



MARCH 31, 2017

## **WHAT WE HEARD...**

**TALKING ABOUT SEXUAL HEALTH WITH YOUTH IN WATERLOO REGION**

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## **What we heard....**

### **Talking to youth about sexual health in Waterloo Region**

#### **Who we are and why we did this**

The AIDS Committee of Cambridge, Kitchener, Waterloo and Area (ACCKWA) has a Youth Sexual Health Department offering education and outreach services to youth in Waterloo Region. Programming aims to empower youth to manage their sexual health by developing skills, increasing self-efficacy, and improving access to resources. ACCKWA provides free workshops for youth as well as for parents, educators, and service providers who work with youth. They conduct one-on-one risk reduction counseling, and outreach at local events, on social media, and via text. The program also operates Doin' It, a confidential, non-judgmental sexual health online resource for youth in the Region.

From February to March 2017, ACCKWA hired us - The O'Halloran Group, an independent research and evaluation organization - to conduct a series of focus groups with youth connected to various community organizations in the Region. The purpose of the conversations was to understand why young people do or do not want to have safer sex, what would help young people have safer sex, and any thoughts or ideas about ACCKWA.

#### **What we did**

We facilitated three focus groups with a total of 20 youth. Participating youth were recruited through three community organizations that support youth with addictions (n=5), pregnant and parenting youth (n=8), and youth in conflict with the law (n=7). We asked participants for their thoughts and ideas about safer sex. We did not ask participants to talk about their personal experiences with sex, only about their experiences with sexual health information and education. See Appendix A for a copy of the focus group questions and consent form.

Participation in a focus group was confidential and voluntary. We did not ask participants for their gender or other identifying information. Youth were provided with a \$10 gift card for their participation regardless of whether they responded to questions and how much information they shared.

Conversations lasted up to 90 minutes. Responses to questions were summarized using thematic analysis, which identified dominant themes and issues.

#### **Acknowledgements**

We would like to thank members of the community agencies who helped invite participants for our focus groups. We would also like to thank those youth who took the time to provide their valuable input in open, honest and respectful conversations. We are grateful for their time, feedback and support. These are their thoughts and ideas.

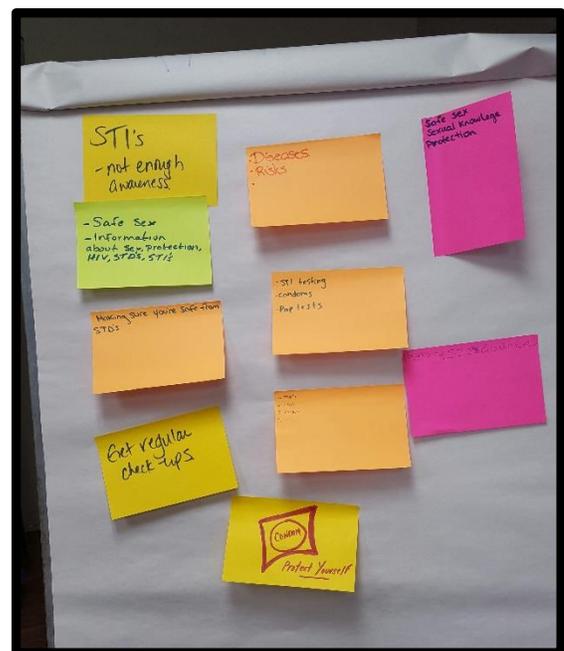
## What we heard (findings)

The following report summarizes what we heard from 20 youth who shared their thoughts and ideas about sexual health and safer sex. Our focus group conversations created an opportunity for youth to ask questions about sexual health. Sometimes these questions were directed at us, the focus group facilitators, and sometimes they were directed at each other. Most participants appeared candid and comfortable during our conversations which allowed us to talk about the reasons why young people do or do not want to have safer sex. We talked about the various factors and systems that impact a person's ability to practice safer sex, as well as the tools, resources, or programs that would help them. Some participants were familiar with ACCKWA and some remembered attending an ACCKWA workshop but were unfamiliar with the organization.

Our conversations started with an activity that asked participants to write down, draw, or shout out what comes to mind when they hear the words "sexual health." Most participants shared their ideas on paper. Some of their responses are displayed in this report. Most participants indicated that they think of sexual health as everything from using a condom to having healthy relationships. This conceptualization included mention of body image, understanding sexually transmitted infections, unplanned pregnancy, using substances and having sex, internet safety, and LGBTQ identity.

We heard that fear of STIs, HIV, unplanned pregnancy, and other consequences of unsafe sex can both facilitate and hinder safer sex and hinder sexual health practices for youth. Some participants said that more youth need to fear the consequences of unsafe sex to engage in safer sex practices. Other participants said that youth may not get tested for STIs and HIV because they fear the results.

Overall, participants indicated that practicing safer sex is an individual choice; but that choice is affected by societal attitudes, access to information, practical and economic resources, as well as peer and parent support.



## Why youth are not having safer sex

Some participants expressed a general apathy toward the subject of sexual health and safer sex because they said “just don’t care” about the potential consequences of unsafe sex.

Participants said they would care more if they were to contract an STI, HIV or get pregnant unexpectedly. It is difficult to determine if this apathy is genuinely experienced by individuals or just expressed in group conversation. Many participants expressed apathy about unsafe sex with qualifications that they “know they should care, but just don’t.” For example, some participants said that they know they should use condoms but they do not because it reduces pleasure or they are unconcerned about the consequences in the moment of having sex. Participants indicated that they prioritized immediate gratification over longer term considerations of safety and health.

Beyond this expressed apathy, participants told us that youth are not having safer sex because sexual health is a taboo subject, is minimally discussed in school, and has left students wanting more from the education system. Safer sex attitudes and behaviours are also influenced by the media, sex work opportunities, and gender roles.

### Sex as taboo

We heard that sex and sexuality is surrounded by an army of social norms, religious restrictions, moral taboos and stigma. Many participants commented on these norms, restrictions, and taboos as potential reasons why people may not want to have safer sex because there are limited opportunities to openly discuss and access safer sex resources. For example, one participant said,



*There’s such a taboo around sex that when it comes to getting condoms people wonder what the cashier is going to think. And they don’t want to talk to their parents about it because its like ‘Oh my God, no! You don’t have sex!’ If it was a more open concept and people were more accepting of it, I feel like people would be more comfortable to find the resources or go get themselves checked.*

Here, this participant was reflecting on comments about a lack of parental support for safer sex practices. Some participants said youth do not carry condoms because they are worried that their parents would “get mad if they found them.” Many participants described the challenges of accessing information and dialogue with parents to support safer sex and sexual health. Some participants said that youth may not want to get tested for STIs because they are afraid that their parents will find out. Some participants commented that they do not carry condoms because they are embarrassed to buy them at a store.

Cultural and religious norms may compound this challenge. For example, one participant commented that sex is a taboo subject in families from various cultural and ethnic backgrounds. Another participant referred to their experiences in Catholic school where safer sex was described only as abstinence. This discussion of sex as taboo related to the lack of sex education in Catholic and public schools.

### **Sex at school**

When we asked about the challenges for youth when it comes to safer sex, many participants told us that there is not enough sex education in school. Many participants said that youth in school sex education are lacking sufficient information about STIs because the curriculum content is limited. This lack of information may lead people to engage in unsafe sex because “they think it won’t happen to them.” It could also influence the likelihood of getting tested for STIs or HIV.

When we asked participants to tell us about their experiences with sex education in school they described it as boring, repetitive, and irrelevant. Many participants noted that in-school sex education did not appeal to their learning styles. Many participants said they do not learn well in a traditional classroom setting which hinders their capacity to apply their learning.

Overall, most participants said that sex education in school should be more comprehensive. This means that topics should include body image, understanding sexually transmitted infections, unplanned pregnancy, using substances and having sex, internet safety, LGBTQ identity. This also means that sex education in schools should appeal to various learning styles. Some people may learn best visually, audibly, or interactively. Information shared on a variety of topics over the course of elementary and secondary school would potentially encourage more youth to practice safer sex.

However, even with this education, some participants indicated that there are other influences on youth sexual behaviour. These influences include the media and gender roles.

### **Sex in media**

Several participants commented that body images portrayed in online pornography and the broader media have potential negative effects on youth having safer sex. Online pornography was raised several times during our discussions. Many participants said that youth will watch porn to learn “what to do,” like sexual positions and manoeuvres. However, porn usually does not show people using condoms or other safer sex practices.

Participants raised several questions about the realism and historical development of porn. Several participants said that most porn sets unrealistic expectations about sexual relations

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which can negatively effect an individual's esteem and confidence in their sexual behaviour. These questions indicate a gap in knowledge about pornography, especially in terms sexual health and safer sex.

Participants said that images of male and female bodies in the broader media, such as advertisements, television shows and movies, can lead some youth to feel badly about their own bodies and can impact their self-esteem. Participants said that youth with a lower sense of self-esteem may feel less confident or empowered to engage in safer sex practices. Some participants said that sexual health is linked to being comfortable with your own body. Being comfortable in one's own body affects the comfortability in sexual situations and thoughtfulness about one's sexual partners. Specifically, one participant said if they are comfortable with their own body, they will be more selective with their sexual partners and cautious in their actions.

### **Sex work**

A few participants told us that sex work is a growing concern for youth in Waterloo Region. These participants said that they know young men, women and transgender people are being drawn into the sex trade to earn money. This issue was also linked to discussions about the dangers of sex work conducted in secret, hidden places where workers are unprotected by the law. Engaging in sex work poses risks for safer sex, especially for workers who may be in a vulnerable or disempowered position to negotiate safer sex. Participants said that some young sex workers will require condom use but others do not. Participants raised questions around the legality of prostitution and protection of sex worker safety, particularly for young women.

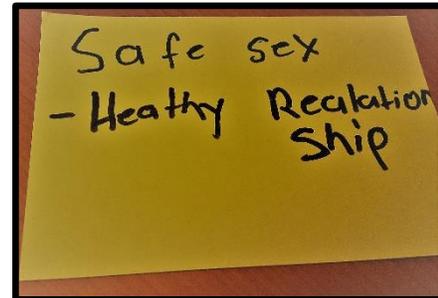
### **Sex and gender**

Participants indicated that our society is particularly restrictive and prescriptive in its attitudes about sex when it comes to women. This idea was challenged by some participants as a socially constructed notion of women and sex. For example, some participants challenged this notion when they heard other participants describe girls that attend Catholic school as 'slutty'. Participants challenged this notion as a stereotype that negatively and inaccurately portrayed young Catholic women.

According to some participants we talked with, safer sex and sexual health is more of a concern for girls than boys and was accepted as the way things are. One participant said this is because young men "*only gotta worry about one dick and with girls you need to worry about all the dicks.*" This comment was described without challenge and was part of a conversation about parental support for sexual health and safer sex among youth. The conversation indicated that safer sex practices is a female responsibility. Participants indicated that young males may prefer to enhance their "pull out game" rather than wear condoms. This means that youth will withdraw to prevent pregnancy and brag to their friends that their "pull out game is strong."

Similarly, some participants said that condom use depends on “whether the guy says no.” This means that some young hetero women may ask their male partners to use condoms, but may not insist on using them.

Many participants discussed safer sex in relation to healthy relationships between partners. A healthy relationship was described as one that supports positive self-esteem, confidence and equality between partners. A healthy relationship includes safer sex and negotiation of sex practice.



### **What youth need for sexual health and safer sex**

Most participants indicated that **youth in Waterloo Region would like to learn more** about sexual health and safer sex. For example, one participant said that sexual health information and education, “*might not change your life, but if you have information in the back of your mind it might make you make good decisions.*” In this respect, many participants said that sex education needs to begin early in life. They said that young children need to know that “*no means no and sometimes yes means no.*” This meant that some young children may want to please adults in their life and would consent to sexual activities even though they are unaware of what they are participating in. In other words, participants said that young children need to be aware of the possibility of sexual abuse. They also said that youth **need to know more about consent and substance use**. Some participants said that youth who are intoxicated should be considered unable to provide consent. They also said that youth need to be aware of the potential risks of having unsafe sex while intoxicated.

Many participants said **they would like information presented in diverse formats** using alternative teaching methods. Many participants said they like interactive learning where they get to engage in hands-on activities, such as practicing putting condoms on. Several participants also said they would like to learn from guest speakers with lived experience of HIV or other STIs. These lived experiences could help youth to personalize the consequences of unsafe sex.

Many participants also said that **youth may be attracted to incentives to participate in learning** opportunities and referred to the \$10 gift card we provided for their participation in our focus groups. Incentives could include taking time out of school classes to participate in a workshop or assembly. Incentives could also include offering food, free condoms, and/or gift cards.

Our conversations indicate that youth may need more information about a few topics. For example, participants said that youth need:

- **More information about STIs** – Participants said that youth need to know more about STI transmission, symptoms, testing sites, and local prevalence rates. Participants said that youth who are not informed about STIs may not get tested. Youth need to know about local testing sites, accessing results, and confidentiality.
- **More information about pornography** - Youth may need more information about the historical context, production, and effects of pornography on sexual health and safer sex.
- **More information about sex work** – Several participants told us that they are seeing an increase in the number of people engaging in sex work. Participants said youth need greater awareness of the risks and pathways into and out of sex work.

Youth may also need **advocacy support** for greater access to sexual health information and other resources in schools and communities. Many participants said there is a need for more comprehensive information about safer sex and sexual health starting in grade 5, 6, 7 and 8 when youth are starting to think about sex. Many participants commented that it would be easier to have safer sex if the subject was discussed more openly. Participants said that it would be easier for youth to learn about and engage in safer sex if the subject was not stigmatized and hidden from or by parents, and in public spaces such as schools and retail stores that sell protective products.

Overall, youth said they need easy access to information and practical resources for sexual health and safer sex. Participants said these resources need to be in locations that youth will frequent such as schools, bus stations, and other places that youth hang out. Participants said that youth need to know more about safer sex and healthy relationships in terms of abuse and why there is risk with “just going out and sleeping with whoever.” Participants indicated that promiscuity is an unsafe sexual practice and should be avoided. Participants indicated that youth who are having casual sex frequently with different partners or being indiscriminate in their choice of sexual partners, are engaging in unsafe or risky behaviour. Participants expressed judgment and opposition to promiscuity. As such, participants said that youth need to learn how to have conversations with sexual partners about their history and potential risk of STI transmission, as well as use of protection.

### **What we heard about ACCKWA**

Most participants told us they have attended at least one sexual health workshop facilitated by ACCKWA. These participants spoke positively of the workshop facilitators. They said they liked that facilitators were comfortable talking with youth about sexual health which helped them feel comfortable asking questions and learning. The informal facilitation and teaching style was described as beneficial for youth participants who resist formalities and rigidity. Participants



said they liked the openness and non-judgemental manner of facilitating dialogue.

Many participants also said they liked the variety of learning opportunities offered during ACCKWA workshops. Participants said they liked the hands-on learning during some ACCKWA workshops (i.e., putting condoms on wooden models). Those participants who attended a session with a guest speaker with lived experience of HIV said, “We’ll never forget that woman...Now her whole life has changed and that could happen to me”. Participants said this workshop experience was ‘heart-touching’ as well as taught them about transmission and the differences between HIV, AIDS, and STIs. This alternative teaching style was compared to the traditional, and apparently ineffective, style of “someone just standing at the front of the room and talking the whole time.” The information presented by ACCKWA was described as “not too hard and not too easy to learn” which meant that sessions were educational with the right level of challenge. Participants also liked the free condoms and gum.

Participants said that ACCKWA taught them:

- ✓ How to put condoms on
- ✓ A broader understanding of safer sex and sexual health
- ✓ About sexuality and gender fluidity
- ✓ The risks of internet dating
- ✓ The legal consequences of transmitting HIV
- ✓ Different perceptions of what/who is beautiful and stereotypes about beauty
- ✓ About various types of STIs.

### **Suggestions for improvement**

Participants shared a few suggestions that ACCKWA may consider to improve the youth sexual health program. In general, most participants said that ACCKWA should advertise more heavily to youth via an **increased social media presence**, pamphlets in schools, doctor offices, sexual health clinics, billboards at bus stops, etc. To enhance the quality of workshops, participants suggested:

- Facilitate more sessions more often. Participants said that youth are eager to learn.
- Facilitate longer sessions. Some participants suggested that too much info is crammed into each session and should be spread out over several sessions.
- Leave enough time for open discussion and question and answer periods. Participants indicated a sense of curiosity and posed several questions about sexual health and safer sex in the focus group. Consider how to tap into this inquisitiveness.

### **Concluding Remarks**

Knowledge can be used for many purposes. Knowledge can be used to exclude and marginalize, or unleash the creative potential and empowerment of every human being. As such, knowledge is a powerful resource. It is up to those with access to knowledge to decide how to use that resource. It can be used as power over others, such as we heard about the gender relations of



sex. It can also be used to support people to engage in meaningful, healthy and happy relationships.

ACCKWA already provides much of what participants said youth need for sexual health and safer sex. This report indicates that there is opportunity to provide greater access to knowledge and information to support youth to feel confident and stay healthy. According to participants we spoke with, ACCKWA may also consider enhancing their program through a targeted public relations campaign or marketing strategy to raise awareness of their services and supports. This process can encourage using the power of knowledge for action, to empower youth to become active participants in their own sexual health.

## **Appendix A: Focus group guide and consent form**

### **Youth Workshops Focus Group Guide**

#### **Introduction**

Welcome! My name is Alexis Buettgen, I'm a community researcher working with ACCKWA (AIDS Committee of Cambridge, Kitchener, Waterloo & Area).

ACCKWA is supporting youth on sexual health and other topics that matter to youth. They want to be sure they get it right. That's why we are talking to youth about their thoughts on sex and sexual health education. We want to know what works and what doesn't in learning and sharing information.

The purpose of our conversation today is to really get your thoughts and ideas about safer sex. I am not going to ask you to talk about your personal experiences with sex, only about your experiences with sexual health information and education.

Our conversation is confidential. If it's OK with you, I am going to record the conversation, just to help me remember what you said and then take notes afterward. Once I take notes from the recording then the recording will be destroyed. I will not use anyone's name in my notes. I ask that you keep what you hear today confidential as well and not share it outside the group. We will summarize what we have heard and prepare a written report for ACCKWA. ACCKWA will use the information to develop their services and workshops for youth. They may also share some of the findings with their funders and other community partners.

*Informed Consent Process – Read consent form aloud. Remind to sign one and keep a copy for themselves. Permit anyone the opportunity to leave and not continue with the group.*

Thank you for agreeing to participate.

We have different roles today. Your role is to share your thoughts and ideas about safer sex. We are hoping you can tell us what kinds of things will help people practice safer sex and what you might already know about ACCKWA.

My role is to make sure that everyone gets the chance to share their thoughts respectfully and to help keep this a safe space to talk, as well as keep an eye on the time. We don't want to keep you here too long!

I do have questions to guide our discussion, but please remember, there are no right or wrong answers. We don't expect everyone to agree. This is really your conversation. Please feel free to ask each other questions or share whatever thoughts and experiences you think will be helpful for us to get a good understanding of what youth like yourselves would like to see more of in terms of sexual health support.

Do you have any question before we begin?

*(Ice Breaker)* To get warmed up, I want you to tell me how you think our conversation today should go... For example, What should we talk about? What are the rules? I've given you my view and expectations... What are yours?

*[Alexis will take notes of participants' ideas to incorporate into the discussion as it proceeds]*

### **Discussion Guide**

For the first question, I've brought a bunch of yellow cards. When I ask the question, I want you to write down or draw what comes to mind. Write or draw one idea per card. You can use as many cards as you like. Once you've finished a card, put in the middle of the table, and I'll stick it up on the wall, then we'll talk about it as a group. *(Repeat directions so that it is clear for all participants. Double check as needed)*

Ready? Here goes...

1. When you think of **sexual health**, what comes to mind?

*For facilitating following discussion ...*

- Can you tell me more about this one?
- What does the group think?
- Anything you would add to this?
- Is there anything we should take down?
- What up here seems most important? Are any of these topics that could be part of a workshop?

These are all great ideas and are going to help the rest of our conversation. Just to make sure we are all on the same page, when I'm talking about **sexual health**, I'm talking about everything that has to do with sex and sexuality - everything from using a condom to having healthy relationships. It includes body image, understanding sexually transmitted infections, unplanned pregnancy, using substances and having sex, internet safety, LGBTQ and sexual orientation. So with that in mind,

2. What do you think is important for youth to know when it comes to sexual health?
  - a. What about when it comes to safer sex? What about when it comes to HIV and other STIs? What should youth know?
3. What are some of the challenges for youth when it comes to safer sex?
  - a. What are some of the challenges in using condoms & lube? Why don't youth use these? Why is that?
  - b. What would help youth in overcoming these challenges? How do you handle these challenges?

4. By show of hands, how many of you have ever attended a class or workshop or forum where you were given formal information about sexual health?
  - a. What did you learn at that workshop?
  - b. What did you like most about it? Why is that?
  - c. What did you not like about it? Why is that?
  - d. What would have made it more interesting?
  
5. Thinking about the challenges you mentioned earlier (*review*), did the sexual health workshop or class help address those in anyway?
  - a. If so, in what way?
  - b. If not, why was that do you think?
  - c. What more could have been done during the workshop to help address the challenges you mentioned?
  
6. Where do you go when you want information about sexual health? Why is that?
  - a. Where do you go to get condoms and lube? Why is that?
  - b. Where would you go when you are worried about pregnancy? Why is that?
  - c. Where would you go when you are worried about possible infection? Why is that?
  - d. Where would you go to get tested for HIV? Why is that?
  - e. Do you go to the internet for information? Why is that?
    - i. If so, what sites do you go to? What kind of information are you looking for?
  
7. Before today, had you ever heard of ACCKWA?
  - a. If so, what did you know about it?

*Give brief description of ACCKWA if needed*

8. Would you go to ACCKWA for information or support?
  - a. If so, why is that? What kind of information or support would be helpful to you?
  - b. If not, why not?
  - c. How would you like to get information about sexual health and STIs from ACCKWA?
  
9. If you had one piece of advice for ACCKWA in reaching out to youth about sexual health and STIs, what would that advice be?
  
10. Let's revisit the first thing we did regarding how you thought this conversation should go... (*review*) Did we cover everything? Is there anything else we should add?

Those are all the questions I had. Thank you so much for your time!



**ACCKWA Youth Sexual Health Focus Group  
CONSENT FORM**

The O'Halloran Group ([www.theohallorangroup.ca](http://www.theohallorangroup.ca)) is an independent research and evaluation organization working with the AIDS Committee of Cambridge, Kitchener, Waterloo and Area (ACCKWA) to help inform their Youth Sexual Health programs and services. ACCKWA's Youth Sexual Health Department offers education and outreach services to youth in Waterloo Region. Their programming aims to empower youth to manage their sexual health by developing skills, increasing self-efficacy, and improving access to resources.

The purpose of the focus group is to understand why people do or do not want to have safer sex, what would help people have safer sex and any thoughts or ideas about ACCKWA. We are very interested in understanding your perceptions of safe sex and sexual health services and programs. We want to thank you for taking the time to speak with us by giving you a \$10 gift card and we look forward to our conversation together.

Your participation in the focus group is confidential and voluntary. There are no right or wrong answers. You can feel free not to answer any questions you are not comfortable answering and can leave at any time and still receive your \$10 gift card. We want everyone to feel comfortable sharing their thoughts and ideas with us and with one another.

The focus group is being conducted by the researchers at The O'Halloran Group including Alexis Buettgen and Tanya Darisi. This conversation should take about 90 minutes. Your answers will be kept confidential to the research team at The O'Halloran Group. We will be recording our conversation and will take notes, but these will not be shared outside our research team. We will prepare a report that summarizes all our conversations with youth across Waterloo Region. No names will be mentioned in this summary.

If you have any questions about the focus group research you may contact Alexis Buettgen, Senior Researcher from The O'Halloran Group, at [alexis@theohallorangroup.ca](mailto:alexis@theohallorangroup.ca). You may also contact Carolyn Keays, Youth Sexual Health Coordinator from ACCKWA at [education@acckwa.com](mailto:education@acckwa.com) or by phone at 519-570-3687.

**CONSENT**

I have read and understand the above information, and I agree to participate in the focus group research.

Name of Participant: \_\_\_\_\_

Participant's Signature: \_\_\_\_\_

Date \_\_\_\_\_