowing they have your support.

If you had no idea, you may be a bit shocked. You may feel like the child you have had all along has gone and been replaced with someone else. You may fear for your child’s safety, or fear that their life will be more difficult. You may wonder how this has happened. You may feel guilt – that you made your child this way. You may feel angry, as though this is someone’s fault and you want to find them and sort it out. You may come from a family who find sexual diversity shameful and fear others finding out. These feelings are common first reactions. But remember, your child is still the same person and they are just sharing one part of their identity with you.

There is no clear answer about why some people are gay, lesbian or bisexual and others heterosexual. Sexual diversity occurs naturally in all human societies and even in animal species. Sexual identity may vary over time but cannot be ‘cured’ or changed forcibly. One thing is certain – it is not a choice that children make. Almost all children are raised as though they are heterosexual and their feeling of ‘difference’ is likely to be a slowly growing revelation, and not always a welcome one.

Telling parents and risking losing their love is the thing that nearly all LGBTI young people fear most. Research has shown that young people who are rejected by their families have much higher risks of homelessness, poor mental health, self-harm and suicide. The first thing to remember when your child comes out to you is that you have a very brave child who has chosen to take you into their confidence. They deserve a hug for that at the very least.
Some kids who are LGBTI have had it tough for a long time. If they have been picked out as different from the other kids they may have been bullied or harassed at school or even in the street. Others feel the pressure of living a lie, hoping no-one will find out about them. To state the obvious, this is not good for their health, especially their emotional and mental health.

They may have gone through all this alone rather than risk losing you. By you knowing about it and being an ally, it is a great step forward in helping them cope with whatever is going on in their lives. Now there are more of you on their support team.

If it takes you some time to get used to the idea, don’t worry – your child probably took some time to get used to the idea too. Eventually, most parents are relieved to know, and pleased to see the improvement in their relationship with their child when it is out in the open. Later on, you may experience the joy of welcoming your child’s partner into the family. And LGBTI people often have children too.

It is important to remember that, just because your child has shared their sexual identity with you, does not mean that they feel ready or safe to share this with other people. Sharing someone’s sexual identity against their wishes can make them very upset and vulnerable and can put them at risk of discrimination and violence. Make sure that your child knows that you will always ask them what you’re allowed to share with others and that you will respect their wishes.

It helps to know that other LGBTI young people and their families have survived challenges and thrived. There are a number of organisations that provide support and information for LGBTI young people and their families and friends:

- Parents and Friends of Lesbians and Gays ([pflagaustralia.org.au](http://pflagaustralia.org.au))
- The Freedom Centre, Perth – provides a safe place, support and information for young LGBTI people ([freedom.org.au](http://freedom.org.au))
- QLife – link young LGBTI Australians to state-based agencies via phone and online services ([qlife.org.au](http://qlife.org.au))

(See page 102 for a list of reliable services and websites.)
It is common for people to confuse sex, gender, gender identity and sexual identity, but they are all very different things.

When a child is born they are usually assigned to be either male or female based on the baby’s external genitals – whether they have a penis or a vulva. This is referred to as their sex assigned at birth and is usually listed on the child’s birth certificate. Some people call the sex assigned at birth ‘biological sex’ but this does not fully capture the natural variations that can occur in chromosomes, hormones and sexual organs.

Gender identity is about personal identity and how a person feels inside. It is not how other people describe or label them. Gender identity can be the same as a person’s sex assigned at birth (e.g. when a child identifies as a girl and their sex assigned at birth is female) and this is referred to as being cisgender. For some people their gender identity is different to their sex assigned at birth (e.g. when a child identifies as a boy and their sex assigned at birth is female). This is often referred to as being transgender. Some people don’t feel like they identify with either gender and may identify as non-binary, gender diverse or agender. Some people’s gender identity changes over time and they may identify as gender-fluid.

Many cultures recognise and celebrate multiple genders and have a broader idea of gender beyond ‘male’ and ‘female’, and have done so for many centuries. The way that people express their gender is unique to each person – what they wear, how they cut their hair, how they talk, walk and act. Quite often the way that the world sees someone’s gender is based on the stereotypes and expectations that society, media and culture have assigned to being ‘masculine’ and ‘feminine’. These stereotypes are limiting (and sometimes harmful) and do not accurately reflect real and normal human diversity and gender expression.

Almost all children begin expressing their gender identity at 2 to 3 years of age through their preference for particular clothing, toys and interests. If these expressions do not fit stereotypes and expectations, it can be worrying to parents. It may be that your child is role playing (which is a normal part of healthy childhood play) or it may mean that your child is simply not conforming to rigid gender stereotypes (which is also perfectly normal). It may mean that your child may be transgender or gender diverse. Most children’s gender identity matches their sex assigned at birth, but for a small number, it does not. This is part of the natural spectrum of human diversity.

### Transgender
Being transgender or gender diverse is when someone’s sense of being male or female is different from the sex they were assigned at birth. It has been estimated that between 1.2% and 4% of young people in Australia are gender diverse or transgender.17 18 (See page 72 for how to support a child who is gender diverse.)

### Cisgender
Cisgender is a word used to describe people whose gender identity is the same as the sex they were assigned at birth.

### Non-binary
People who do not identify with traditional male and female genders may identify as non-binary.

### Queer
Queer can be used as an umbrella term for people who are same-sex attracted or gender diverse. This term has previously been used to be insulting and hurtful so some people can find it offensive. It is best to only use this term if someone has used it for themselves first (and they are happy for other people to use this term).
Parenting a child who is gender diverse

Raising a child as one gender (male or female) and having them identify as another (or others) can be difficult to understand. By a very young age, most children know their gender identity and find it very difficult to think about themselves in any other way. For other children understanding their gender identity is more complex and they may not be able to express this to you until they are much older.

Many young people who are gender diverse will feel comfortable with their gender identity and may not desire any form of intervention or transition. Others can feel extreme distress living in the gender assigned to them at birth and wish to take steps towards more accurately expressing their true gender. Talk to your child and ask them how they feel and what they need to ensure that you are protecting their physical and mental wellbeing. Consider seeking professional assistance; there are many organisations that specialise in this sort of support.

Puberty can be a particularly distressing time for a child who is transgender as their body is developing more characteristics that do not match their gender identity. It is important that parents and children know that there are options, including counselling and medical treatment, to help a child who is distressed about these body changes. Seeking professional help before the onset of puberty ensures you and your child have accurate information and access to services for support through this time.

Discrimination related to gender identity can have a significant impact on mental wellbeing. School can be a nurturing place, and there are lots of stories of young people being supported and celebrated in their identity. Sadly, others can experience bullying, exclusion and abuse. The statistics are alarming, with 48% of transgender people having attempted suicide and 80% having self-harmed in their lifetime. As for every child, support is essential. There are many helpful services and support groups for both you and your child that can be found on page 97 of this book, and Lifeline offers 24-hour crisis support and suicide prevention on 13 11 14.

How is intersex different to being transgender or gender diverse?

Being transgender or gender diverse is when someone’s sense of being male or female is different from the sex they were assigned at birth. Intersex is not about gender or transition, it is about physical differences in sex characteristics. Most people who have intersex variations are understood to identify with the female or male sex they were assigned at birth, while some may not. They may identify as cisgender, transgender or gender diverse. (See page 74 for more information about intersex variations.)
Parenting a child who is gender diverse

What you can do

• Learn as much as you can from reliable, quality sources. First steps: Supporting and caring for transgender children is a free booklet offering tips for parents, personal stories and how to be an ally. The link for this book can be found on page 107 along with other reliable websites and books to support LGBTI young people and their families.

• Reach out to support groups for yourself and your child:
  » qlife.org.au provides free LGBTI peer support via phone and webchat from 3pm to midnight every night – 1800 184 527.
  » transfolkofwa.org is a support service for all transgender people and their loved ones in WA.

• Use your child’s preferred pronoun (he/she/they) and the name they wish to be called. In the beginning you may find this difficult but it is one of the most basic ways to show your respect for your child’s gender identity and to maintain a positive relationship with your child.

• Talk to your child’s school, sporting clubs and interest groups about how they can support your child.

• Keep lines of communication open with your child – by talking, texting and messaging on social media.

• Perhaps seek a referral from a doctor to visit the Gender Diversity Service at Perth Children’s Hospital. (See page 102 for a list of helpful services and websites.)

Most importantly, keep telling them you love them!

My stepson suffered depression for many years and all along it was due to the fact he was transgender but didn’t feel as though he could tell anyone or articulate his confused feelings about his own sexuality. After suffering alone for about 4 or 5 years, aged 16, he told us (his dad, mum and myself). Amazingly he went from being extremely isolated and withdrawn to being someone who is chatty and much happier!

It’s heartbreaking that he didn’t tell us earlier. We would have wholly supported him and helped in any way we could for him to feel loved, supported and not judged.

– Step-parent of boy 16
Parenting a child with intersex variations

Just as people have variations in height, eye colour and hair type, people also have natural variations in hormones, chromosomes and sexual organs (sex characteristics). People who are intersex are born with physical sex characteristics that do not fit the stereotypical and medical definitions for male and female bodies. Intersex variations (in humans and other animals) have been known throughout history, but many people who have intersex variations (and their parents) experience discrimination, bullying and harm because their bodies are seen as different. Around 1.7% of the population is estimated to have intersex characteristics, which makes people with intersex variations about as common as people who have red hair. Sadly, intersex variations haven’t been talked about much, but this is changing. 20 22

Finding out your child has intersex variations may come as a surprise to you. If your child has sex characteristics that are not typically male or female, you may have learnt about their intersex variations at birth (or even earlier during pregnancy screenings). You may have simply felt joy at the birth of your healthy child or this may have been worrying if you (or the health professionals in the room) were not aware that it is a normal part of bodily diversity. Many parents are not aware that their child has intersex variations until their child starts puberty (or does not start puberty). For some people they don’t find out until they try to have children of their own, some find out by random chance and others don’t find out at all. While people with intersex variations may face some health issues, it need not define who they are and it is important to remember that all sorts of people with different kinds of bodies (and genitals) live happy and fulfilled lives.

Historically, children born with intersex variations were subject to surgical and hormonal interventions with no evidence of any benefit. 22 Intersex Human Rights Australia suggests that parents take their time to make informed decisions about their child’s healthcare. If interventions are suggested, ask about the risks of both carrying out the treatment and doing nothing. Ask for written evidence supporting this intervention, including information about long-term outcomes. Seek a second or third opinion and don’t be rushed into making any decisions. Ask about waiting until your child can make the choice for themselves.

The best thing you can do for your child is to be open and honest with them about their intersex variations. 21 In the past, driven by a desire to protect their child, parents (and doctors) may have held back information. Being open shows your child that having an intersex variation is a normal and natural part of bodily diversity and helps maintain their trust in you.

Visit Intersex Human Rights Australia (ihra.org.au/parents) for lots of useful information and support for parents. 22 For an excellent peer support organisation got to isupport.org.au.
Tips for talking
<table>
<thead>
<tr>
<th>No.</th>
<th>Tip</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td><strong>Talk soon.</strong></td>
<td>Start talking about bodies from birth. Talk about puberty and respectful relationships. Discuss topics long before your child is going to experience them. Practise talking about sexual matters before your children reach an age when they are reluctant to discuss the topic.</td>
</tr>
<tr>
<td>02</td>
<td><strong>Talk often (listen too).</strong></td>
<td>Cover the same subject lots of times – little and often. A general pattern of openly ‘chatting’ about sex and relationships will stick and create a feeling of closeness and comfort to talk about anything.</td>
</tr>
<tr>
<td>03</td>
<td><strong>Two way talk.</strong></td>
<td>Gone are the days of the one-off ‘birds and the bees’ lecture. Good communication is lots of conversations, sharing ideas, experiences and questions.</td>
</tr>
<tr>
<td>04</td>
<td><strong>It’s not all about sex.</strong></td>
<td>It’s about bodies, babies, growing up, love, sexual expression, feelings, treating each other with respect, personal values, decisions and relationships.</td>
</tr>
<tr>
<td>05</td>
<td><strong>Don’t wait for your child to ask questions.</strong></td>
<td>They might never ask, and they still need to know. If they haven’t said anything to you by the time they are 10, then shyness or embarrassment is likely to stop them from this point onwards. Create conversations – use books, characters in TV shows, stories from your own life.</td>
</tr>
<tr>
<td>06</td>
<td><strong>Answer questions honestly and simply.</strong></td>
<td>Just a little bit of information is OK because you can always come back to it (and you should). If you haven’t given enough information, most kids will ask more questions.</td>
</tr>
<tr>
<td>07</td>
<td><strong>You don’t have to have all the answers.</strong></td>
<td>If you don’t know how to respond to a question, it’s OK to say so. Keep communication open with something like, “That’s a good question. I don’t know how to answer it. We can find out together.”</td>
</tr>
<tr>
<td>08</td>
<td><strong>Use teachable moments.</strong></td>
<td>Use media, movies, news events, songs and family events to introduce topics and discuss values (e.g. an unplanned pregnancy on a TV show can be a good way to talk about the importance of contraception).</td>
</tr>
<tr>
<td>09</td>
<td><strong>Use the correct words.</strong></td>
<td>Practise saying these words out loud: vulva, vagina, clitoris, penis, testes, scrotum, breasts, nipples. Get used to using the proper names for sexual body parts right from the start. That doesn’t mean you can’t use the words ‘boobs’ or ‘willy’, but it helps you and your child to be more matter of fact about these issues.</td>
</tr>
<tr>
<td>10</td>
<td><strong>Make reliable information available.</strong></td>
<td>Leave books around that have accurate information. Share reliable websites and video clips. Help your child to determine what information is real and what is fake on social media.</td>
</tr>
</tbody>
</table>
Top 20 tips for talking about sex

11. Be a ‘tellable’ parent.
Show you are approachable by raising the topic, be unshockable (pretend if you have to), and listen.

12. Trusted network of adults.
Ask your child to think of other adults they might like to talk to about these topics: aunts/uncles, grandparents and older siblings can be great sources of support.

13. Make it less awkward.
Offer times to talk that don’t require a formal sit-down. Start a conversation in the car or washing the dishes so that you can talk without eye contact (this also helps to give the chat a finite time so that it is not too ‘heavy’). Send your teen a message with a link or post you’d like them to look at and offer them the chance to come to you with questions (don’t tag them in posts that their friends can see too!).

14. It’s OK to laugh!
Sex and bodies can be funny for both you and your child. It’s OK to laugh, to admit you are embarrassed (but determined) and to say, “I don’t have all the answers, but I do know where we can get reliable information.”

15. You are not alone.
There are lots of supportive services and websites at the back of this book that can help you and your child.

Find out what your child is learning about at school and use this to continue conversations at home.

17. Teach them about contraception and condoms.
Share your family values about sexual behaviour but make sure they have factual information on how to best protect themselves should the need arise.

18. Show them how to access services.
Concerns about confidentiality can stop young people accessing services. Show them how to get their own Medicare card (at 15 years old). Explain that their My Health Record becomes confidential to them at 14 years old. Show them how to use local and online services.

Remember that about 5–20% of people are same-sex attracted, about 4% are gender diverse and 1.7% intersex.

20. It’s never too late to start.
Children will learn about sex with or without you. It’s better to get information from a trusted adult rather than online or from friends. It doesn’t hurt to say, “I wish we chatted about this a long time ago, but here is something I really want you to know…”

We haven’t made it an issue. So it’s just information, and it’s there to be asked, and my attitude is, I’ll tell you, to the best of my knowledge. If not, I’ll find out for you and then we can work through it.

– Parent of girl 6 and boy 8
Many parents expect that their children will come to them if they have questions about sex, but in a recent survey of WA teens, only: ¹⁰

Children expect (and want) parents to start these conversations too. Young people can worry that if they bring up topics that their parents will think that they are doing ‘it’, so you starting the conversation can take the pressure off them. Start having a chat while in the car or while you are washing the dishes together. This way you can talk without eye contact and it gives the chat a finite time so that it doesn’t get too ‘heavy’. The following page offers some ideas to help start conversations in general ways that aren’t too personal or confronting.

**Conversation starters**

- 25% felt confident or very confident to talk to their mums (or female guardians) about sex
- 14% felt confident or very confident to talk to their dads (or male guardians) about sex

It seems a lot of other parents leave it until the children are too old or don’t really talk about these things at all. I am casually talking about it whenever the opportunities and questions pop-up, and also have had longer one-on-one conversations when the kids had particular questions.

– Parent of boys 4, 11 and girl 8
Conversation starters

“Tips for talking”

“Who are three people you would feel comfortable going to if you need advice about relationships and sex?” Offer suggestions such as older sibling, friend’s parent, auntie, doctor, SHQ Helpline.

“The Pride Parade is on this week. Is that something you and your friends might like to go to?”

“Did you see that article about the student who is transgender and how the school support her in her transition? How do you think your school would respond?”

“My friend’s daughter has just had ‘the rod’ fitted. What have you heard about ‘the rod’?”

“I found this great website. It has a list of frequently asked questions. Let’s have a look at some of the questions people ask.”

“This school has changed its uniform policy so that there is no separate ‘girls’ and ‘boys’ uniform. What do you think?”

“This person got sacked for making homophobic comments to a co-worker. What are your thoughts?”

In response to a news article: “That party got out of hand and the police arrived. What do you think you would you do in that situation?”

While watching a TV show in which teenagers are having sex: “What age do you think a person is ready to have sex? How will you decide?” (Instead of asking, “Have you had sex?”)

“Here’s Auntie’s ultrasound. Isn’t it amazing? She’s going to be a great parent. What age do you think a person is ready to be a parent? What do you think are the qualities that a parent should have?”

“What do you think of...?” Insert an example of the latest scandal of a celebrity doing something controversial, such as being photographed wearing no underwear, sexting, etc. Use an example that your kids will know and are able to provide their thoughts on.
For all of those parents and carers who are worrying about how to answer their kids’ questions, there are just as many frustrated ones wishing they had that problem. You are looking forward to being supportive and open, and their communication stops! First, know that this is part of adolescence. Young people often need to work things out in their own way. Communication about values or providing information can still happen, just not as directly as you might have liked.

There are some good books and websites that might help. (See page 101 for a list of reliable resources.) Perhaps one of the most important things you can do as a parent is to support the Relationships and Sexuality Education (RSE) program at your child’s school and to ensure your child has contact with other people who can offer support.

What you can do

• Leave brochures and books around the house.

• Suggest somewhere or someone to whom they might go for advice when they need it.

• Use TV or other media as a conversation starter. Make comments on someone’s treatment of another person in a relationship (e.g. examples of respectful relationships, assertive communication, domestic violence, homophobic behaviour, gender stereotyping). It might create a discussion or it might not, but you’ve let your kids know your values, which children do take into consideration.

• To avoid putting your child on the spot, ask questions in a more general way: “What do you and your friends think about...?” “What do ‘most’ kids at school think?”

• Visit getthefacts.health.wa.gov.au for a list of young people’s frequently asked questions and answers on sex and relationships, and consider sharing the website with your child.

One of my daughters, quite introverted, is hard to have discussions with so I’m always considering ways to have ‘unstilted’ conversations.

– Parent of girls 13 and 16
Preparing young people for healthy sexually active lives
Preparing young people for healthy sexually active lives

Would our approach to sex education be different if we assumed it was our job to prepare children for happy, safe sexual lives?

Rather than trying to stop them having sex at all costs, what if we asked ourselves:

- What do they need to know to have happy, healthy and safe sexual lives?
- What are the choices that lead to them having fulfilling sexual lives?

If you don’t know the answers to these questions (and many of us don’t) then probably neither do they. And it’s the absence of this conversation with young people that leads them to take sexual risks.

What’s love got to do with it?

Part of growing up is forming your first strong attachment to somebody else – somebody who is not the parent! A young person’s first relationship can force new questions for the family about how much freedom they are allowed and how they manage their intense new feelings.

Your child needs to know they do not have to have sex even if they are truly-madly-deeply in love. It is their right and choice to take their time. In fact sex is better when you wait until you feel ready (really!). The research shows that the younger you are, the more likely that sex is uncomfortable and the more likely that it is regretted. Young people also need to know that not everyone is doing it, although some are. About half of Australian high schools students are having sexual intercourse, which means half are not!
Preparing young people for healthy sexually active lives

What’s good about sex?

If we acknowledge that sex can be a happy, pleasurable experience, we will be better able to ‘sell’ that it’s worth waiting for, rather than something to rush into. If parents only talk about the downsides of sex, like sexually transmissible infections (STIs), then young people will switch off.

If responsible adults acknowledge what’s good about love and sex and relationships then we can teach young people what to aim for.

It’s important that they are told somewhere along the line that a sexual relationship can be a pleasurable and happy thing, and that it is worth waiting for the right conditions.

The research tells us that young people can have happy experiences of sex, without negative consequences, if the conditions are right. (See page 86 for the key messages young people need to know about sex.)

Most Australian young people report that after their last sexual encounter they felt extremely/a lot:\(^2\)

- good: 71%
- happy: 70%
- fantastic: 60%

(All the things we hope for them!)

Kim: When my children start experimenting with sexual behaviour, I want them to really enjoy it, I want them to have positive experiences and I want them to feel empowered. And, I want to make sure that it’s healthy, it’s safe, they’re not pressured into it, but at the same time you don’t want it to happen too young.

Jo: So it’s about more than just knowing the facts of life.

Kim: It’s about being strong, assertive, respecting yourself and other people.

– Parents of girls aged 14
Preparing young people for healthy sexually active lives

Unfortunately a lot of young people begin to see not having had sex as a burden. Pressure for young people to have sex is real – this includes the pressure they put on themselves and the pressure placed on them by others (including the media). A little over a quarter of sexually active 15 to 18 year olds have had unwanted sex, largely because their partner thought they should, they were too drunk or because they were fearful.  

Young women describe tremendous pressure to have sex – and when they ‘give in’ (rather than freely choose) they are much more likely to feel used and unhappy. Young people often fail to recognise that they have been forced into sex because they don’t realise that manipulating or cajoling someone into having sex is sexual assault (even when they know each other and the sex isn’t aggressive). They often believe that sexual assault is always violent and committed by someone they don’t know.  

Young women are more likely than men to experience sexual assault, but it happens to all genders. Both men and women are more likely to experience sexual assault from someone they know, rather than a stranger.  

Very few young people report that their parents have talked to them about their rights and responsibilities when it comes to sex.  

Young people tell us they want to talk about what to expect and how to cope; something more than a biology (or disease) lesson. This kind of education makes a difference to their capacity to reflect on what’s important to them and on what they want from sex, to respect their own and their partner’s limits, to understand consent and to know that it’s OK to change their mind or express uncertainty.  

Sexual assault goes on in a lot of subtle ways when you’ve got your 16 and 17 year olds – they are dating, and they’ve all got drunk and this kind of thing. It’s not necessarily an unknown predator. It’s like at school leavers’ week, they are all disgustingly drunk and they’ve got no idea. There are older boys, not to mention the 16 and 17 year olds, all coming in…it’s an issue...especially for the girls.

– Parent of boy 15 and girl 18
Preparing young people for healthy sexually active lives

In a survey of Australian high school students:\(^2\) of sexually active students reported having ever had **unwanted sex**.

The reasons they gave...

**My partner thought I should:**

- **Males:** 54%
- **Females:** 52%

**I was too drunk:**

- **Males:** 35%
- **Females:** 34%

**I was frightened:**

- **Males:** 28%
- **Females:** 32%

**My friends thought I should:**

- **Males:** 17%
- **Females:** 7%

**I was too high:**

- **Males:** 14%
- **Females:** 14%

“I was so off my face I didn’t know what I was doing.”

With being influenced by a partner the most common reason for unwanted sex, we can see why being drunk or affected by drugs can confuse issues even further.\(^2\)

Lots of people combine sex and alcohol because it lowers inhibitions and they feel more comfortable to admit to wanting to engage in sexual activities. A frank discussion about first sexual experiences – the disappointments and the highlights – might start your child thinking about how they might like to navigate their own sexual lives.

Young people need opportunities to think about and discuss the consequences of mixing alcohol and/or other drugs and sex so they can reduce the chances of getting into situations they can’t handle.
Some young people have the skills and the expectation to form a connection with someone before they have sex. These young people are more likely to have happier experiences if and when they have sex. Others’ experiences of first-time sex may be characterised by feelings of pressure, disappointment, regret and even necessity. Young people receive so many messages about sex from the media, pornography, their friends and from the topics that are ‘left unsaid’ in school and home education. They need opportunities to think about these messages so they can make informed decisions that will keep them safe, healthy and happy.

**Make sure that your teenager knows:**

- There are lots of ways to enjoy romantic feelings (feeling ‘in love’) – spending time with someone, holding hands, sending romantic messages, saying, “I love you”.

- Even if you are truly-madly-deeply in love, you don’t have to have sex. You have the right and the choice to take your time.

- There are lots of different ways to enjoy sexual feelings. Lots of people masturbate. Some people decide to engage in some sexual behaviours but not others. Some people do nothing.

- At different times of our lives (or even different times of the week) our levels of sexual interest change – sometimes we have very strong sexual desires, sometimes we have no sexual desires. Sometimes people experience no sexual attraction at all. They might identify as asexual.

- Sexual activity with others should always be mutually wanted, between equals, reciprocal, with a reasonable expectation of pleasure and with no-one being pressured, made to feel guilty or forced to do it.

- There are a lot of messages suggesting everyone is having sex. This is not true. About 50% of high school students have had sexual intercourse. This means about 50% have not.

- People have sex for a range of reasons – to become closer, to feel loved, to feel good, to get it over and done with, to be popular, to fit in, to rebel. Not all these reasons are ideal.

- One reason that people enjoy sexual activity is because it feels nice, good, great. You can feel excited, beautiful and powerful. Sex can also be uncomfortable, disappointing, boring, a chore. At its worst it can make you feel lonely, sad, unloved and unvalued.

- If getting someone to love you is your goal, then ask yourself whether you think that person likes you. If you don’t think they like you, then they are unlikely to fall in love with you just because you have sex with them.

- Making considered sexual decisions can be nearly impossible if a person is drunk or high.
Key messages for young people about sex

- No-one ever ‘owes’ anyone else sex.

- You have a right to choose not to have sex, or to wait until you feel really ready.

- Before being sexual with someone, you need to know if they want to be sexual with you too. It’s important to be honest with your partner about what you want and don’t want. Both people must agree for it to be consensual. Sexual activity without consent is sexual assault. (See page 88 for more on sexual consent.)

- If there is any uncertainty about whether people want to have sex, then you have to check by asking questions. You have to KNOW!

- Even though asking someone if they are comfortable or want sex can be embarrassing (and might mean sex doesn’t happen that time), asking is important to prevent sexual assault.

- It is the responsibility of the person asking/wanting sex to make sure they know the other person wants it too.

- If a person says “Yes” but they were too frightened to say “No”, then it is not consent.

- Doing any form of sexual activity once, does not mean you have to do it again.

- Starting any kind of sexual activity does not mean it has to continue. A person can change their mind at any point.

- Everyone has the right to decide what sexual behaviours they are comfortable with, if any. They can also expect their friends and sexual partners to respect those decisions.

- Everyone, whatever gender or sexuality you identify with, married or not, can choose not to have sex at any time.

- Sex can lead to getting or passing on an STI, or to getting pregnant. It’s important to protect yourself and your partner/s.

- Oral sex won’t cause pregnancy but it can still spread some STIs such as chlamydia, gonorrhoea and herpes. Using a condom for oral sex can help prevent giving or passing on STIs.

- If a person has vaginal or anal sex, condoms will stop the spread of most STIs. Some STIs are passed on by skin-to-skin contact, like herpes and genital warts, and condoms can only protect the skin that is covered.

- What feels good to one person, might not feel good to someone else. Mutual respect and pleasure are very important.
Sexual consent is an agreement to engage in sexual activity. Consent must be mutual, freely given, informed (i.e. they understand what they are agreeing to), ongoing (i.e. gained at each step of physical intimacy), certain and clear. Without consent, sexual activity is sexual assault. The following diagram outlines some of the basics of consent and offers some discussion starters for you and your teen. You might try asking questions like, “If someone says/does….have they consented? How can someone be sure?”
Preparing young people for healthy sexually active lives

- Sex is when a penis, finger, object or any part of a person is fully or partially inside another person’s vagina or anus. Sex also includes any kind of oral sex.
- Consent means giving your free and voluntary agreement to sex. It is never OK for someone to assume you have given consent or to force you to keep going if you want to stop.
- In WA the legal age for consent to sexual activity is 16 years or older. This means that you can have sex with another person aged 16 years or older so long as you both agree to it.
- It is a crime for a person who is caring for you, supervising you or has authority over you to have sex with you if you are under 18 (e.g. teacher, employer, coach, carer).
- A person cannot give consent (regardless of age) if:
  » they are drunk or drugged
  » they are unconscious or asleep
  » they have a mental or intellectual condition that impacts on their ability to understand what they are consenting to
  » they are tricked, forced, coerced or threatened.
- Sexual assault is any unwanted sexual act or behaviour a person did not consent to or was not able to consent to. This can include:
  » unwanted sexual touching, kissing, hugging
  » making you watch a sexual act, such as porn
  » being forced to perform any sexual act.
- Sexual harassment is any unwelcome sexual behaviour that makes a person feel uncomfortable, offended, humiliated or intimidated. This can happen at school, at work or in other places and can be in person or through social media. This can include:
  » unwelcome sexual advances
  » requests for sexual favours
  » sexual jokes
  » staring, leering
  » wolf-whistling
  » physical contact (e.g. unwanted touching).

Youth Law Australia is a great website for young people wanting further information on laws that relate specifically to them. It is important to know that many laws differ from state to state (and country to country). Visit yla.org.au for more information.

Where can I get help for someone that has been sexually assaulted?

There are many support services available to people who are affected by sexual assault. (See pages 102 and 104 for a list of services.)

In cases of recent sexual assault, go to the nearest hospital or doctor. The Child Protection Unit at Perth’s Children’s Hospital has a specialised service for children and their families. The Sexual Assault Resource Centre (SARC) has a 24-hour emergency helpline (1800 199 888) for people 13 years or older.
It’s crucial that a young person decides whether they’re ready before someone else decides for them.

Considerations for young people:

- Do I want to have sex? Have I said so?
- Does this feel right?
- Am I sure the other person wants to have sex with me? Have I asked them?
- Am I over 16? Is my partner over 16?
- Have I pressured my partner to ‘give in’? Has my partner pressured me?
- Do I feel pressured by anything or anyone else?
- Am I doing it to gain acceptance from my friends?
- Is anyone coercing me? Is anyone forcing me?
- Am I doing it just to keep my partner?
- Am I doing it because everyone else is?
- Do we both want it for ourselves, not just to please the other person?
- Do I respect my partner? Does my partner respect me?

- Do I understand how to get consent? Do I know how to communicate my consent?
- Do I feel comfortable with the person I want to have sex with?
- Do I feel I could say no at any point, and that would be OK?
- Do I have any anxieties or fears?
- How will I feel about this decision tomorrow?
- Do I know how to prevent a pregnancy?
- Do I know how to get contraception and which one is best for me? Have I discussed contraception with my partner?
- What would I do if my partner and I got pregnant?
- Am I ready to be a parent if my partner and I get pregnant?
- Do I know to protect myself and my partner from getting an STI? Do I have condoms and know how to use them?
- Do I know how to get an STI test?
Preventing unplanned pregnancies and STIs
Every young person has a right to information that will help them keep safe and healthy, which includes information about avoiding unplanned pregnancy and STIs. Part of a respectful sexual relationship involves being able to discuss contraception options with a sexual partner before having sex and being jointly responsible for preventing unplanned pregnancies (when having penis-in-vagina sex) and for preventing STIs.

Contraception is something you do or use to prevent pregnancy. If you have already had conversations with your child about how a pregnancy begins, it will make it easier for them to understand how contraception works. A pregnancy begins when a sperm and egg join and then implant into the uterus (conception). Contraception is something you do to stop the egg and sperm joining – which means there is no pregnancy. There are a number of highly effective contraceptive options available for young people. Here are some ways to explain some of the contraceptive options to your teen:

**Condoms (external)**

“Condoms fit closely over an erect penis. They collect semen and stop it from entering the vagina. Condoms are highly effective if they are used correctly (which means putting it on and taking it off correctly and using water-based lubricants). Condoms are the only form of contraception that protects against getting or passing on STIs. They can be bought from chemists, supermarkets, vending machines in toilets and petrol stations. There are also lots of sexual health services that provide them for free.”

**The Pill**

“The Pill contains hormones that stop the release of an egg from the ovaries. It is taken every day at around the same time and is highly effective at preventing pregnancy. It can also be used to control painful or heavy periods and improve acne. The Pill allows a woman to choose the timing of her period or to not have a period at all sometimes. Missed or late pills, vomiting, diarrhoea and some medications can stop the Pill from working. A prescription is needed from the doctor to get the Pill.”

**Implant (‘The rod’)**

“An implant is a small plastic rod that a health professional inserts under a girl’s skin (usually in the arm). It slowly releases hormones that stop the release of an egg from the ovaries each month. It is highly effective and lasts three years, but can be removed at any time by a health professional.”

**IUD (Intrauterine device)**

“An IUD is a small T-shaped device that is put into the uterus by a health professional. There are two types – one that releases hormones and one that is made using copper. Both stop the sperm from meeting with the egg. Depending on which type you use, they last between 5 and 10 years, but can be removed at any time by a health professional.”

**Injection (Depo)**

“A health professional can give an injection with a hormone that stops the release of an egg from the ovaries each month. These last 12 weeks so regular visits to the doctor or nurse are needed.”
Emergency contraception (sometimes called the ‘morning after pill’)

“Emergency contraceptive pills (EC) are used to reduce the risk of pregnancy after penis-in-vagina sex has occurred without the use of contraception or when contraception has failed (e.g. a broken condom). There are different types of EC but both work by delaying the egg from being released. It is most effective the sooner it is taken but can be effective for up to 4 or 5 days after sex (depending on which type of EC is used). They do not cause an abortion. EC is available over the counter at most pharmacies and sexual health clinics. They do not need a prescription but the chemist will need to ask some questions to make sure the right medication is given.”

Young people report some barriers to getting prescribed contraception including embarrassment in discussing their sexual health, concerns around confidentiality and expense. Show your teen how to get their own Medicare card at age 15 and encourage them to speak to their doctor or to phone the Sexual Health Helpline (08) 9227 6178 (Metro) or 1800 198 205 (Country) to help them decide which contraception is best for them.

Facts young people need to know if they are going to have penis-in-vagina sexual intercourse.

- A girl can get pregnant the first time she has sex.
- A girl can get pregnant even when she has her period (or has just finished it).
- Sperm can stay alive in a girl’s body for up to five days after sex.
- ‘Pulling out’ (withdrawal method) is not a very effective form of contraception – sperm can be present in the ‘pre-cum’ (and it doesn’t protect against STIs).
- Not having any sexual activity where sperm can come in contact with the vagina (abstinence) is the only 100% effective method of avoiding pregnancy.
- Condoms are the only form of contraception that protects against getting or passing on most STIs.
- If young people are going to have sexual intercourse, using a condom and a long-acting reversible contraceptive (LARC) at the same time offers the best protection from unplanned pregnancies and STIs. LARCs are a ‘fit and forget’ contraceptive methods – they last a long time and young people don’t have to remember to take or use them (e.g. ‘the rod’ and IUDs).
- Doctors and sexual health clinics can help young people to decide the best contraception for them, answer any questions they have, and offer them STI checks. Many services are free or low cost for young people.
If no contraception was used or if the contraception has failed (e.g. the condom slipped off or broke) then a pregnancy may occur (when having penis-in-vagina sex).

A missed or late period is the most obvious sign of pregnancy, but it doesn’t always mean someone is pregnant. Other signs of pregnancy may include:

- sore breasts
- breasts getting bigger
- nipples getting darker
- weight gain
- nausea and vomiting
- unusual tiredness
- weeing more often.

If a young person thinks they might be pregnant, it is important to get confirmation of the pregnancy as early as possible. A urine pregnancy test (which involves ‘weeing on a stick’) is quick and generally very accurate and can detect a pregnancy from around the time of the first missed period. These are available at pharmacies and supermarkets but results should be confirmed by a health professional.

If a young person has had unprotected sex, then an STI test is also recommended.

Sexual Health Quarters (SHQ) offers free, non-judgemental support including unplanned pregnancy counselling by phone or in person.

Visit shq.org.au or phone (08) 9227 6177 for more information.

In a survey of Australian Year 10 to 12 students, those who were sexually active reported that at their last penis-in-vagina sexual encounter they used the following method of contraception\(^2\):

- condom: 54%
- the Pill: 41%
- withdrawal method: 20%
- implant: 9%
- no contraception: 8%

Some reasons young people give for not using condoms include:

- I know my partner’s sexual history.
- I trust my partner.
- It just happened.
- My partner doesn’t like them.
- I don’t like them.
What young people need to know about STIs

Sexually transmitted infections (STIs) are very common in young people with the majority of notifications occurring in people under 30 years old. WA Department of Health figures show that chlamydia and gonorrhoea are most common in young women aged 15 to 24 and young men aged 20 to 24.

STIs and blood-borne viruses (BBVs) are passed on through body fluids such as semen, vaginal fluids and blood. Some are also passed on through skin-to-skin contact. Using condoms and getting regular STI tests are the best way for people to reduce their risks of getting or passing on STIs.

Things your young person needs to know:

- STIs can be passed on through unprotected vaginal, oral and anal sex.
- STIs are very common in young people but most STIs are easy to treat.
- Most people don’t have any symptoms at all but some may notice pain, discharge, itchiness, rash or sores in their sex parts.
- Because most people don’t realise they have an STI, they can spread very quickly and easily.
- If untreated, STIs can cause long-term harm (e.g. infertility).
- If young people are having sex, the only way to know for sure if they have an STI is to get tested.
- You can’t tell by looking at a person whether they have an STI or not.
- STI treatment is usually very easy. For some STIs it is just a single dose of antibiotics.
- You can be reinfected with an STI.
- Some STIs and BBVs can’t be cured but treatments are available to ease symptoms. (e.g. herpes and HIV).
- Condoms and dams (a thin latex square held over the anal or vaginal area during oral sex) reduce the risk of getting an STI.
- The Pill, contraceptive implants and injections and the Emergency Contraception pill do not protect you from STIs.
- People who are sexually active should consider getting tested once a year or when they have a new sexual partner.
- A test is very quick and easy. It usually just involves weeing in a specimen jar at the doctors or sexual health clinic. The urine sample is analysed in a laboratory.
- Sometimes blood samples and/or genital and mouth swabs are taken.
- The human papilloma virus (HPV) vaccination, given in high school, prevents genital warts and genital cancers (e.g. cervical cancer). It is important to have both doses for the best protection. (If a does is missed, a catch up dose can be given by a doctor.)
What you can do

Many teens worry about privacy and confidentiality when it comes to accessing health services. Concerns about judgement from their parents (and other family members and friends) can stop young people seeking help at all. Let them know that they have options:

• Advise your teenager where they can go to get an STI test – their doctor and sexual health clinics. Explain these tests are often free (or very low cost) for young people and are confidential. (See page 105 for a list of sexual health services.)

• Visit couldihaveit.com.au and show your teenager how they can access free online STI testing and information about STIs and safer sex.

• Let your teenager know that the Sexual Health Helpline provides confidential information by phone or email (metro 9227 6178, country 1800 198 205, email sexhelp@shq.org.au).

• At age 15, show them information online about how to get their own Medicare card. (Go to humanservices.gov.au/individuals/medicare for more information.)

• Talk to your teenager about My Health Record. Explain to them that their account becomes private at age 14 (and they have the option to opt out of this record altogether). (Go to myhealthrecord.gov.au for more information.)

When I was at school all we got shown were the ‘horror’ pictures of STIs. It made you think that you would know for sure if someone had an STI...which is not the case at all! Now there is so much information on the internet, it’s really hard to know what is real and what is not. Internet searches on topics like this bring up all sorts! It’s great to know reliable websites and services to use.

– Parent of boy 16 and girl 14
Relationships and sexuality education in schools

Schools have an important part to play in helping to develop well informed and confident young people. The teacher can lead discussions that children may not be able to have with their parents and provide the environment for students to consider important information, sometimes dispelling myths on the way. School programs have been found to increase parent–child communication about relationships and sexuality.

Most parents support sexual health education in schools, as long as they are informed about what will be covered. They want a partnership approach to ensure their kids get accurate, reliable sexual health education and would like teachers to have specialist training in this area.²⁷

Relationships and Sexuality Education (RSE) is part of the WA Health Curriculum for Kindergarten to Year 10 and covers all of the things listed on the cover of this chapter (page 97). It’s not just about sex, it’s about growing up, protective behaviours, respectful relationships, assertive communication, health literacy and much more.

Comprehensive RSE programs have been found to:

- increase young people’s confidence and ability to make informed decisions
- delay first experience of sexual intercourse and frequency of sexual intercourse
- increase the use of contraception
- reduce risk taking (lowering the chance of STIs and unplanned pregnancies)
- provide additional opportunities for young people to learn about and discuss relationships and sexual health issues outside their homes.²⁸

What you can do

- Ask what your child’s school is doing in RSE and how you can support them.
- Be an advocate for RSE. Talk to your child’s school about having parent workshops.
- Talk to your child about the lessons they do in RSE. Answer their questions and relate topics back to your own family values and beliefs.

For those kids who don’t get any information at home, school is the only place they will receive quality information about their bodies and sexual health, so it’s extremely important that there are mandated programs offered in schools so that our kids are safe and informed.

– Parent of boys 5, 8 and 10
The WA Department of Health Growing and Developing Healthy Relationships (GDHR) website provides support for schools including:

- content fully linked to the WA Curriculum
- lesson plans for Kindergarten to Year 10
- supporting activity sheets and illustrations
- background teacher notes
- guidelines on how, what and when to teach topics
- how to answer tricky questions
- professional development opportunities (including free teacher training with paid teacher relief)
- links to books, websites, reports, research and services.

Peter: Parents need to know that certain things are going to be broached as their children go through school. Ready or not, these things will come up in conversation.

Marie: Yes. Letting you know what the children will be taught at certain levels so that you are aware of what’s going to be going on, so that you can either complement that, or…

Peter: What questions you’re going to get asked.

Marie: Yeah, that’s right. So that you can get some information for yourself to complement what’s going on, so that you’re ahead of the game a bit. Or, you know, if you have real issues with something that’s going to be taught, you have an opportunity to say, “Well, I’m really not comfortable with my child being taught this.” Because, I mean, we know our children the best, you want to have that option of saying whether it’s religious beliefs or whatever, that you can say, that doesn’t go with my family …

- Parent of boy 8 and Parent of girl 10
If you would like further information to support your child’s relationships and sexuality education, the WA Department of Health have a number of free resources and websites available to parents, young people and schools.

**Get the Facts**

**getthefacts.health.wa.gov.au**

A website for 13 to 17 year olds with sexual health information and an ‘ask a question’ function.

If you’ve ever had sex without a condom you could be at risk of an STI.

**couldihaveit.com.au**

A website that offers young people free online STI testing and information on STIs and safer sex.

**Let’s Yarn**

**letsyarn.health.wa.gov.au**

This website provides tips and information for parents, educators and health professionals who are yarning with young Aboriginal people about sexual health topics.

This book was developed in consultation with Aboriginal mums, dads and carers to help teach kids to have strong, safe and healthy relationships.

**Boys & Puberty**

**Girls & Puberty**

**Relationships, sex & other stuff**

These books are for young people and cover topics such as emotional and physical changes of puberty, friendships, romantic relationships, sexual feelings, intercourse, consent and pregnancy.

Copies of these books can be ordered (free to WA addresses) by emailing SHBBVP@health.wa.gov.au.

Online versions can be found at gdhr.wa.gov.au/resources/booklets-and-brochures
The list of books and resources at the back of Talk soon. Talk often. has been invaluable and we have a good number of those in our family library that we read together or the kids read on their own.

– Parent of boys 5, 8 and 10
**Child protection**

**Child Abuse Squad** (WA Police)
Report child abuse by calling 131 444 or Crime Stoppers 1800 333 000
police.wa.gov.au/Your-Safety/Child-Abuse

**Child Protection Crisis Care Helpline** – (08) 9223 1111
or Country free call 1800 199 008.
Phone information and counselling service for people in crisis needing urgent help.

**Child Protection and Family Support** – (08) 9222 2555
or Country free call 1800 622 258
Protects and cares for WA children who are in need, and supports families and individuals who are at risk or in crisis.
dcp.wa.gov.au

**Child Protection Unit** (Perth Children’s Hospital)
– (08) 6456 4300
24-hour medical, forensic, social work and therapeutic service for children up to the age of 16 years who may have experienced some form of abuse.

**Kids Helpline** – 1800 55 1800
Free confidential 24/7 phone and online counselling service for 5 to 25 year olds in Australia.
kidshelpline.com.au

**Safe4Kids**
Child protection education teaching kids how to identify unsafe situations and seek help for schools and parents.
safe4kids.com.au

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**Domestic violence**

**1800RESPECT** – 1800 737 732
National sexual assault, domestic family violence counselling service. 24-hour confidential information, counselling and support service.
1800respect.org.au

**Women’s Domestic Violence Helpline** – 1800 007 339
or (08) 9223 1188

**Men’s Domestic Violence Helpline** – 1800 000 599 or (08)92231199

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**Drugs and alcohol**

**Alcohol and Drug Support Line** (Mental Health Commission) – (08) 9442 5000 or 1800 198 024
24-hour statewide counselling, information and referral service for anyone concerned about their own or another person’s alcohol or other drug use.
mhc.wa.gov.au/alcoholanddrugsupportline

**eSafety**

**eSafety**
Online safety information. Includes anonymous reporting of offensive and illegal content.
esafety.gov.au

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**LGBTI**

**Freedom Centre** – (08) 9228 0354
93 Brisbane Street, Perth WA 6000
A safe space, information, support and referral for young gay, lesbian, bisexual, queer, transgender and questioning young people.
freedom.org.au
Services and websites

Gender Diversity Services (Perth Children’s Hospital)
– (08) 6456 0202
Clinic K, Level 2, Perth Children’s Hospital
15 Hospital Avenue, Nedlands WA 6009
pch.health.wa.gov.au/Our-services/Mental-Health/Gender-Diversity-Service

Inclusive Education WA
Support for schools who want to ensure their school is safe and inclusive for LGBTI+ students.
waaids.com/item/773-inclusive-education-wa.html

Intersex Human Rights Australia
Support and education by and for people with intersex variations.
ihra.org.au

Minus 18
Youth driven network for Australian LGBTIQ youth.
Articles, workshops, resources and events.
minus18.org.au

Parents and Friends of Lesbians and Gays (PFLAG)
– 0404 594 699
Support for families and friends of people who are LGBTI.
pflagwa.org.au

Parents of Gender Diverse Children
Peer support for parents of transgender and gender diverse children.
pgcd.org.au

QLife – 1800 184 527
National phone or online counselling, resources and referral services for LGBTI+ people and communities.
qlife.org.au

Transfolk of WA
WA support service for Transgender people and their families.
transfolkofwa.org

Mental health

Headspace – 1800 650 890
National mental health services for 12 to 25 year olds.
headspace.org.au

Kids Helpline - 1800 55 1800
Free confidential 24/7 phone and online counselling service for 5 to 25 year olds.
lifeline.org.au

Mental Health Emergency Response Line
– 1300 555 788 (Metro) or 1800 676 822 (Peel)
For anyone involved in a mental health emergency. A list of local services can be found here:
mhc.wa.gov.au/getting-help/public-mental-health-services

Rural link – 1800 552 002
Regional WA help for mental health emergencies.

SHQ Counselling – (08) 9228 3693
Free, non-judgemental appointments, and/or phone counselling, for young people about sexual health and unplanned pregnancy issues.
shq.org.au/service/counselling

Suicide Call Back Service – 1300 659 467
Nationwide 24/7 phone, video and online counselling for anyone affected by suicide.
suicidecallbackservice.org.au

Youth Beyondblue – 1300 224 636
Suicide prevention phone and online chat support for 12 to 25 year olds.
youthbeyondblue.com
Services and websites

**Parenting and relationships**

**HealthyWA**
Information on parenting, immunisations, sexual health, safety and first aid, treatments and healthcare options.

**Ngala Parenting Line** – (08) 9368 9368 or 1800 111 546
Free call back phone service (8am to 8pm daily) for support to parents/carers of children up to 18 years.

**Parenting WA Line** – (08) 6279 1200 or 1800 654 432
24-hour phone service: information, support and referral service to parents, carers and families with children up to 18 years.

**Relationships Australia** – 1300 364 277
Relationship support to individuals, families and communities to help achieve positive and respectful relationships.
[relationships.org.au](http://relationships.org.au)

**Student Wellbeing Hub**
Resources for educators, parents and students on all aspects of health.
[studentwellbeinghub.edu.au](http://studentwellbeinghub.edu.au)

**Special needs**

**Autism Association of Western Australia**
– (08) 9489 8900 or 1800 636 427
Services to people with Autism.
[autism.org.au](http://autism.org.au)

**PIP (People 1st Programme)** – (08) 9227 6414
Sexual health counselling and education for people with a disability.
[people1stprogramme.com.au](http://people1stprogramme.com.au)

**Sexuality Education Counselling and Consultancy Agency (SECCA)** – (08) 9420 7226
Supports people with disabilities in their efforts to learn about human relationships, sexuality and sexual health.
[secca.org.au](http://secca.org.au)

**Sexual assault**

**Sexual Assault Resource Centre (SARC)**
– (08) 6458 1828 or 1800 199 888
24-hour emergency sexual assault (rape crisis) service in Perth for people 13 years and older.

**Regional support:**

Broome: **Anglicare** – (08) 9194 2400

Bunbury: **Waratah Women’s Support Centre**
– (08) 9791 2884 or 1800 017 303 (24-hour)

Gascoyne: **Gascoyne Public Health Unit**
– (08) 9941 0560

Geraldton: **Chrysalis Support Service Inc.**
– (08) 9964 1833 (24-hour)

Goldfields: **Goldfields Sexual Assault Resource Centre**
– (08) 9091 1922 or 1800 688 922 (24-hour)

Karratha: **Karratha Population Health West**
– (08) 9143 2221

Kununurra: **Anglicare** – (08) 9166 5000

Mandurah: **Allambee Counselling Service**
– (08) 9535 8263

South Hedland: **Acacia Support Centre**
– (08) 9172 5044 (24-hour)
Services and websites

Sexual health

Could I have It?
WA Health website that offers free STI testing and information for young people.
couldihaveit.com.au

Get The Facts
WA Health website providing reliable information and support on sexual health and relationships for youth aged 14 to 17 years. Includes an ‘ask a question’ section.
www.getthefacts.health.wa.gov.au

HealthDirect – 1800 022 222
24-hour general health information and advice.
healthdirect.gov.au/

Mooditj
A program for 10 to 14 year old Aboriginal young people run by Aboriginal community, health, education and youth workers who have completed the Mooditj Leader Training Program run by SHQ.
shq.org.au/education-and-training/mooditj-program

Royal Perth Hospital Sexual Health Clinic
– (08) 9224 2178
Level 4, Ainslie House, 48 Murray Street, Perth.
rph.wa.gov.au/Our-services/Sexual-Health

Sex & U
(The Society of Obstetricians and Gynaecologists of Canada). Real life approach to the questions and issues around sex and sexuality.
sexandu.ca

Sex Ed Rescue
Resources and information for parents on how deliver sex education to their children.
sexedrescue.com

Sexual Health Helpline – (08) 9227 6178 or 1800 198 205
Free confidential answers to questions by phone or email
sexhelp@shq.org.au

SHQ (Sexual Health Quarters) – (08) 9227 6177
70 Roe Street, Northbridge WA 6003.
Free and low cost confidential and non-judgemental sexual health services. Youth-friendly services include STI testing and treatment; contraception information and supply; unplanned pregnancy information and referral; counselling (free for unplanned pregnancy issues and those under 25).
shq.org.au

South Terrace Clinic – (08) 9431 2149
Fremantle Hospital A Block (entrance on South Terrace)
Sexual health treatment, screening, education. Free services, no Medicare card required.

The Line
A website for young people, parents and educators. Includes information and videos on topics such as friendships, relationships, gender, sex, bystanders and online communication.
theline.org.au

The Victorian Better Health Channel
Information on health and wellbeing related issues. Topics include masturbation, menstrual cycle, puberty, acne, female genital cutting and circumcision.
betterhealth.vic.gov.au

The Youth Educating Peers (YEP) Project
Supports and educates young people on relationships and sexual health through peer education.
theyepproject.org.au

Western Australian AIDS Council (WAAC)
Counselling, education and services for the prevention of HIV and the treatment and care of people living with HIV.
waaids.com
Books (and other written resources)

For parents and carers

*Boy puberty: how to talk about puberty and sex with your tween boy*, Cath Hakanson
For parents of boys aged between 9 and 13.

*The donor conception network* (UK)
Booklets and films written for children about conception via donor.
[dcnetwork.org](http://dcnetwork.org)

*Everything you never wanted your kids to know about sex (but were afraid they’d ask): the secrets to surviving your child’s sexual development from birth to the teens*, Justin Richardson and Mark Schuster (USA)
Written by doctors, a guide to coping with a child’s sexual maturation.

*For goodness sex: changing the way we talk to teens about sexuality, values, and health*, Al Vernacchio (USA)
Sex education for parents and teens promoting healthy sexuality, values and body image in young people.

*Girl puberty: how to talk about puberty and sex with your tween girl*, Cath Hakanson
For parents of girls aged between 8 and 13.

*The new puberty*, Amanda Dunn
Research and analysis of more complex questions of puberty.

*The new puberty: how to navigate early development in today’s girls*, Louise Greenspan and Julianna Deardorff (USA)
Support for girls going through puberty before age 10.

*Sex ed rescue*, Cath Hakanson
A comprehensive list of books on every sexual health topic.

*Sex, likes and social media: Talking to our teens in the digital age*, Allison Havey and Deana Puccio (UK)
A practical and humorous book co-written by a previous sex crimes prosecutor. Includes consent, respect, personal safety and negotiating relationships in the digital age.

*Sexual behaviours in children & young people: a guide to identify, understand and respond to sexual behaviours*, TRUE
A traffic lights framework for age related sexual behaviours and how to identify and respond to them.

*The sex education answer book: by the age responses to tough questions kids ask parents about sex*, Cath Hakanson
Age appropriate answers to questions about sex for parents of kids aged 3 to 14.

**LGBTI**

*First steps: supporting and caring for transgender children*, The Gender Centre Inc.
Shared stories and information from parents and caregivers of children who are transgender.
Books (and other written resources)

I think I might be transgender, The Gender Centre Inc.  
A booklet made by and for transgender youth.  
gendercentre.org.au/images/Services/Youth_Support/Youth_Information_Booklet_-Master.pdf

The gender creative child: pathways for nurturing and supporting children who live outside gender boxes  
Diane Ehrensaft (USA)  
The changing cultural, medical and legal landscape of gender and identity – providing positive support for children and families.

The transgender child: a handbook for families and professional, Stephanie Brill and Rachel Pepper (USA)  
Explores the unique challenges of raising transgender children.

**Special needs**

Making sense of sex: a forthright guide to puberty, sex and relationships for people with Asperger’s Syndrome, Sarah Attwood (UK)  
Plain and logical language, diagrams, explanations and practical advice for young people about puberty and more.

Puberty and special girls, Heather Anderson, Fay Angelo and Rose Stewart  
A puberty overview for girls with special needs (intellectual, physical, communication, Autism).

Sexuality and relationship education for children and adolescents with Autism Spectrum Disorder: a professional’s guide to understanding, preventing issues, supporting sexuality and responding to inappropriate behaviour, Davida Hartman (UK)  
This clear text covers gender, public and private, puberty, hygiene, emotions and sex with an overview of difficulties children with Autism might experience, discussion and activity ideas plus photocopiable resources.

Sexuality and severe Autism: a practical guide for parents, caregivers and health educators, Kate E Reynolds (UK)  
How and when to talk to children with Autism about sexuality and safety. Addresses male and female issues, public and private sexual behaviours, sexual abuse and more.

Sexuality, relationships and your rights, SECCA  
An image based booklet for young people with disabilities and/or limited English with a simple breakdown of laws and rights that all people have relating to sexuality, sexual health and relationships. Available in hardcopy and online  
secca.org.au/resources/sexuality-relationships-and-your-rights-resource

Sexuality: your sons and daughters with intellectual disabilities, Karin Melberg Schwier and Dave Hingsburger (UK)  
Ways to interact with your child to increase self-esteem, encourage appropriate behaviour, enjoy relationships and keep them safe from abuse.

Special boys’ business, Heather Anderson, Fay Angelo and Rose Stewart  
Supports boys with special need. Simple text and pictures.

Special girls’ business, Heather Anderson, Fay Angelo and Rose Stewart  
Takes a girl and her carer through the process of managing periods. Simple text with clear colourful pictures.

Talking to young people with intellectual disabilities about sex, Better Health: Victoria State Government  
betterhealth.vic.gov.au
Teaching children with Down Syndrome about their bodies, boundaries and sexuality: a guide for parents and professionals, Terri Couwenhoven (USA)
Factual information and practical ideas for teaching children with Down Syndrome about their bodies and sexuality.

The Aspie girl’s guide to being safe with men: the unwritten safety rules no-one is telling you, Debi Brown (UK)
Practical strategies for girls and women on the Autism spectrum for staying safe.

For younger children

A secret safe to tell, Naomi Hunter
A story about a child who has an adult friend whose touches makes her feel frightened and confused.
A nurturing resource to start conversations about sexual abuse and telling a trusted adult.

Everyone’s got a bottom, Tess Rowley
A story for 3 to 8 year olds to gently start conversations about protective behaviours.

It’s not the stork: a book about girls, boys, babies, bodies, families and friends, Robie Harris (USA)
Straightforward, humorous facts presented step-by-step.

Let’s talk about body, boundaries, consent and respect, Jayneen Sanders
Body ownership, respect, feelings, choices and recognising bullying behaviours.

The amazing true story of how babies are made, Fiona Katauskas
Common sense, facts, humour and cartoons, for children age 5 upwards.

What makes a baby, Cory Silverberg (USA)
A diversity friendly look at the different ways that your child may have ended up in your family – two dads, two mums, IVF, surrogacy, adoption, etc.

Who has what? All about girls’ bodies and boys’ bodies, Robie Harris (USA)
A simple story following Nellie and Gus on a family outing to the beach. Humorous illustrations, conversations between the siblings and a clear text on girls’ and boys’ bodies.

For older children

Boys & puberty + Girls & puberty (a 2-in-1 flip book), WA Department of Health
Free, easy-to-read informative book for children going through puberty – discusses physical and emotional changes.

Girl stuff for girls aged 8–12, Kaz Cooke
Puberty for the preteen age group: physical and emotional changes, managing friends and families, staying healthy, phones and being online.

Hair in funny places, Babette Cole
Mr and Mrs Hormone, two hairy monsters, mix potions that turn children into adults – showing changes during puberty.

Let’s talk about where babies come from, Robie Harris (USA)
How babies really begin, growing up, love, birth and adoption, ‘good’ and ‘bad’ touching.

Menstrupedia comic: the friendly guide to periods by girls
A comic that talks about puberty as a story.
menstrupedia.com
Books (and other written resources)

*Secret boys’ business,* Fay Angelo, Heather Pritchard and Rose Stewart
Helps boys understand the changes they go through when reaching puberty.

*Secret girls’ business,* Fay Angelo, Heather Pritchard and Rose Stewart
Girls puberty changes, dispelling myths, enhancing confidence and self-esteem.

*More secret girls’ business,* Fay Angelo, Heather Pritchard and Rose Stewart
A follow on to *Secret girls’ business* with a deeper understanding of puberty and sexuality.

*Sex is a funny word,* Cory Silverberg (USA)
Bodies, gender and sexuality for children ages 8 to 10 and their parents and caregivers. Inclusive of LGBTI and gender diverse youth.

*What’s the big secret? Talking about sex with boys and girls,* Laurie Krasny Brown and Marc Brown (USA)
Are boys and girls different on the inside? How do you tell girls and boys apart? Do girls and boys have the same feelings? Is sex a dirty word?

For teenagers

*2 minutes will change the way you think about consent,* CampusClarity (USA)
A video created by young people teaching consent through the analogy of asking to borrow someone’s phone.

[www.youtube.com/watch?v=laMtr-rUEmY](https://www.youtube.com/watch?v=laMtr-rUEmY)

*Boys’ stuff: boys talking about what matters,* Wayne Martino and Maria Pallotta-Chiarolli
What do guys think about friends, sex, sport, drugs and everything else that matters? Teenagers write about their lives in an honest, real and raw way.

*Consent: it’s as simple as tea,* Blue Seat Studios (UK)
A 2.49 minute video explaining sexual consent using the analogy of making a cup of tea.

[youtube.com/watch?v=u7Nii5w2Fal](https://www.youtube.com/watch?v=u7Nii5w2Fal)

*Let’s talk about sex: changing bodies, growing up, sex and sexual health,* Robie Harris (USA)
For pre-teens and teenagers talking about sex in a warm and reassuring way with a splash of humour. Suitable for 9 to 16 year olds.

Answers direct questions such as: What is a wet dream? How does milk get into the breasts? After sex do you get sick?

*Puberty girl,* Shushann Movsessian
This illustrated book lets young teens know what to expect, physically and emotionally.

*Relationships, sex and other stuff,* WA Department of Health
A free resource answering real questions in a straightforward, helpful way.


8. Richardson J, Schuster MA. Everything you never wanted your kids to know about sex (but were afraid they’d ask): the secrets to surviving your child’s sexual development from birth to the teens. New York: Crown Publishers; 2003.


13. Hunter C. Responding to children and young people’s disclosures of abuse. AIFS, Australian Centre for the Study of Sexual Assault; 2011.


25. Walsh J, Mitchell A, Hudson M. The practical guide to love, sex and relationships for years 7–10 [Internet]. Melbourne: Australian Research Centre in Sex, Health and Society, La Trobe University; 2016. Retrieved from www.lovesexrelationships.edu.au


