Talk it like it is.
A guide to communicating with your children about life, love, relationships and sex.
Parents play an important role in providing sexual health information to their children. This is not always easy. Talking about sexual matters can seem embarrassing at times. This resource contains accurate information to help you feel more comfortable and confident in talking to your children about life, love, relationships and sex.

Adolescence can be a difficult and confusing time for young people. Their bodies start changing and hormones kick in. These physical changes often come before they have reached emotional maturity and have learnt how to use reasoning to cope with complex situations.

When adolescents are provided with information, skills and support services to make well-informed and responsible decisions, they are more likely to wait until they are physically and emotionally mature before becoming sexually active.

Open and honest communication can positively influence your child’s increasing need to make decisions in relation to their sexual health and relationships. It’s acknowledged that families have different religious, cultural and social values. It’s important to talk about these beliefs so your child can understand what influences your views and opinions.

How you address the issues raised in this resource is entirely up to you and your child. Ultimately you will know when it is appropriate to start talking about relationships and sexual health. But it’s never too early to start opening the channels of communication. It will make talking about the ‘big’ issues easier down the track.
Late Thursday night Ginny’s mum heard her daughter pull up outside the house in her boyfriend’s car. She waited and watched TV, but by the end of the ad break Ginny still wasn’t inside.

She knew her daughter was responsible. Usually they could talk openly and honestly about everything. But lately Ginny had started to become more independent. Ginny and Matt had been going out for a few months now and her mother knew things were getting serious.

Ginny’s mum was getting concerned. She went to the front door and called from the house, ‘Virginia, is that you?’. She heard the car door slam and returned to the couch.

A few minutes later Ginny came into the family room and plonked herself on the couch. She was thinking about the conversation she had just had with Matt. It wasn’t easy to talk to him about sex, but she knew he’d been thinking about it. Was she ready to sleep with him yet? She wasn’t sure.

‘Mum, can I talk to you about something?’ asked Ginny.

talk it tips

Ginny’s mum started talking about sex with her daughter when she was young. She’s always openly discussed her personal experiences, views and opinions on any topic. It’s been a natural part of their communication.

Ginny’s mum is aware that her daughter’s sexuality is part of her journey into adulthood. She understands that Ginny needs to start making her own decisions. She supports her growing need for independence and privacy.
As a result, Ginny has always been comfortable talking to her mother about anything, including her relationship with Matt. She feels that her mother understands her point of view and really listens. Their relationship has made it easier for Ginny to seek advice when she needs it.

**facts**

Believe it or not, most children want to talk to their parents about sex. As the main influence on their child’s life, parents are the most trusted source when it comes to sexual health information.

Children learn about their sexuality through the words and actions of their parents. So it’s important to be aware of your behaviour and talk openly and honestly about what you think, feel and believe.

Most young people are comfortable talking to parents about the factual information relating to puberty, sexual health and relationships. While it’s important to talk about sex, it’s equally important to:

- teach your child to value their own self-worth
- provide a supportive environment to express and celebrate their sexuality
- encourage your child to be aware and responsible for the decisions they make
- talk about your own values and beliefs
- encourage your child to explore their own values and beliefs
- reinforce that intimacy is as important as having sex

With your support and understanding, your child is more likely to have good relationships and be able to make healthy and positive choices in the future.
Earlier that day Matt came home from football training and jumped in the shower to get ready for his date with Ginny. Matt’s mum was about to do a load of washing and picked up his dirty clothes from the floor in his room. A condom fell out of his jeans pocket.

Embarrassed by the discovery, she quickly put the condom back and left Matt’s jeans on the floor where she found them. Where did he get it from? Did this mean he was having sex with Ginny? She didn’t know how to react or what to do next. She didn’t want to jump to conclusions.

She thought about talking to Matt, but he had never been willing to discuss anything personal with her in the past. He was much closer to his dad. Besides, the thought of discussing sex with her son made her feel too uncomfortable. What did she know about it?

talk it tips

Not all parents are going to be comfortable talking openly about sexual matters with their children. But without knowledge it’s more difficult for your child to make responsible decisions.

Matt’s mum knows that she has difficulties talking with her son about sex-related issues, but there are still things she can do to make sure Matt is prepared and has access to accurate information, including:

- leaving brochures from SHine SA or the local community health centre in a place where Matt will find them
- getting books or videos on sexual health
- leaving a packet of condoms in his bedroom
- posting a note on the computer with the web address for SHine SA or other sites
- arranging for Matt to have his own Medicare card so he can see a doctor whenever he wants
It’s important to try to talk to your child and let them know that you are there for them without criticism or judgment. If there are barriers, find another adult who both you and your child trust. Matt finds it easier to talk to his dad, so his mum could suggest that he speaks to his son.

**facts**

Safer sex means choosing sexual behaviours that protect both partners from:

- sexually transmitted infections (STIs)
- unplanned pregnancy
- violence, harm and exploitation

Condoms are the only method of contraception that greatly reduces the risk of STIs and unplanned pregnancy, and are readily available from supermarkets, pharmacies, sexual health clinics, petrol stations and vending machines.

Condoms help keep both partners safe, so it’s important to use them when having vaginal, anal or oral sex. Water-based lubricant should be used with condoms.

Of course, young people can also experience a range of safer sex practices that involve physical and emotional intimacy, and not necessarily sexual intercourse.
Friday at lunch Poppy had just finished eating her apple and threw the core and her uneaten sandwich in the bin.

‘Is that all you are having for lunch?’ asked Ginny.

‘Yep. I found this book of mum’s that lists the calories for different foods. Do you know how many calories there are in a ham sandwich? Too many. I keep asking her not to put butter on the bread, but she doesn’t listen. She says I look fine the way I am.’

‘You do look fine the way you are’ said Ginny. She’d met Poppy’s mum. She was always at the gym and watching her weight. Every few months she was trying the latest fad diet that she picked up from the celebrities in women’s magazines. Poppy and her mum didn’t have breakfast together. Their morning routine was getting on the scales.

‘Yeah, right. My dad said the other day that his little girl was turning into a woman with curves. I know what he really meant – I was getting fat. You should see his new girlfriend. She’s tall, thin and really pretty. She could almost be a model.’

‘You’re not fat!’ Ginny didn’t know how many times she felt she had to say this lately. ‘There’s more to life than what you look like, ya know. Models and TV stars spend lots of money to look the way they do. It’s not real.’ How could she convince Poppy that she looked great just the way she was? If she didn’t believe her parents, who was she going to believe?
talk it tips

Actions often speak louder than words. Like Poppy, children pick up messages about body image from their parents.

Even though Poppy’s mother is trying to encourage a positive body image for her daughter, she is sending different signals to her daughter about what’s important, through her obsessive need to be slim and attractive.

It’s important to let your children see that you feel good about yourself.

Think about how you say things. It’s just as important as what you say. Show your child that you love them and are interested in what they do and who they are. Celebrate the things your child does well.

Adolescents with high self-esteem, good communication skills and clear values, with access to accurate information and support, are more likely to make positive decisions about sexual health and relationships.

facts

Anxiety about body image generally increases for young people during adolescence. It’s a time when they are influenced by media representations of their ‘perfect peers’. Instead of celebrating their changing bodies, many end up hating themselves.

Low self-esteem can affect the choices that young people make about their sexual safety, including their physical and emotional wellbeing.

As parents, you can challenge your child to see their uniqueness in a positive way by celebrating their individuality and encouraging discussions that question media stereotypes.
On Saturday morning Matt’s dad went to watch his son play football. At half time he overheard some kids gossiping about how Pete, the footy captain, got a girl from school pregnant. Pete was the same age as Matt. What if that had been his son?

His wife had told him about the condom she found in Matt’s pocket the other day. They were both relieved that their son was being responsible. They respected his privacy, but agreed that he should have a father-son talk with Matt.

Matt’s dad seized the opportunity on the drive home. ‘I heard that Pete might have got a girl pregnant. I wonder if he’d stopped to think about that before he had sex?’

**talk it tips**

It’s important for fathers to be involved in the sex education of their child. Matt’s dad raised the topic of responsibility through Pete’s actions, without having to confront Matt about the condom. This could lead to further discussions on teenage pregnancy, contraception and safer sex.

Sometimes casual opportunities, like when watching TV, listening to the radio or reading the newspaper, can arise in everyday life when it’s easier to approach a topic indirectly. Listen to the music your child likes or take an interest in their favourite TV program. Chances are there will be some reference to relationships that you can discuss.

It’s also a good idea to be clear about what you want to discuss and pick an appropriate time and place to discuss it. Matt’s dad knew he would have Matt’s full attention in the car. Adolescents can feel more comfortable talking when you are doing something together and they don’t have to make direct eye contact, like fishing, walking the dog or washing up.
Not all teenage pregnancies are unplanned, but if you want your child to make responsible choices then it’s a good idea to have a discussion about safer sex and contraception before they become sexually active.

Don’t forget, some young people are same-sex attracted. It’s important to be sensitive to this. Evidence suggests they may still need information about contraception and protection against STIs.

Condom
Widely used and is 85–92% effective as a contraceptive. The only method of contraception that protects against STIs.

Emergency contraception (EC)
Previously known as the morning after pill. Can be taken up to 5 days (120 hours) after unprotected sex but is much more effective if taken within 24 hours. Available over the counter at pharmacies.

The Pill
Widely used and 95–99% effective. Must be taken daily. Requires a doctor’s prescription.

Contraceptive injection
Depo Ralovera and Depo Provera are 99% effective. Each injection protects against pregnancy for 3 months. Requires a doctor’s prescription.

Contraceptive implant
Implanon is 99.9% effective. Placed under the skin in the upper arm and protects against pregnancy for 3 years. Requires a doctor’s prescription.

Contraceptive vaginal ring
Soft plastic ring worn in the vagina for 3 weeks at a time. Works like the Pill but the hormones are absorbed through the vaginal skin. As effective as the Pill. Requires a doctor’s prescription.

It’s important to discuss the pros and cons of each method with a doctor or sexual health nurse to determine which one is most suitable.

Both young men and women are responsible for adopting safer sex practices and need to be aware of and understand their options.
Early Saturday evening Ginny and Frankie were up in their rooms getting ready to go out. Their mum called down the hallway to them. ‘Francesca. Virginia. Dinner’s ready.’

‘Wow, you girls look all dressed up’ said their step-dad as they sat down at the table.

‘Yeah, Ginny’s trying to impress Matt by wearing my top to the party tonight,’ Frankie teased.

‘So tonight’s the big night, eh?’ said their step-dad. Ginny blushed. She wasn’t sure if her mum had told him about their talk the other night. ‘I wonder if Matt knows how lucky he is?’

‘Yeah, she’s a little nervous about tonight. She was talking about having a few drinks to make her more relaxed.’ In fact, Ginny was worried about her limited sexual experience and had been talking about getting drunk and getting it over with. ‘I told her it wasn’t a good idea.’ Frankie made eyes at her mum for support.

‘Frankie’s right love. You want to be careful with drinking. You might end up doing something you will regret. I know you’re responsible, but I worry about what other people might do.’

**Talk it tips**

Mealtime is usually the only time when Ginny’s family is together. This is often a good time for open family discussion.

Ginny’s sister Frankie raised the subject of drinking. This could lead to further family discussion about how Ginny can reduce the risks she may encounter when she goes out, including:

- hanging out with trusted friends
- walking with friends in well-lit areas when out at night
• eating a meal before drinking
• drinking water in between drinks
• pouring her own drinks and not leaving drinks unattended
• always having enough money on her for a taxi
• having her mobile phone charged, with credit and programmed with emergency numbers
• letting her know that she can contact her parents at anytime
• not being alone with anyone who makes her feel uncomfortable
• discussing potential emergencies and how to deal with them

facts

Sex and violence
It’s important to provide your child with the skills to say no to unwanted sex or to negotiate safer sex. If your child says they have been raped or sexually assaulted be sure to:

• believe them and not blame them
• listen to them
• give them time to work through it
• help them to get support and assistance
• stand by them

Rape is not about sex, it’s about power and violence. In most cases people know the person who has assaulted them.

Drugs and alcohol
Most young people will experiment at least once with some substance. The use of alcohol and other drugs often impairs sound judgment and the ability to make healthy decisions.

It puts your child at risk of having unsafe sex, having sex they later regret or did not want. It can also contribute to accidents, violence, unplanned pregnancies and STIs.

It’s important to talk to your child about how they can reduce these risks and harm to themselves.
Around the same time Matt finished setting up for the party that night. He dropped by Joe’s house on his way home.

‘Hey man, Dex was telling me about this thing ya can get from doin’ it. He said it feels like fire when ya take a slash. I think he said it’s called chlamydia.’

Just then Joe’s mum walked in the room. ‘That’s why you should always wear a condom,’ she said smiling at the boys.

‘Mum!’ yelled Joe, turning bright red.

‘It’s true. Apparently you can’t even tell if you have some STIs. There are no symptoms. That’s why it’s important to have regular check ups.’

‘Mum!’ Joe repeated. ‘How do ya know all this stuff anyway?’ He couldn’t believe that he was having this conversation.

‘I read it in something the school sent home with you and then got on the Net to find out more. Just wanna know what you boys are up to.’ She walked out of the room grinning.

‘Your mum surfs the Net?’ asked Matt.

‘Yeah. She thinks she knows everything. We were connected when we were living in the country and it ain’t been the same.’

talk it tips

Joe’s mum didn’t know all the answers, but she found out. It’s good to be prepared.

If you find that your child asks you a question that you don’t have the answer to, be honest and say ‘I don’t know, but let’s find out together’. It’s important to listen to your child, make sure you understand the question and always respond, even if you need time to find the answer. If you don’t get back to them, they may not ask you again.
Sexually transmitted infections (STIs) are transmitted from one person to another through having sexual intercourse, oral sex and sometimes through direct contact with genitals. Semen, vaginal fluid, and blood can all carry an infection.

**Chlamydia**
A common infection that can cause a burning sensation when you urinate, unusual vaginal discharge or pus from the penis and/or pain in the belly. But often there are no symptoms at all. It can cause infertility. It’s easily treated with antibiotics.

**Genital herpes**
A common infection that can cause pain, tingling or itching, blisters or ulcers around the genitals or anus. There is no cure for the infection, but it can be controlled by treatment.

**Genital warts**
A common infection which is passed through skin-to-skin contact. A very small number of warts can persist and are associated with cancer of the cervix. There is now a vaccine available to prevent infection by the common wart types.

**Hepatitis B**
A viral infection that affects the liver and is spread by exchange of bodily fluids (blood, semen, vaginal discharge, anal mucus). A vaccine is available.

**HIV / AIDS**
HIV is spread by exchange of infected bodily fluids (blood, semen, vaginal discharge and anal mucus). If a person is HIV positive they can pass the infection on to others. AIDS can develop months or years after getting the virus. Like herpes there is no cure but it can be controlled by treatment.

If young people are sexually active they are at risk of getting an STI. It’s important that they have regular medical check ups.

**But remember, prevention is the best method.** Encourage your child to always be prepared and practise safer sex.

For more information on STIs contact one of the clinics at the end of this booklet or visit [www.shinesa.org.au](http://www.shinesa.org.au)
Later that night Ginny’s friend CJ was home in bed. He had been dreading going to the party, as people always asked him which girl he fancied. He was sick of pretending he was interested in girls, so it was a relief to finally tell Ginny that he was attracted to guys.

He was pretty nervous telling Ginny, but she was really supportive. But how was he going to tell his parents?

CJ had never discussed anything sex-related with his parents. They were usually open and honest, although he remembers his father joked about poofers a few years ago and this made him think How am I ever going to tell you? But Ginny encouraged him to be honest, even if it was hard. Otherwise he would be hiding his feelings.

The next morning CJ decided it was time to tell his parents. So while his mum and dad were having breakfast, he said ‘Mum, Dad, I have something to tell you.’

talk it tips

CJ’s parents were not prepared for CJ’s ‘coming out’ and responded with disbelief. Parents can react with a variety of feelings, including guilt, shock, concern or anger when they first learn that their child is attracted to the same sex.

Most parents will go through a process of grieving the loss of hopes and dreams for their children. They may also feel ashamed, particularly if they hold strong religious beliefs about homosexuality.

Some parents can also experience the same stigma and discrimination that gay and lesbian people feel. They find themselves covering up that their child is gay, as they don’t want other people to know. This can make it very hard for the gay child who wants to be accepted for who they are.
After CJ’s parents got over the initial shock, they made sure that CJ knew that they still loved him and wanted him to be happy. They made another time in a few days to talk about it, as they needed time to discuss it with each other.

**facts**

Being gay and lesbian is not about how you act, dress or talk. Some will fit with stereotypes such as feminine boys or tomboy girls. Others don’t fit these stereotypes at all. You can’t tell someone’s sexuality by how they look. It’s about how you feel inside. It’s not a choice.

Not all young people who are attracted to the same sex will identify as gay or lesbian or have a sexual relationship with someone of the same sex. Some will have relationships with someone of the same sex and go on to form heterosexual relationships. There are also many gay and lesbian people who married and had children when they were younger. Sexuality can change over a person’s life.

Your child will need support. Bullying and harassment of gay and lesbian people is common. Same-sex attracted youth also experience higher rates of depression and suicide, due to the isolation they often feel from their peers and family.

If parents are confused, need more information or just want to talk to a parent in a similar situation they can contact Parents Supporting Parents and Friends of Lesbian and Gays (FLAG) on 8369 0718. It can help to talk to people who understand your concerns.
During the week Ginny’s mum was on the phone to CJ’s mum. They had been friends for many years. The conversation turned to their children.

CJ’s mum needed to talk to someone about CJ’s coming out, so when Frankie’s name was mentioned she asked her friend ‘How did you feel when Frankie started seeing Kate?’.

‘It was a bit of a shock at first, ‘cause she’d had a few boyfriends in school. We tried to act like it was all fine, but it put a strain on our relationship. I was really worried about how other people would treat her.’

‘Yeah, I can relate to that. CJ decided to drop a bombshell on his father and I at breakfast the other morning.’ She paused, feeling a bit uncertain whether she was ready to say anything. Now she had a better understanding of how CJ must have felt.

‘Yeah, what’s that?’

‘He told us he was gay.’ CJ’s mum waited for a response.

Ginny’s mum could sense her friend’s unease. ‘Well, my advice is to be open about it all, and tell him how you’re feeling. Keep talking it like it is, otherwise things can break down like they did with Frankie for a while. You don’t want him to leave home and cut off all connection with you.’

‘Yeah, you’re right.’

‘So does he have a boyfriend?’ asked Ginny’s mum.

‘No. At least I don’t think so. Speaking of which, how are Matt and Ginny going?’

‘Good. Probably a little too good. My little girl is growing up and asking lots of questions that I am not ready for her to ask. I know that just because Ginny is asking about sex, it doesn’t mean she is doing it. But I still worry. She’s my baby. I don’t want her to get hurt.’
'Matt seems nice enough though.' CJ's mum had met Matt many times, as he and CJ played on the same football team.

‘Yeah, he is. They came home from the party the other night a bit later than I expected. She was fine, of course. I respect her ability to make her own decisions. But I'm just not sure…’

talk it tips

Talking to your partner, family members, parents or friends can help. Chances are they have experienced similar issues with their children. They can provide invaluable support and help you to develop confidence in talking to and educating your child about sexual health and relationships.

Other things you can do are:

• organise or attend information nights on sexual health and relationships
• have an information stall on parent information night
• be aware of the education your child is receiving at school so that you can support and discuss this at home

facts

Respect diversity. Respect individuals.

Some children may see their parents or other adults putting down or making fun of people based on sex, religion, culture or sexuality. This sort of behaviour can impact on how young people see themselves. It can also influence how they treat others. It’s healthy to encourage a respect for other people and their opinions.
There is a general misconception that being sexually healthy means being physically healthy or having regular check-ups for sexually transmitted infections. It’s more than that. It also includes the emotional and psychological aspects of health and wellbeing, including those aspects that relate to relationships and sexuality.

SHine SA defines sexual health as:

- a level of personal knowledge and skills to make healthy life choices
- an ability to enjoy and control sexual behaviour based on personal and social values
- freedom from guilt, fear, shame and violation which affects self-esteem and harms individuals, communities and relationships
- freedom from diseases, unplanned and unwanted pregnancy
- freedom and right to choose positive expressions of sexuality

**Why worry about sexual health?**

Sexual assault, violence, discrimination, harassment of people based on their sexuality and a general lack of knowledge of how the body works and how to keep it healthy are several of the major sexual health issues impacting on our community.

Young people also face other issues which put them more at risk than other groups in the community. Australia has one of the highest rates of teenage pregnancies in the developed world.

Young people are also at greater risk of having sexually transmitted infections, particularly chlamydia, genital herpes and warts.
What is relationships and sexual health education?

Learning about relationships and sexual health is a lifelong process. It involves:

- gaining knowledge
- developing skills
- forming attitudes, beliefs and values

Relationships and sexual health education increases young people’s knowledge and skills in:

- puberty and sexual development
- safer sexual health practices
- understanding sexuality
- emotional development
- healthy and positive relationships
- the availability of support services

Parents and families are primarily responsible for the health and wellbeing of children. However, schools can contribute significantly to a young person’s relationships and sexual health education by providing information and support to develop skills and confidence to make healthy decisions.

Effective school programs will complement and support the role of families and guide young people to become confident, informed and capable when it comes to relationships and sexual health. If you want to know more you can approach your child’s school and enquire about their program.

Does education lead to earlier or increased sexual activity?

Sex education does not lead to early or increased sexual activity. In fact, research shows that helping young people to understand their choices and the risks involved leads to:

- a delay in sexual activity
- safer sex practices
Remember that there is help out there. If you require further information or want to talk to someone you can contact SHine SA or any of the following services, hotlines or websites.

**SHine SA**
Offers confidential clinics, counselling, information and education.

**East/West Primary Health Care Team**  
Tel: 8300 5300

**Northern Primary Health Care Team**  
Tel: 8256 0700

**Southern Primary Health Care Team**  
Tel: 8186 8600

**SHine SA Sexual Healthline**  
9am – 1pm, Monday – Friday  
Tel: 1300 883 793  
Toll free: 1800 188 171  
Email: sexualhealthhotline@health.sa.gov.au  
www.shinesa.org.au
Check out SHine SA’s website to find out more on any of the sexual health issues discussed in this resource.

For further books and resources contact SHine SA’s Library on 8300 5312.

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**Other Services**

**Child Protection Services**  
Offers services for young people (and their families) suffering from physical, sexual and psychological abuse.  
Tel: 8161 7346  
After hours: 8161 7000  
(On-call consultation service)

**Clinic 275**  
Offers free and confidential testing, diagnosis and treatment of sexually transmitted infections.  
Tel: 8222 5075  
Toll free: 1800 806 490

**Gay and Lesbian Community Services of SA**  
Offers information and peer counselling on sexuality, including gay, lesbian, bisexual and transgender lifestyles and issues.  
Tel: 8422 8400  
Toll free: 1800 182 233

**Nunkuwarrin Yunti**  
Information, counselling and referral service for Aboriginal and Torres Strait Islander people.  
Tel: 8223 5217
Parents Supporting Parents FLAG (SA)
Offers support and information for parents and friends of lesbians and gays.
Tel: 8369 0718

The Second Story
Offers free, confidential health services for young people.
Locations: Christies Beach, Elizabeth, Woodville and City
Tel: 1300 13 17 19
(Youth Healthline – 24 hours)
Tel: 8303 1691
(mobile phone users – normal rates apply)

Streetlink
Offers a range of medical and counselling services, including advocacy and support relating to housing, financial and drug and alcohol issues.
Tel: 8231 4844

Yarrow Place Rape and Sexual Assault Service
Offers services for victims of rape who are 16 years and over.
Tel: 8226 8777

Hotlines
Alcohol & Drug Information Service
A 24-hour telephone counselling, referral and information service.
Tel: 1300 131 340
(local call cost for SA callers)

Parent Helpline
A telephone information service on child and youth health for parents.
Toll free: 1300 364 100

Lifeline
A 24-hour telephone counselling service for anyone about any issue.
Tel: 13 11 14

Websites
www.cyh.com (Child and Youth Health)
www.lawstuff.org.au
www.parenting.sa.gov.au
www.pspflag.org.au
www.likeitis.org.au
www.yoursexhealth.org
www.reachout.com.au
SHine SA would like to thank the many parents who participated in the Parents Educating Parents (PEP) project. In particular, thanks to the PEP Talk Reference Group and the PEP Talk Steering Committee representing:

- Department of Education and Children’s Services
- Department of Human Services
- Intellectual Disability Services Council
- Parents Supporting Parents FLAG (SA)
- SA Association of School Parents Clubs Inc
- The Ethnic Schools Association of South Australia Inc

This resource and its characters are part of a series. *Tell it like it is* has been written for young people. *Talk it like it is* is a guide for parents. *Teach it like it is* is a relationships and sexual health curriculum resource designed for teachers to use in the classroom with students aged 11–15. These resources have been developed to help young people, teachers and parents talk about the sometimes difficult and sensitive issues relating to relationships and sexual health.

For more copies of these resources contact SHine SA:

**Tel:** 8300 5300  
**Toll free:** 1800 188 171

www.shinesa.org.au