

## **SEXUALISATION OF CHILDREN AND YOUNG PEOPLE**

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## Family Planning NSW Submission

NSW Parliament Joint Committee on Children and Young People

“Inquiry into sexualisation of children and young people”

Family Planning NSW welcomes the opportunity to make a submission to the Joint Committee on Children and Young People's "Parliamentary inquiry into sexualisation of children." We make comment to this Inquiry primarily in regards to measures to assist parents in fulfilling their responsibility to protect and educate children and measures to educate children and young people and assist them in navigating the contemporary cultural environment.

## **Family Planning NSW**

Family Planning NSW is the leading provider of reproductive and sexual health services in NSW. We are experts on contraception, pregnancy options, Sexually Transmissible Infections (STIs), sexuality and sexual function, menstruation, menopause, common gynaecological and vaginal problems, cervical screening, breast awareness and men's sexual health.

We have five fixed clinics in NSW (Ashfield, Fairfield, Penrith, Newcastle and Dubbo) and use innovative partnerships to deliver services in other key locations across the state with more than 28,000 client visits annually. We also provide Family Planning NSW Talkline 1300 658 886, a confidential telephone and email information and referral service, connecting our expertise to people and communities across NSW.

We provide information and health promotion activities, as well as deliver best practice education and training in reproductive sexual and health for doctors, nurses, teachers and other health, education and welfare professionals.

Our services are targeted to marginalised and disadvantaged members of the community, including people from culturally and linguistically diverse and Aboriginal and Torres Strait Islander backgrounds, refugees, people with disability, young people, people from rural and remote communities and LGBTIQ people.

Our work is evidence-based, and shaped by our research through the Family Planning NSW Sydney Centre for Reproductive and Sexual Health Research, our published clinical practice handbooks on reproductive and sexual health, our nationally recognised data and evaluation unit and validated through our own extensive clinical practice.

## Our Services to Young People

Family Planning NSW believes that everybody in every family should have access to high quality clinical services and information, and a key focus area for Family Planning NSW is enabling young people to maintain good sexual health by providing youth-targeted information and services. The services we provide to assist young people include:

- youth-friendly reproductive and sexual health clinics across NSW
- health information via factsheets and FAQs on our website as well as workshops on topics including puberty, respectful relationships, sexually transmissible infections and contraception
- TalkLine: our free and confidential information phone line and email service.
- training, information and resources for teachers and educators to enable them to deliver holistic education in the area of sexuality, relationships, and reproductive and sexual health.
- Information for parents on discussing reproductive and sexual health with their children.

We provide clinical services to young people – over 3 830 people aged under 25 years visited our clinics in 2014-2015 – and we engage with young people across the state in promoting reproductive, sexual health and healthy relationships information. Over the last year we provided over 1000 health promotion sessions to over 7000 young people on topics including puberty, STIs, contraception, safe sex, respectful relationships, bullying and unintended pregnancy.

## Reproductive and Sexual Education in Schools

Family Planning NSW is committed to building the capacity of primary and secondary school teachers to deliver age appropriate information on reproductive and sexual health to their students in accordance with the NSW curriculum. We have worked in partnership with the Department of Education and Communities for many years, building the capacity of teachers to provide high quality reproductive and sexual health education to students as well as the provision of targeted health promotion and professional education programs and activities such as the *Beyond the Birds and Bees* workshop (for primary school educators) *Beyond the Nuts and Bolts* (for secondary school PDHPE teachers and youth workers) and *Sexual Health Education for Life* (primary and secondary school teachers of students with intellectual disability).

Since 2014 Family Planning has also delivered the **Safe Schools** Coalition program in NSW which provides professional development to teachers and education staff to equip them to create safe, supportive learning environments, particularly for same sex attracted transgender and intersex students. Safe Schools is federally funded by the Australian Government Department of Education and Training.

Family Planning NSW professional development courses for teachers are endorsed by the Board of Teaching and Education Standards NSW (BOSTES) and all of the resources and training programs developed follow NSW curriculum.

## Reproductive and Sexual Health in Australia: Young People

Young people in Australia face significant sexual health concerns with epidemiological data showing a higher prevalence of STIs, lower rates of condom use, higher rates of unplanned pregnancy and barriers to accessing health services.

Half of all pregnancies in Australia are unintended and about one in four pregnancies are terminated. The majority of unintended pregnancies result from either not using contraception or using contraception incorrectly while having sex and women aged between 20-24 years have the highest abortion rate. In 2010 the number of live births by teenage mothers was highest in Queensland (nearly 3 700), followed by NSW (approximately 3000).<sup>1</sup>

Chlamydia notification rates increased from 122 per 100 000 in 2002 to 358 per 100 000 population in 2011 with high notification rates in young women (2231 per 100 000 among women aged 15-19 years and 2184 per 100 000 women aged 20-24 years). The number of notified cases of gonorrhoea doubled from approximately 6400 in 2002 to just over 12 000 in 2011 with high notification rates among young men (213 per 100 000 men aged 20-24 years)<sup>2</sup>.

It is evident that the decisions young people are making about their reproductive and sexual health can have a profound impact on their lives, and it is important to ensure that young people understand their health and the options available to them so they can enjoy high quality reproductive and sexual health.

## Sexualisation, culture and young people

Numerous studies<sup>3</sup> indicate that mass media contributes to the socialisation of young people, and contributes to shaping their sexualities.

Young people's lives are heavily intertwined with technology, thus increasing the potential for exposure to sexualised material through day to day activities, including through billboards, television, magazines, newspapers, Facebook and social networking sites, music videos, site newsfeeds, and video sharing sites including YouTube. Digital technologies allow 24-hour access to media content.

Research also indicates that young people are increasingly exposed to pornography prior to the age of 18<sup>4</sup>, both inadvertently and intentionally, young people being exposed unintentionally through mediums such as social networking sites (Facebook, Twitter, Blogs and other apps including

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1 [http://www.fpnsw.org.au/rshinaust\\_book\\_webedition\\_1.pdf](http://www.fpnsw.org.au/rshinaust_book_webedition_1.pdf)

2 [http://www.fpnsw.org.au/rshinaust\\_book\\_webedition\\_1.pdf](http://www.fpnsw.org.au/rshinaust_book_webedition_1.pdf)

3 Goldman, J. (2000) 'Sexuality Education for Teenagers in the New Millennium', Youth Studies Australia 19: 11–17. Huston, A.C., E. Wartella and E. Donnerstein (1998) Measuring the Effects of Sexual Content in the Media: A Report to the Kaiser Family Foundation. Menlo Park, CA: Henry J. Kaiser Family Foundation. URL (consulted November 2006): <http://www.kff.org/entmedia/1389-content.cfm>

<sup>4</sup>Bryant, C. (2009). Adolescence, pornography and harm. Trends & issues in crime and criminal justice, (368). Retrieved October 17th, 2014 from: <http://www.aic.gov.au/publications/current%20series/tandi/361-380/tandi368.html>

Snapchat, WhatsApp and others similar to these). Pornography is often seen as a tool for exploration in young people at a transitional time in their lives<sup>5</sup> and various researchers have highlighted concerns that exposure to pornography and sexually explicit messages during adolescence could potentially lead to various negative consequences including: changed values and attitudes about sexual activity and behaviour, earlier promiscuity, sexual offending and deviance or sexually compulsive behaviour.

A large amount of activities portrayed within pornography are of non-mainstream behaviours or attitudes for the general population, including young people's sexual practices and many contain content and behaviours void of intimacy and tenderness and typical to societal gender stereotypes femininity being inferior to masculinity.<sup>6</sup> The foundations of safe sex and issues of consent are largely absent.

### **Comprehensive relationships and sexuality education to assist schools and parents**

It is a common misconception that providing young people with information about reproductive and sexual health will encourage them to become sexually active at a younger age. Research has shown that young people who are well informed about reproductive and sexual health are more likely to wait until they are older before becoming sexually active – and more likely to access contraception and practice safer sex when they do so.<sup>7</sup>

Equally, providing good, evidence-based, responsible and age-appropriate relationships and sexuality information should not be confused with 'sexualisation' and the sexualised images used in marketing and media. Children are naturally curious about sexuality and relationships and education enables them to understand their bodies, make informed decisions, develop protective behaviours and build healthy self-esteem and identity.

Given the widespread availability of sexualised images and pornography and concern about sexualisation of children, it is more important than ever to provide young people with accurate information about sexuality and relationships from trusted experts that counterbalances and helps them navigate the messages they see.

In order to assist young people understand their reproductive and sexual health, their sexuality and respectful relationships, comprehensive relationships and sexuality education (CRSE) education

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<sup>5</sup> Holloway, D., Green, L. & Quin, R. (2004 Oct 11). What Porn?: Children and the Family Internet, M/C Journal, 7(4). Retrieved Oct 10 2004 from [http://www.media-culture.org.au/0410/02\\_children.php](http://www.media-culture.org.au/0410/02_children.php)

<sup>6</sup> Bridges, Wosnitzer, Scharrer, Sun and Liberman, (2010) Aggression and sexual behavior in best-selling pornography videos: A content analysis update. *Violence against Women*, 16, 1065–1085. doi:10.1177/1077801210382866

<sup>7</sup> Kirby, D. 2011, The Impact of Sex Education on the Sexual Behaviour of Young People. Department of Economic and Social Affairs, United Nations New York. [http://www.un.org/en/development/desa/population/publications/pdf/expert/2011-12\\_Kirby\\_Expert-Paper.pdf](http://www.un.org/en/development/desa/population/publications/pdf/expert/2011-12_Kirby_Expert-Paper.pdf)

Kirby, D., Laris, B.A. and Roller, L., 2005) Impact of Sex and HIV Education Programs on Sexual Behaviors of Youth in Developing and Developed Countries. Working paper Series No.2. Family Health International. [https://www.iywg.org/sites/iywg/files/youth\\_research\\_wp\\_2.pdf](https://www.iywg.org/sites/iywg/files/youth_research_wp_2.pdf)

becomes essential. Rather than traditional sex education which has a limited focus on the biology of the reproductive system and contraception and the negative outcomes of sexual behaviour, CSRE focusses on empowering young people with age appropriate information on respectful relationships, attitudes and values, affection, intimacy, body image, and gender roles in addition to education about the reproductive system, healthy sexual behaviours and preventing unplanned pregnancies and STIs.

CSRE should be available to all children and young people regardless of culture, disability or sexual orientation and the diversity of populations of young people in the community should be addressed and included in the planning and delivery of reproductive and sexual health education and information.

Young people from marginalised communities are a particular priority for sexual health information and education as research shows they are at greater risk of unplanned pregnancy and STIs. Sexual health issues for same sex attracted young people should be covered in sexual health education, particularly given that indications are that same sex attracted young people may also be at greater risk of STIs and pregnancy than heterosexual young people. Young people with a disability face particular challenges with regard to sexuality and people from culturally and linguistically diverse backgrounds may have particular sensitivities around the delivery of sexual health education.

Aboriginal people in Australia often experience higher rates of family violence and poorer reproductive and sexual health outcomes than other Australians, and continue to be overrepresented in notifications of sexually transmissible infections (STIs). Rates of teenage pregnancies and STIs in Aboriginal youth are also higher than in non-Indigenous youth. Aboriginal youth may have levels of health education and sexual health knowledge that are lower than that of their non-Indigenous counterparts, which may contribute to lower health literacy and lower levels of awareness of personal risk. Comprehensive sexual health education that includes social and emotional well-being within a culturally appropriate framework is essential in addressing the reproductive and sexual health within Aboriginal communities.

It should also be noted that there are substantial gender differences between young women and men in the area of sexuality and sexual health which must be addressed in the provision of appropriate sexual health education and services.

CSRE should be well resourced, monitored, based on proven effective methods and accompanied by professional development for teachers. Teachers are key to delivering CSRE and a whole-of-school approach should be adopted that also recognises parents, guardians and carers as a primary source of sexuality and relationships education for their child.

Parents play a vital role in the education and protection of their children; they are the first educators of children around sexuality and relationships which should ideally start before the child begins school. Parents require education, resources and support to provide their children with accurate information.

Parents are important partners with schools and the education system should continue to work with parents to ensure that sexual health education is accurate, age and stage appropriate and easily understandable.

It is critical that the *Australian Curriculum: Health and Physical Education* and the NSW syllabus explicitly supports teachers, schools and parents to be central influencers in the area of reproductive and sexual health. We support the approach of the NSW Syllabus regarding giving concrete and explicit direction to teachers on a comprehensive, age-appropriate sexuality education that includes reference to contraception, condoms and reducing the risk of STIs, particularly for students from Year 7 to 10. The *Australia Curriculum: Health and Physical Education* currently provides no guarantee that these students learn about the risks of sexual activity and how to minimise those risks.

The inclusion of education regarding safe and respectful relationships is also critical in the primary school years, ensuring the foundations are established early so they are able to make informed and responsible decisions in the future. The implementation of child protection strategies and education within schools is an important means of addressing sexual assault and violence against children and young people. Consideration should also be given to including issues of diversity in family structure within the primary school health and physical education curriculum.

The importance of educating young people on responsible use of technology and keeping within the law has been highlighted in recent years as the use of social media and devices has evolved. There may be a need to further enhance relationships and sexuality education to include not just up to date information on 'sexting' and use of social media but also resources, training and educational tools for youth specialists (teachers, youth workers, case workers etc.) to engage with young people confidently around issues arising from exposure to pornography and sexually explicit material and educating young people on 'real vs fake' aspects of sexuality and relationships seen in pornography and SEM so that young people are assisted in navigating the messages they see.

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Yours sincerely,

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