



**EXPLORING PERCEPTIONS OF TALKING ABOUT SEXUAL HEALTH,
PREGNANCY AND HEALTHY RELATIONSHIPS**

PHASE I EXPLORATORY RESEARCH—ADOLESCENTS IN IOWA

APRIL 2019



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Overview of the Research Project

i. Background on the Research Need

In 2018, Prevent Child Abuse Iowa (PCAI) partnered with Flynn Wright to develop and refine adolescent pregnancy prevention messaging for incorporation in future marketing campaigns. After an initial review of research needs related to appropriately developing messaging and communication constructs for the campaign, Flynn Wright recommended an initial exploratory research phase to better understand the perspectives among key targeted stakeholders, which would in turn, inform the strategic planning process and establish the direction and context of the campaign's messaging.

The exploratory phase of research focused on four primary audiences: parents and guardians of adolescents throughout Iowa, grantees/stakeholders who are engaged in efforts targeting adolescent pregnancy prevention, adolescents throughout Iowa and, specifically, at-risk adolescents in Iowa.

The Parent/Guardian/Stakeholder Survey: In the fall of 2018, PCAI and Flynn Wright developed and facilitated a statewide survey among parents and guardians of adolescents between the ages of 10 and 18 years old. A companion survey was distributed to grantees/stakeholder audiences to collect feedback prior to PCAI's series of stakeholder focus groups that were conducted in early October 2018. These surveys were used to explore how parents and guardians talk to their adolescents about the topics of adolescent pregnancy and what talking points are successful in their approach. The survey also explored potential barriers and challenges these parents and guardians face in their dialogues with their adolescents. This research step was critical in helping frame the needs for research among adolescents and at-risk adolescents. A review of the key findings is including this this section, sub-titled "Review of Prior Exploratory Research Among Parents/Guardians."

The Adolescent and At-Risk Adolescent Survey: Throughout January, February and March of 2019, PCAI and Flynn Wright facilitated both a statewide survey of adolescents and at-risk adolescents between the ages of 10 and 18 years old. Timing of this study was managed to avoid holidays and the beginning of the Spring semester of school, as well as, to provide an appropriate amount of time to facilitate the at-risk survey among adolescents through the appropriate channels. The direction of the Adolescent and At-Risk Adolescent Survey was built from an initial review of PCAI's communication needs, considerations that emerged from the grantee/stakeholder in-depth sessions and guidance from the Parent/Guardian survey that had been conducted earlier in the fall of 2018. This survey focused on three central areas of focus:

- Prioritization of adolescent topics
- Perspectives on desired advice related to sex, adolescent pregnancy and healthy relationships
- Perspectives on communication with adolescents

ii. Review of Prior Exploratory Research Among Parents/Guardians

Again, the initial step in the exploratory research phase was designed to explore parent and guardian communication strategies regarding adolescent pregnancy. This included an evaluation of how parents and guardians are *currently talking about adolescent pregnancy*, what they believe to be *successful talking points* and the *barriers and challenges they face in this process*. Findings from this survey helped establish considerations for the next steps in exploratory research among adolescents and at-risk adolescents.

Review of Approach

Audience: Parents/guardians of teens (10-to-18-years-old)

Sample: 200 completes

Geography: Throughout Iowa

Method: In-depth online exercise (blends quantitative evaluation with qualitative probing)

Key Findings

The following findings represent summarized themes from the October 2018 report, “Exploring Perceptions of Talking About Sexual Health, Pregnancy and Healthy Relationships.”¹

- A. **The topic of pregnancy was ranked low among other adolescent topics.** Among parents and guardians, the topic of pregnancy was ranked seventh among eight common adolescent issues for discussion. Healthy relationships were ranked second, behind alcohol, tobacco and drug use. Sexual health was ranked fourth, behind bullying.
 - The topic of pregnancy remained near the bottom of the rankings regardless if there were female or male adolescents in the home.
 - Pregnancy was ranked last among parents who were younger than 45.
 - Pregnancy was ranked last among female parents and guardians.

- B. **Parents and guardians appeared somewhat less willing to talk to their adolescent about pregnancy.** Pregnancy carried the lowest percent of parents and guardians who had reported already having discussed the issue with their adolescent (62 percent reported that they have discussed adolescent pregnancy).
 - The topic of adolescent pregnancy carried a higher percentage of parents and guardians who reported that they weren’t planning on discussing with their adolescent (Five percent overall).
 - This was found to be highest among male parents and guardians (14 percent) and parents/guardians in the 25 to 34 age group (Eight percent).

¹ Exploring Perceptions of Talking About Sexual Health, Pregnancy and Healthy Relationships, Prevent Child Abuse Iowa, October 2018.

- C. **Parents and guardians think it's important to start the conversation about healthy relationships sooner than sexual health and adolescent pregnancy.** While more than half of parents and guardians believed the appropriate age to start talking about sexual health and pregnancy was between 12 and 14 (58 percent overall), most parents/guardians believed that talking about healthy relationships should start at age 10 or younger (58 percent overall).
- D. **Challenges in talking about sexual health and adolescent pregnancy were identified.** Talking about sexual health and pregnancy was at least somewhat difficult among 29 percent of parents and guardians.
- The most frequently mentioned barriers among parents and guardians included the *awkwardness of starting the conversation with the adolescent, breaking through what is funny to adolescents, getting adolescents to talk openly and honestly, explaining the responsibility and consequences of sexual activity and balancing the conversation about how to be safe.* These barriers were identified through open-ended analysis of verbatim feedback.
- E. **Barriers to talking about healthy relationships were identified.** While parents and guardians found talking about healthy relationships to be easier than talking about sexual health and adolescent pregnancy, primary barriers included *getting adolescents to listen, overcoming their own experiences and being a good role model, getting adolescents to believe that the parent/guardian was on their side and building self-love and self-esteem fundamentals.* These areas were also thematically summarized through open-ended analysis of verbatim feedback.
- F. **Key information to communicate about healthy relationships included *developing respect and independence, establishing barriers and expectations for relationships, and being able to identify signs of abuse and characteristics of a healthy relationship.*** These themes emerged from an analysis of open-ended qualitative feedback, with the purpose of identifying areas to further explore and vet through the survey of adolescents and at-risk adolescents. These thematic concepts were largely aligned between grantees/stakeholders and parents/guardians.
- G. **Parents and guardians appeared divided on attitudes and perspectives about what is most important to communicate about sexual health and adolescent pregnancy.** Parent and guardian respondents were split between views of abstinence as the only practice and the importance and use of protection and contraception against pregnancy and STDs. These thematic concepts were evaluated using qualitative analysis to explore the most frequently associated constructs for communication strategies. These areas would be considered in the design of the adolescent and at-risk adolescent surveys.

iii. Study Design and Approach

To provide additional context regarding the survey of adolescents and at-risk adolescents in Iowa, Flynn Wright assisted in the design and facilitation of survey, as detailed below.

The Approach to Survey Design

As continuation of the exploratory phase of research, Flynn Wright designed a survey instrument that would collect both qualitative and quantitative information from adolescents and at-risk adolescents. Additionally, each version of the survey was developed to read at a third-grade reading level and each respondent was provided with an option to respond to the survey in either English or Spanish.

Use of Qualitative Questions: It was critical that the survey provided enough flexibility to allow for the adolescents' voice to be heard through responses, so a number of qualitative, open-ended questions were used to capture the context of respondents' perceptions and attitudes. Where appropriate, open-ended unstructured data was coded thematically to provide an opportunity for structured data analysis to occur. Throughout this report, questions are provided in footnotes to provide additional context for the way respondents were asked to share their opinions. Verbatim responses are also provided to add context to overall findings.

Use of Quantitative Questions: Beyond collection of initial respondent demographics, a question was posed to adolescents and at-risk adolescents to rank a series of nine topics related to healthy living. The prioritization question was similar in nature to a question asked among parents and guardians in the previous survey but was customized to focus on relationship-based topics to better understand how adolescents would rank the concepts of building and keeping healthy relationships, having sex, sexually transmitted diseases/infections (STDs/STIs) and adolescent pregnancy.

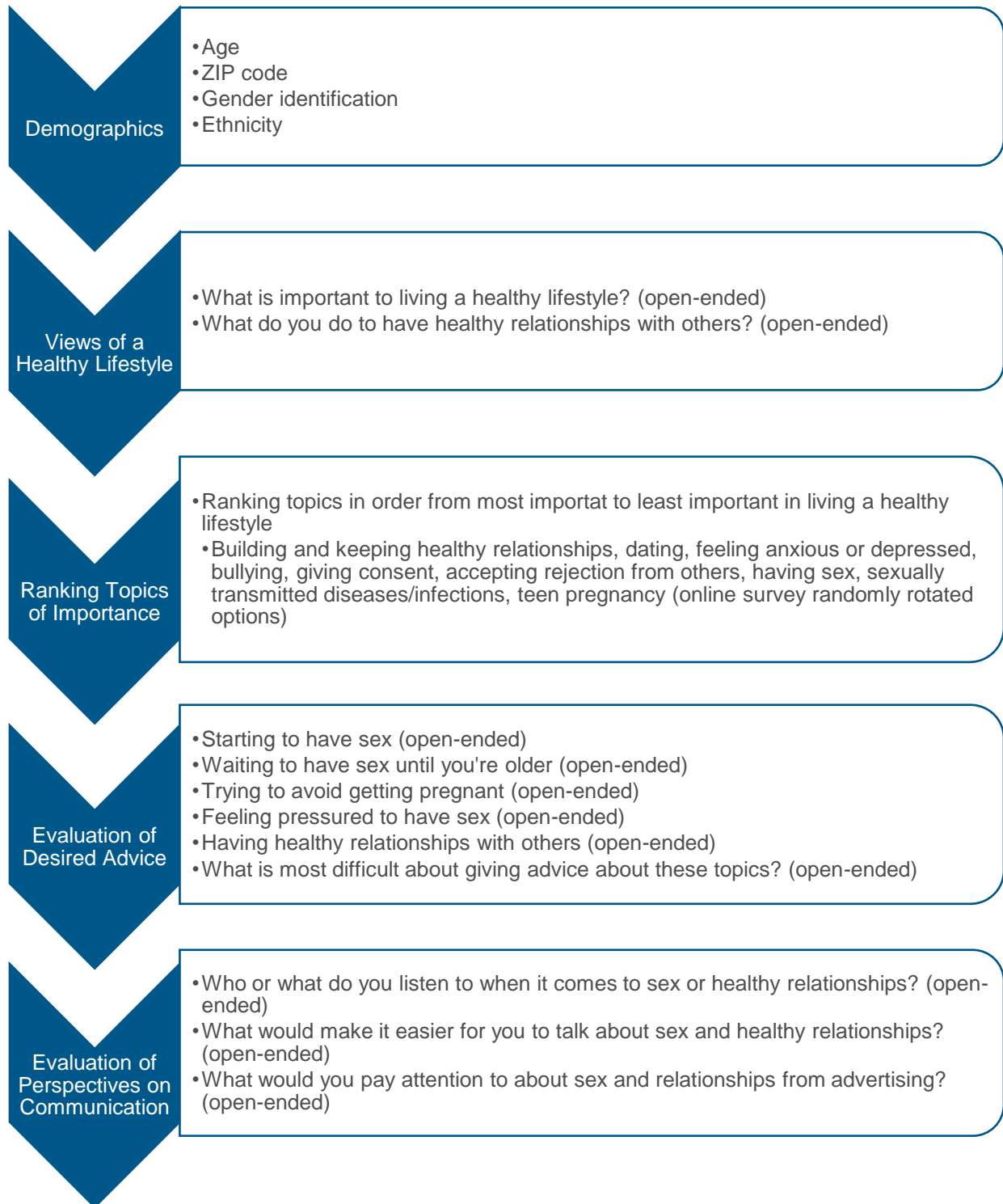
Approach to Fieldwork

Flynn Wright facilitated the survey among adolescents throughout Iowa, including a mix of individuals in more urbanized and rural areas. The online survey that was targeted to a general audience of adolescents was facilitated using a double-opted-in panel of adolescents throughout Iowa via Flynn Wright's panel partner. The sponsor of the survey remained anonymous throughout fieldwork. Flynn Wright worked with PCAI to allow PCAI to administer a paper version of the at-risk adolescent survey among PCAI's stakeholder partners.

| | |
|-----------|--|
| Audience | Adolescents and At-Risk Adolescents (10-to-18-years-old) |
| Sample | N249 completes overall - N200 adolescent completes (via general market panel), 49 at-risk adolescent completes (via PCAI's stakeholder partner network) |
| Geography | Throughout Iowa |

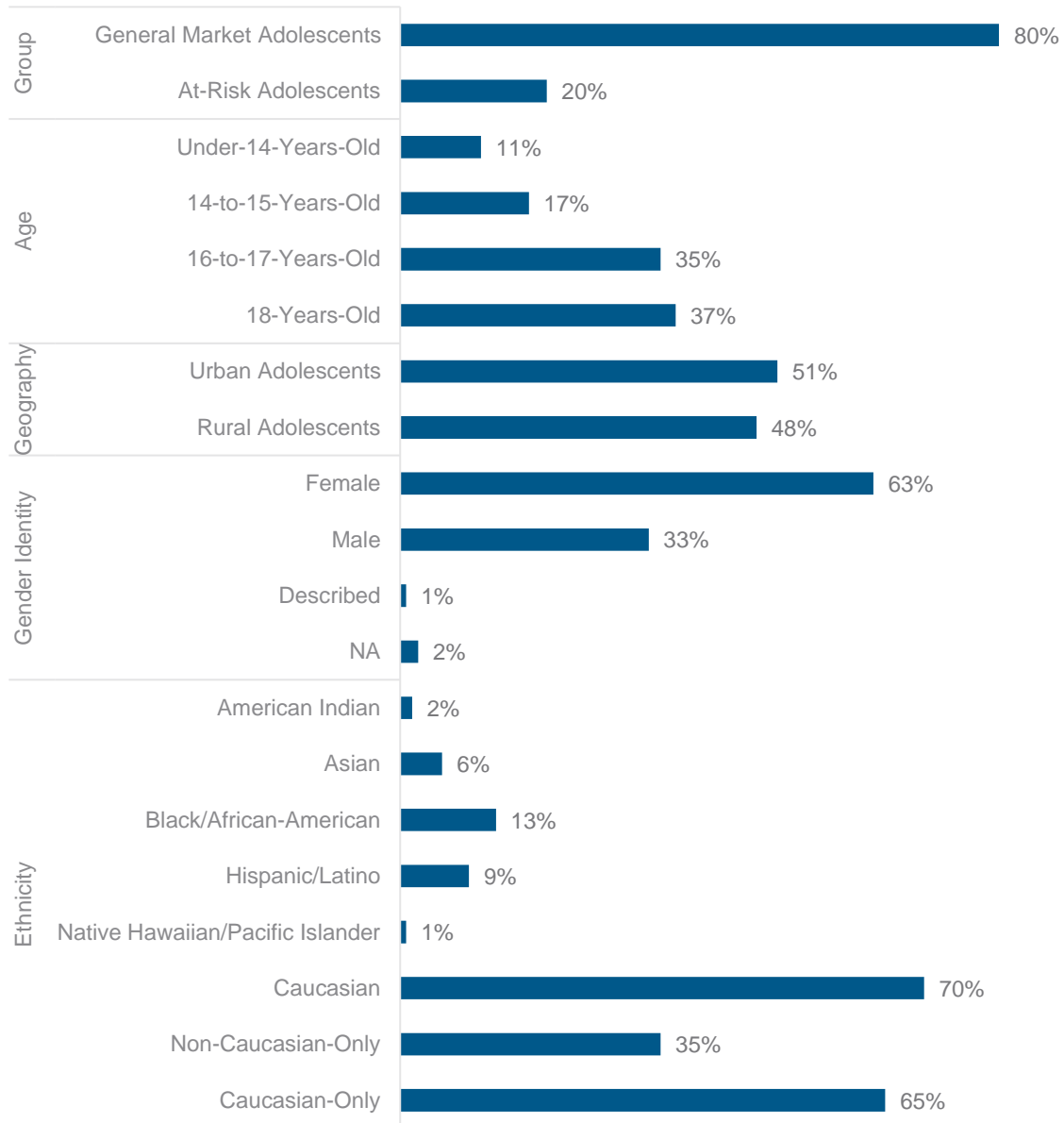
iv. Survey Instrument Review

The illustration below represents the follow of the adolescent and at-risk adolescent survey.



v. Summary of Survey Respondents

The graph below provides an overview of the 249 adolescent and at-risk adolescent survey respondents.



Key Findings and Strategic Considerations

The following points highlight key findings from the survey data. Additionally, strategic considerations are added to provide context for interpreting these findings and how they may be applied to strategic planning for the campaign.

Prioritizing Adolescent Topics/Issues

Building/Keeping healthy relationships was found to be the most important topic among all adolescents with a combined index score of 170, suggesting that the topic was of above-average importance (carried an index score above 120). Approximately three out of four adolescents ranked building/keeping healthy relationships as the top-ranked topic, which contributed to the very strong overall index score. At the same time, the topics of *sexually transmitted diseases/infections* and *child/teen pregnancy* were ranked the lowest, with STDs/STIs carrying an index score of 58 and child/teen pregnancy carrying an index score of 55.

Why child/teen pregnancy was ranked lowest overall: Among those adolescents who ranked child/teen pregnancy lowest among the other topics (30 percent ranked child/teen pregnancy in 9th place), the most frequent reasons for why it was ranked lowest was due to adolescents not planning to have kids or believing that they were too young, currently, to have a child of their own (20 percent). Another 17 percent acknowledged that it would impact their future and 10 percent suggested that having kids was not a priority for them now.

Views on how to maintain healthy relationships: More than half of adolescents (53 percent) reported that maintaining good communication was an approach to having healthy relationships. Another 23 percent of adolescents reported that showing/demonstrating respect was important to having healthy relationships.

- Mentions of good communication was found to be *significantly lower* among those in the at-risk adolescent group (37 percent).
- Good communication was also found to be mentioned *significantly less frequently* among male adolescents (35 percent) and non-Caucasian-only adolescents (41 percent).

Consideration: The topic of building and keeping healthy relationships is considered to be readily important among adolescents. This topic may serve as a gateway to additional topics, like preventing unwanted pregnancy and sexually transmitted diseases/infections and may provide a relevant context for a campaign's message to cut through.

Considerations Regarding Adolescents' Desired Advice on Topics

Starting to Have Sex: Most frequently, adolescents mentioned using protection/contraception (46.4 percent). Fourteen percent reported that they would want advice about becoming ready or being able to recognize if they were ready to have sex. Approximately seven percent mentioned having consent. Four percent reported that they would want advice about waiting until marriage or abstaining.

- At-risk adolescents were *significantly less likely* to mention readiness (4 percent), as were male adolescents (6 percent) and those in the Under 16 age group (7 percent).
- At-risk adolescents were also *significantly less likely* to mention consent (0 percent). The Under 16 age group was also *significantly less likely* to mention consent (1 percent).

Consideration: It is important to note the difference in unaided mentions of wanting advice on using protection/contraception, being ready or recognizing if an individual is ready for sexual activity and abstinence. Campaign messaging should take these perspectives into consideration when forming the foundation of communication with adolescents. It is also important to note where significant differences were found among at-risk adolescents, specifically that they were less likely to mention readiness or consent in their open-ended responses.

Waiting to Have Sex: When considering the advice adolescents would want regarding the idea of waiting to have sex until they're older, the most frequently mentioned themes fell into several buckets, including the idea of normalizing waiting (29 percent), making sure oneself is ready (15 percent), not prioritizing sex at this life stage (5 percent), considering the consequences of sex (5 percent) and considering the dynamics of their relationship with their partner (4 percent).

- At-risk adolescents were *significantly less likely* to mention the concept of normalizing waiting (6 percent).
- At-risk adolescents were *significantly less likely* to mention making sure they're ready for sex (2 percent). Non-Caucasian-only adolescents were also *significantly less likely* to mention readiness (5 percent).
- The Under 16 age group was *significantly more likely* to mention the dynamics of the relationship (9 percent).

Consideration: With nearly one in three adolescents mentioning the concept of normalizing waiting/abstinence and another 15 percent mentioning making sure oneself is ready, these areas are important for message context.

Trying to Avoid Getting Pregnant: Most adolescents (69.9 percent) were focused on forms of protection/contraception, while others were focused on abstinence (17.3 percent).

- At-risk adolescents were *significantly less likely* to mention using contraception/protection (49 percent)
- Male adolescents were *significantly less likely* to mention using contraception/protection (60 percent)

Consideration: This finding aligns with emerging themes related to desired advice related to starting to have sex. Again, there appears to be a division among adolescents mentioning use of protection/contraception and abstinence.

Feeling Pressured to Have Sex: Most frequently, adolescents reported wanting advice related to not feeling pressured to have sex (23 percent), how to leave the situation or relationship if pressured (18 percent), how to speak up and say “No” (9 percent) and how to have open and honest communication with their partner if they felt pressured (9 percent).

- At-risk adolescents were *significantly less likely* to mention leaving the situation/relationship (8 percent)
- Male adolescents were *significantly less likely* to speak up or say “No” (4 percent)

Consideration: Adolescents share a variety of types of advice related to feeling pressured to have sex. Campaign resources should take these into consideration when crafting resources for adolescents to be able to build skills and feel empowered to manage their own situations.

Having Healthy Relationships with Others: Adolescents most frequently mentioned wanting to get advice about maintaining open and honest communication in a relationship (15 percent), steps to take to maintain healthy relationships (15 percent), that healthy relationships are good (8 percent) and to remain positive (7 percent).

- At-risk adolescents were *significantly less likely* to mention open/honest communication (4 percent)

Consideration: Based on adolescent feedback, it may be important for campaign resources to highlight or feature techniques about becoming comfortable in creating open and honest communication and approaches to strengthen communication skills.

Considerations Regarding Communication

Who Adolescents Listen To: Adolescents are most likely to listen to friends and parents about sex and healthy relationships. Approximately 39 percent of adolescents mentioned that they would listen to their friends regarding sex or healthy relationships. Thirty-five percent of adolescents mentioned that they would listen to a parent.

- At-risk adolescents were *significantly less likely* to mention friends
- The Under 16 age group was *significantly less likely* to mention friends
- At-risk adolescents were *significantly less likely* to mention people with experience
- Male adolescents were *significantly less likely* to mention doctors/medical professionals

Consideration: Although friends and parents appear to be important resources for talking about sex and relationships, it is important to note that at-risk adolescents were significantly less likely to mention friends as a resource. This may suggest significant barriers for this audiences in having open and honest communication and leveraging relationships for others when they need advice.

What Adolescents Would Pay Attention to in Advertising: Adolescents most frequently mentioned that they would pay attention to information about safe sex advice, including contraception/protection (18 percent), followed by mentions of ads that promoted or demonstrated healthy relationships (9 percent) and ads that highlighted the consequences of sex (8 percent).

- At-risk adolescents were *significantly less likely* to mention promoting/demonstrating healthy relationships (0 percent)
- The Under 16 age group was *significantly less likely* to mention promoting/demonstrating healthy relationships (3 percent)
- The Under 16 age group was *significantly more likely* to mention consequences of sex (14 percent)
- Male adolescents were *significantly less likely* to mention the consequences of sex (4 percent)

Consideration: Adolescents shared views of what they believed they would pay attention to; however, campaign messaging may be more influential in not only providing information and advice to adolescents, but also in directing adolescents to resources where they can explore their questions and get the answers they need.

Adolescent Concerns with Giving Advice to Others: The most frequently mentioned concern about giving a close friend advice was in sounding insulting, offending the friend or even potentially losing a friend by giving the advice (34 percent). Additionally, 17 percent of adolescents were concerned that their

friend would not listen to them. Another nine percent mentioned that they were not sure how to advise their friend about a situation.

- Female adolescents were *significantly more likely* to be concerned with sounding insulting/offensive or losing a friend (41 percent)
- Male adolescents were *significantly more likely* to mention that it was embarrassing/difficult to talk about (7 percent)

Consideration: Adolescents appear most concerned about damaging relationships with those close to them when giving advice. Resources could be developed that would help adolescents approach those conversations and help them better prepare for these types of discussions.

Adolescent Perspectives on Making Discussions About Sex and Relationships Easier to Talk

About: Adolescent responses covered considerations about the individual who they would talk with, the nature of the discussion and the environment in which they'd have the discussion. Approximately 17 percent of adolescents mentioned that if the person was trusted, it would make it easier for them to talk about sex and healthy relationships. Fifteen percent said it would be easier to talk about if there wasn't a negative stigma about talking about sex. Twelve percent wanted the person they'd talk with to have experience regarding sex and healthy relationships. Another 12 percent reported that they didn't want to feel judged by talking about sex and healthy relationships. Six percent mentioned that the message about sex and relationships would need to be relatable to their current situation. Another six percent reported that they would want to have these types of discussions in an environment in which they felt safe. Two percent mentioned that the individual should seem responsible to them.

- At-risk adolescents were *significantly less likely* to mention any type of stigma (2 percent)
- The Under 16 age group was *significantly less likely* to mention any type of stigma (4 percent)
- Males were *significantly less likely* to mention any type of stigma (8 percent)
- At-risk adolescents were *significantly less likely* to mention talking with someone who has had experience (0 percent)
- At-risk adolescents were *significantly less likely* to mention a concern about feeling judged (4 percent)
- Males were *significantly less likely* to mention a concern about feeling judged (6 percent)
- Females were *significantly more likely* to be concerned with feeling judged (16 percent)
- Urban adolescents were *significantly more likely* to be concerned with having a safe environment (9 percent)

Consideration: Strategic development of campaign communications should take into consideration the critical factors of the dynamic of the relationship in conversations, the nature of the discussion and the environment where these discussions can be considered safe.

Detailed Analysis and Findings

Adolescent Prioritization of Teen Topics

i. How Adolescent Topics are Prioritized

Adolescents were asked to review a list of topics related to relationships and living a healthy lifestyle and to order these topics from most important to least important. The intent of the question was to better understand how adolescents prioritize each of these topics, including building and keeping healthy relationships, sexually transmitted diseases/infections and adolescent pregnancy.

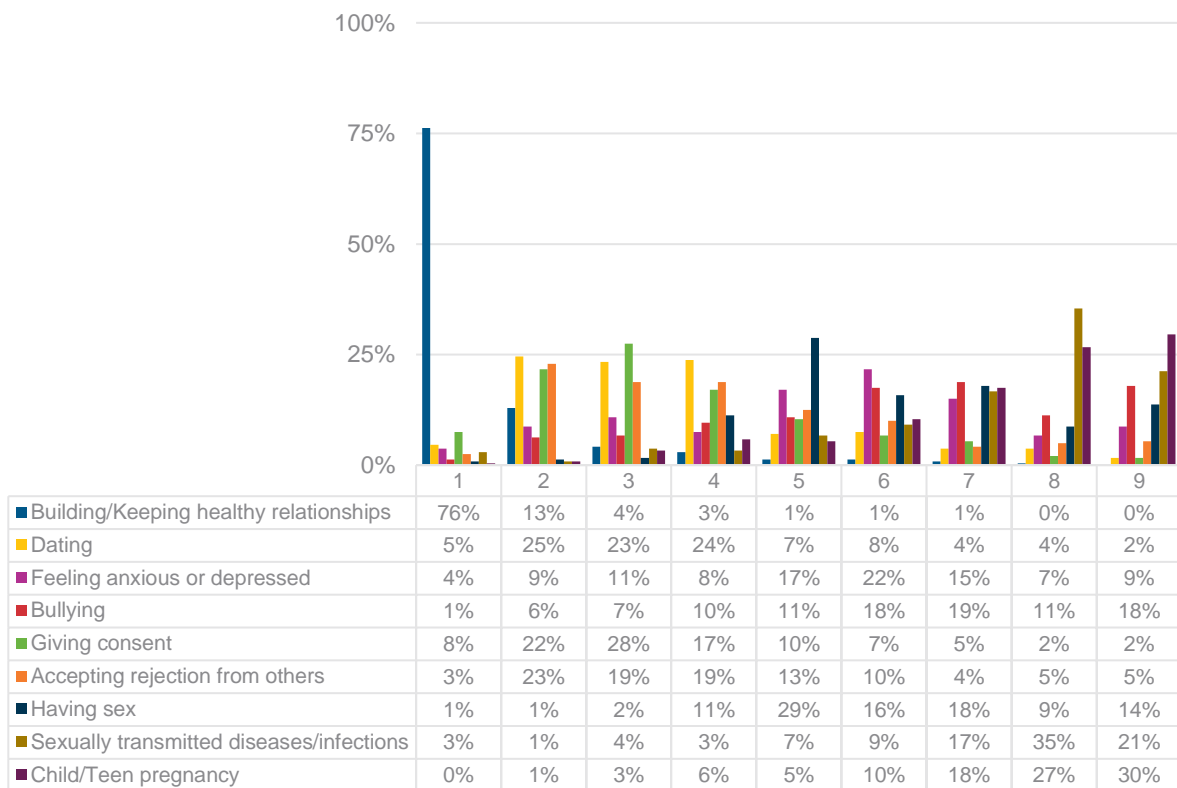
Question Asked:

Please put the following things in order, from the one that is MOST IMPORTANT (1) to you in living healthy and having healthy relationships, to the one that is LEAST IMPORTANT (9) to you?

[NOTE: The online survey version randomized the order of the list.]

The graph below shows the percentage for each rank of the given topics. Approximately 76 percent of adolescents ranked “Building/Keeping healthy relationships” as the most important topic (1).

Percentage of Each Ranking for Given Topics

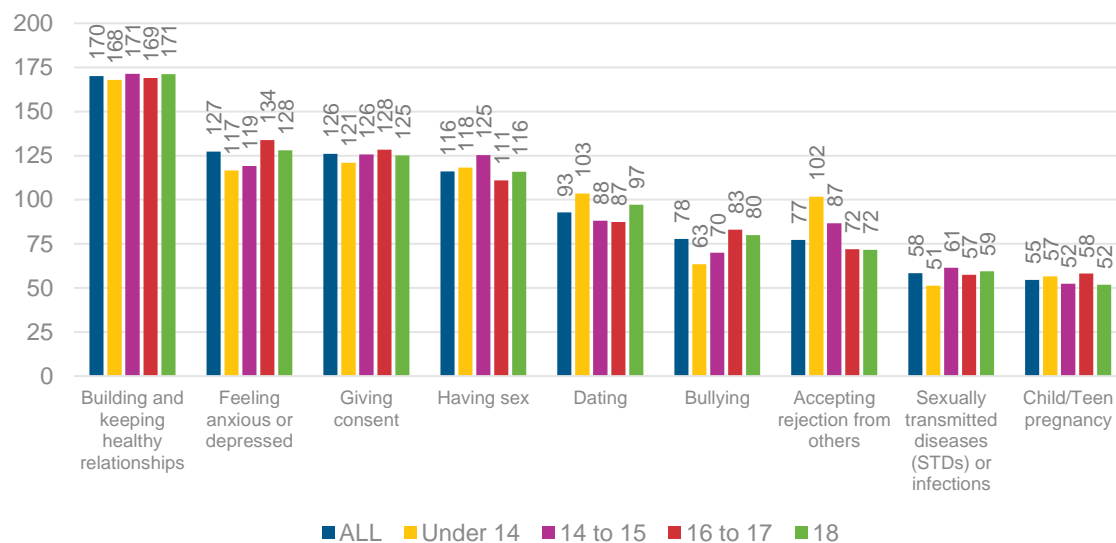


Ranking: 1=Most Important, 9=Least Important

KEY FINDING

Building/Keeping healthy relationships was found to be the most important topic among all adolescents with a combined index score of 170, suggesting that the topic was of above-average importance (carried an index score above 120). At the same time, the topics of sexually transmitted diseases/infections and child/teen pregnancy were ranked the lowest, with STDs/STIs carrying an index score of 58 and child/teen pregnancy carrying an index score of 55. As could be seen from the graph on the previous page, both of these topics were ranked eighth or ninth on the list among more than half of adolescents.

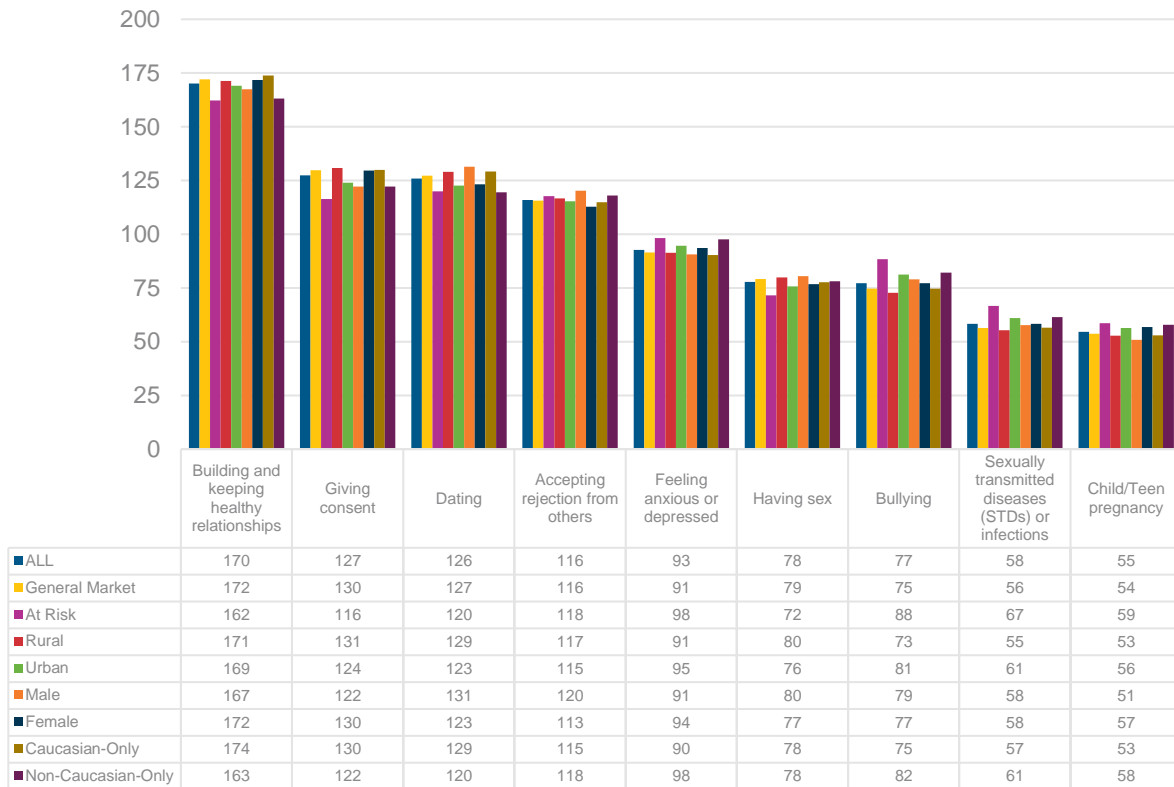
Ranked Index Scores: Among All Adolescents and Compared by Age Groups



Additional Comparisons of Perceived Importance Rankings

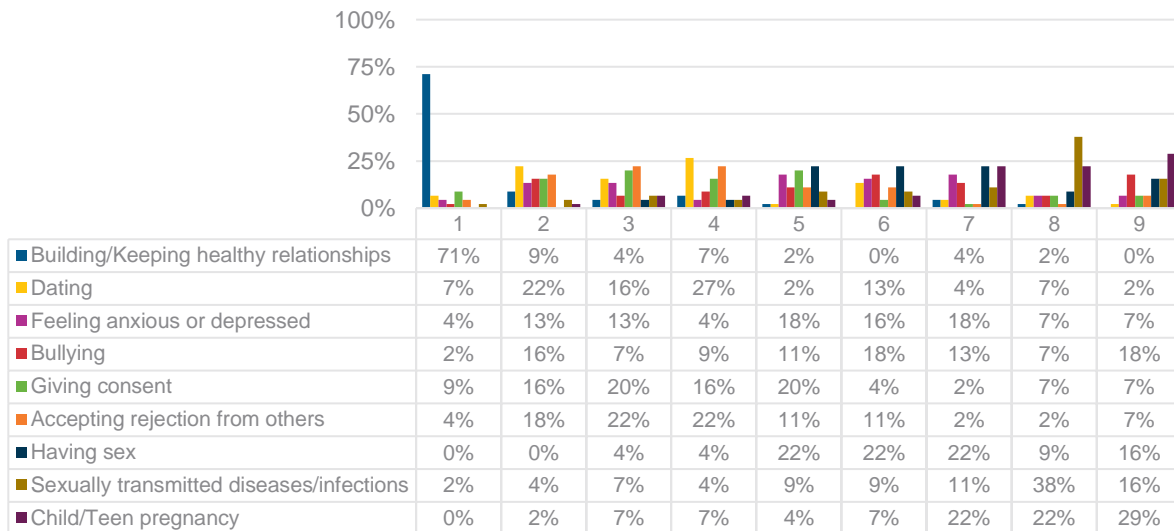
Regardless of age (shown in graph above), gender identity, ethnicity or rural/urban location (shown in graph on the following page), sexually transmitted diseases/infections and child/teen pregnancy were ranked *least important* among the topics evaluated in the study. Child/teen pregnancy was ranked last among each group, except among the Under 14 age group (ranked eighth with an indexed value of 57) and the 16 to 17 age group (ranked eighth with an indexed value of 58), although index values essentially ranked evenly among each group. Among respondents in the at-risk audience, having sex (index value of 72), sexually transmitted diseases/infections (index value of 67) and child/teen pregnancy (index value of 59) were all ranked among the bottom three issues, which suggests that there were not significant differences in perceived importance of these topics among the at-risk audience and a more general audience of adolescents.

Additional Ranked Index Scores: By Audience, Geography, Gender Identity and Ethnicity



And, although the at-risk adolescent’s ranking of these topics didn’t vary significantly, it is important to understand how this group specifically responded to each area. The graph below shows that *only six percent ranked STDs/STIs as a first or second most important topic and only two percent ranked child/teen pregnancy as a first or second most important topic.*

Rankings Among At-Risk Adolescents



ii. Rationales for the Prioritization of Child/Teen Pregnancy as a Topic

As noted earlier in this summary, 30 percent of adolescents ranked child/teen pregnancy last among the issues evaluated. Analysis explored reasons for ranking child/teen pregnancy last with the intent to better understand why adolescents they prioritize the issue of child/teen pregnancy as they do.

Question Asked

Why was child/teen pregnancy least important to you in living a healthy lifestyle and having healthy relationships?

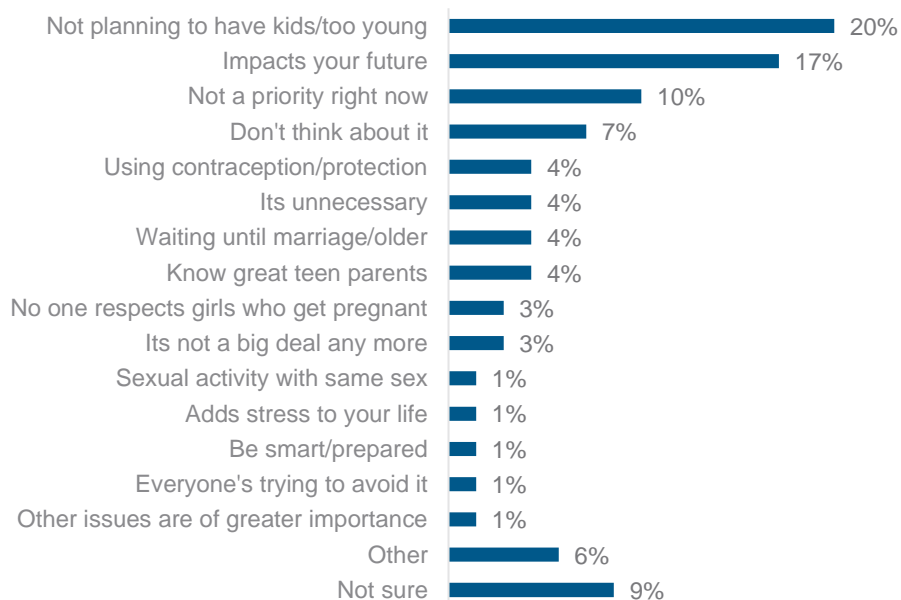
(Open-ended response, structure and categorized)

KEY FINDING

Among those adolescents who ranked child/teen pregnancy lowest among the other topics (30 percent ranked child/teen pregnancy in 9th place), the most frequent reasons for why it was ranked lowest was due to adolescents not planning to have kids or believing that they were too young, currently, to have a child of their own (20 percent). Another 17 percent acknowledged that it would impact their future and 10 percent suggested that having kids was not a priority for them now.

Other less frequently mentioned rationales were that child/teen pregnancy wasn't a big deal any more (3 percent), that they were engaging in sexual activity with someone of the same sex (1 percent), that pregnancy adds stress to one's life (1 percent), that they are being smart/prepared (1 percent), that "everyone" is trying to avoid getting pregnant (1 percent), and that other issues are of greater importance (1 percent).

Why Child/Teen Pregnancy Was Ranked Lowest



iii. Perspectives on Living a Healthy Lifestyle

To better understand what adolescents believe they should be doing to maintain a healthy lifestyle, adolescents were asked the following question. Their responses have been structured and categorized to allow for additional analysis purposes.

Question Asked

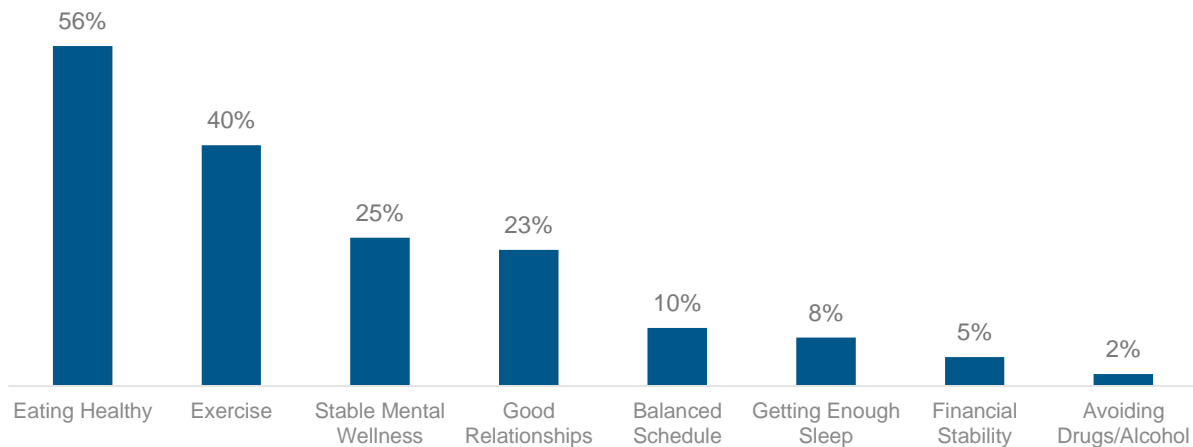
In your opinion, what is important to living a healthy lifestyle?

(Open-ended response, structure and categorized)

KEY FINDING

More than half of adolescents (56 percent) believed that eating healthy was an ingredient to living a healthy lifestyle. Another 40 percent mentioned exercise and approximately one in four adolescents mentioned stable mental wellness (25 percent) or good relationships (23 percent).

Categorized Mentions for What is Important to Living a Healthy Lifestyle



“Eating healthy foods, exercising regularly, having good mental health/taking care of your mental health.”

– Urban Female, 16+

“Getting plenty of rest and exercise. Making sure you eat a balanced meal with healthy foods. Staying hydrated and taking care of your health needs.” – Rural Female, 16+

“Eating right and being respectful towards others and communicating.” – At Risk Urban Female, Under 16

Comparisons were then made among adolescent groups to identify areas where significant differences existed. The table below reveals differences among the groups.

| | |
|-------------------------------|---|
| Exercise | <ul style="list-style-type: none"> - At-risk adolescents were <i>significantly less likely</i> to mention exercise: 10% - Non-Caucasian-only adolescents were <i>significantly less likely</i> to mention exercise: 30% |
| Eating Healthy | <ul style="list-style-type: none"> - At-risk adolescents were <i>significantly less likely</i> to mention eating healthy: 29% |
| Stable Mental Wellness | <ul style="list-style-type: none"> - Rural adolescents were <i>significantly more likely</i> to mention stable mental wellness: 31% |
| Good Relationships | <ul style="list-style-type: none"> - At-risk adolescents were <i>significantly less likely</i> to mention good relationships: 10% - Non-Caucasian-only adolescents were <i>significantly less likely</i> to mention good relationships: 13% |
| Balanced Schedule | <ul style="list-style-type: none"> - At-risk adolescents were <i>significantly less likely</i> to mention a balanced schedule: 0% |
| Getting Enough Sleep | <ul style="list-style-type: none"> - At-risk adolescents were <i>significantly less likely</i> to mention getting enough sleep: 2% - Female adolescents were <i>significantly less likely</i> to mention getting enough sleep: 4% |
| Financial Stability | <ul style="list-style-type: none"> - No differences found |
| Avoiding Drugs/Alcohol | <ul style="list-style-type: none"> - No differences found |

iv. Perceptions on How to Maintain Healthy Relationships with Others

Adolescents were also asked to share ideas of what they would do to have healthy relationships with others. The question was also asked as an open-ended question and verbatim responses were structured and categorized, as shown in the following graph.

Question Asked

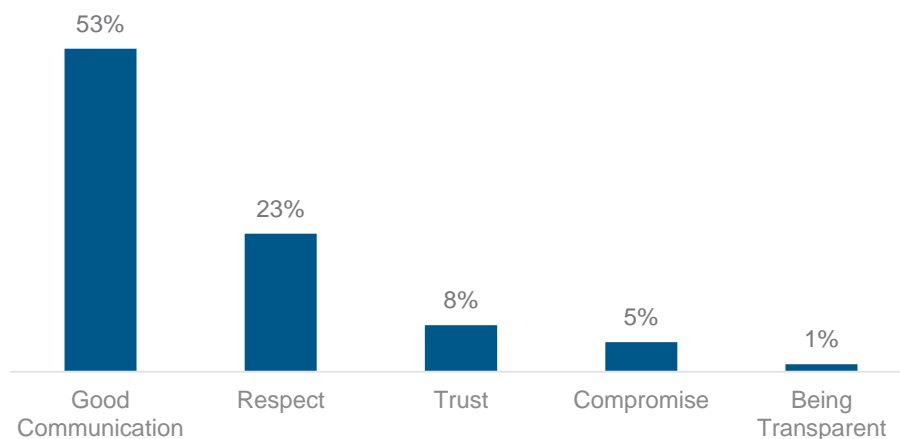
What do you do to have healthy relationships with others?

(Open-ended response, structure and categorized)

KEY FINDING

More than half of adolescents (53 percent) reported that maintaining good communication was an approach to having healthy relationships. Another 23 percent of adolescents reported that showing/demonstrating respect was important to having healthy relationships. Less frequently mentioned were trust (8 percent), compromise (5 percent) and being transparent (1 percent).

Ways to Have Healthy Relationships with Others



“Communication, making sure any tension is removed the minute it comes up.” – Urban Female, 16+

“Be nice, be yourself, and don't try being something you're not. If someone you know is going through a rough time, talk to them and let them know your there for them if they need someone to talk to or lean on.” – Urban Male, Under 16

“I'm honest and open.” – At-Risk Urban Female, 16+

“I stay honest with them and keep my word. If they need my help, I will help them. It's always nice to have them owe you a favor later on in life.” – Urban Female, 16+

“Talk about things, have things in common, tell your feelings” – Rural Female, Under 16

“Communication, working together, love each other, etc.” – At-Risk, Urban Female, Under 16

“Be truthful, compassionate and care about that person during the good and bad times.” – Rural Male, 16+

Differences in Categorized Mentions

| | |
|---------------------------|---|
| Good Communication | - Mentions of having good communication was found to be <i>significantly lower</i> among those in the at-risk adolescent group (37 percent). - Maintaining good communication was also found to be mentioned <i>significantly less frequently</i> among male adolescents (35 percent) and non-Caucasian-only adolescents (41 percent). |
| Respect | - Mentions of respect was found to be <i>significantly lower</i> among those in the Under 16 age group (17 percent). |
| Trust | - Mentions of trust was found to be <i>significantly lower</i> among male adolescents (2 percent). |
| Compromise | - No differences among groups |
| Being Transparent | - No differences among groups |

Adolescent Perspectives on Desired Advice for Teen Topics

To explore the context for appropriate communications, adolescents were asked to share what advice would be helpful to them if they were facing a series of potential adolescent scenarios, including starting to have sex, waiting to have sex until they're older, trying to avoid getting pregnant, feeling pressured to have sex and having healthy relationships with others. Each question was framed up to gather open-ended responses and these verbatim comments were structured and categorized.

i. Desired Advice Related to Starting to Have Sex

To better understand the type of advice adolescents would want if they were starting to have sex, adolescents were asked the following question.

Question Asked

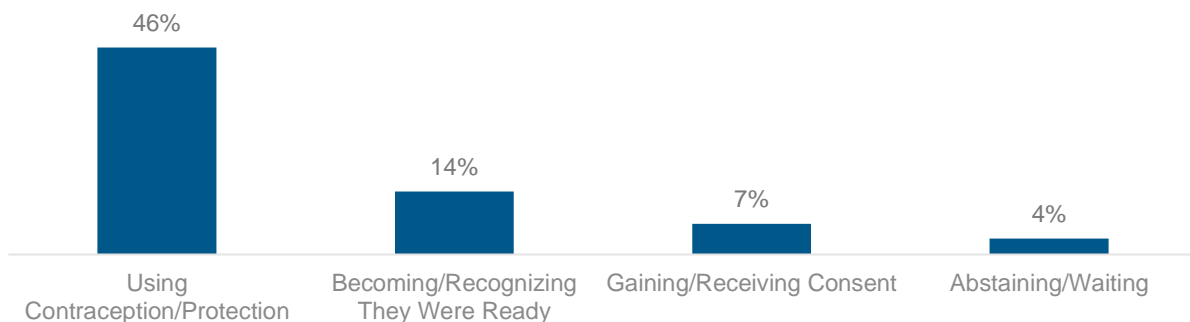
What advice would help you if you were starting to have sex?

(Open-ended response, structure and categorized)

Key Finding

Most frequently, adolescents mentioned using protection/contraception (46.4 percent). Fourteen percent reported that they would want advice about becoming ready or being able to recognize if they were ready to have sex. Approximately seven percent mentioned having consent. Four percent reported that they would want advice about waiting until marriage or abstaining.

Type of Advice Considered Helpful If Adolescent was Starting to Have Sex



Differences by Categorized Mentions

| | |
|---|---|
| Using Contraception/Protection | - No differences among groups |
| Becoming/recognizing They Were Ready | - At-risk adolescents were <i>significantly less likely</i> to mention readiness (4 percent) - Male adolescents were <i>significantly less likely</i> to mention readiness (6 percent) - The Under 16 age group was <i>significantly less likely</i> to mention readiness (7 percent) |
| Gaining/Receiving Consent | - At-risk adolescents were <i>significantly less likely</i> to mention consent (0 percent) - The Under 16 age group was <i>significantly less likely</i> to mention consent (1 percent) |
| Abstaining/Waiting | - No differences among groups |

“Make sure to use protection, condoms, birth control, etc.” – Rural Male, 16+

“Make sure to use protection always.” – Rural Female, 16+

“That you don't have to agree when a guy is pressuring you to have sex.” – Urban Female, 16+

“What birth control is the most effective and practical to use.” – Urban Female, 16+

“Are you ready to have sex with the person you're planning to have sex with?” – Urban Female, 16+

“Think about how comfortable you are with things and talk to your partner about them. Tell your parents and get on a birth control.” – Urban Female, 16+

“Don't do it until you are married.” – Rural Male, 16+

“Am I too young?” – At-Risk Urban Male, Under 16

“Becoming more educated in general and knowing what typically works and doesn't work.” – Urban Female, 16+

Qualitative Assessment: Among those who mentioned using protection, there were comments about making sure the partner used protection, which appears to place the responsibility of using contraception/protection on the partner, rather than the adolescent, themselves.

ii. Desired Advice Related to Waiting to Have Sex Until Older

To better understand the type of advice adolescents would want if they were waiting to have sex until they were older, adolescents were asked the following question.

Question Asked

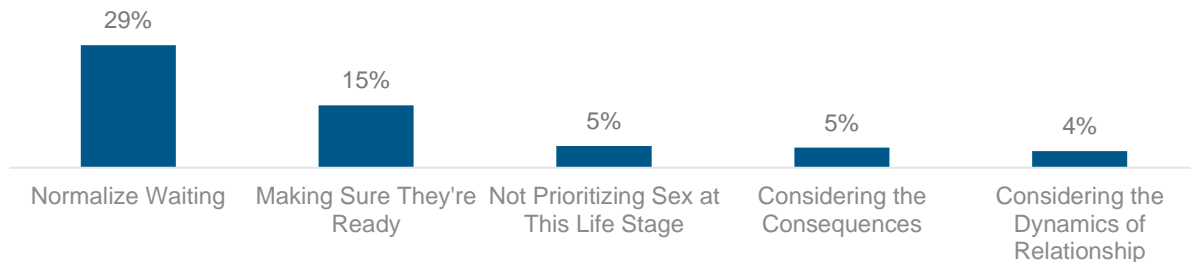
What advice would help you if you were waiting to have sex until you're older?

(Open-ended response, structure and categorized)

KEY FINDING

When considering the advice adolescents would want regarding the idea of waiting to have sex until they're older, the most frequently mentioned themes fell into several buckets, including the idea of normalizing waiting (29 percent), making sure oneself is ready (15 percent), not prioritizing sex at this life stage (5 percent), considering the consequences of sex (5 percent) and considering the dynamics of their relationship with their partner (4 percent).

Type of Advice Considered Helpful If Adolescent was Waiting to Have Sex Until They're Older



“Let me wait until I'm ready because only I can decide for myself.” – Rural Female, 16+

“It's good to wait till you're older so you know if you're ready for sure once you've matured more.” – Urban Female, 16+

“You don't have to do anything that you are not ready for, and if you want to wait, you can make that choice for yourself.” – Rural Female, 16+

“Waiting to have sex may be hard, but you are protecting your future. You need to focus on your life now, not a baby.” – Urban Female, 16+

“Nothing, that's a perfect idea. Sex isn't for kids.” – Urban Male, Under 16

“I would be okay with it. I would tell myself/them that it is ok not to want to have sex.” – Rural Male, Under 16

“Waiting until you're older to have sex doesn't make you a loser or anything else people call you. It shows that you have boundaries and know your self-worth.” – Rural Female, Under 16

“It's fine, know you might get picked on. Just wait for the right time.” – Rural Female, 16+

“It's whenever your (sic) ready honestly.” – At-Risk Urban Female, Under 16

“Having someone tell me it's okay. Boys not pressuring me into sex.” – Urban Female, 16+

“That's good because it could prevent having a kid.” – At-Risk Urban Female, Under 16

Differences by Categorized Mentions

| | |
|---|---|
| Normalize Waiting | - At-risk adolescents were <i>significantly less likely</i> to mention the concept of normalizing waiting (6 percent) |
| Making Sure They're Ready | - At-risk adolescents were <i>significantly less likely</i> to mention making sure they're ready (2 percent) - Non-Caucasian-only adolescents were <i>significantly less likely</i> to mention making sure they're ready (5 percent) |
| Not Prioritizing Sex at This Life Stage | - No differences among groups |
| Considering the Consequences | - No differences among groups |
| Considering the Dynamics of Relationship | - The Under 16 age group was <i>significantly more likely</i> to mention the dynamics of the relationship (9 percent) |

iii. Desired Advice Related to Trying to Avoid Getting Pregnant

To better understand the type of advice adolescents would want if they were trying to avoid getting pregnant, adolescents were asked the following question.

Question Asked

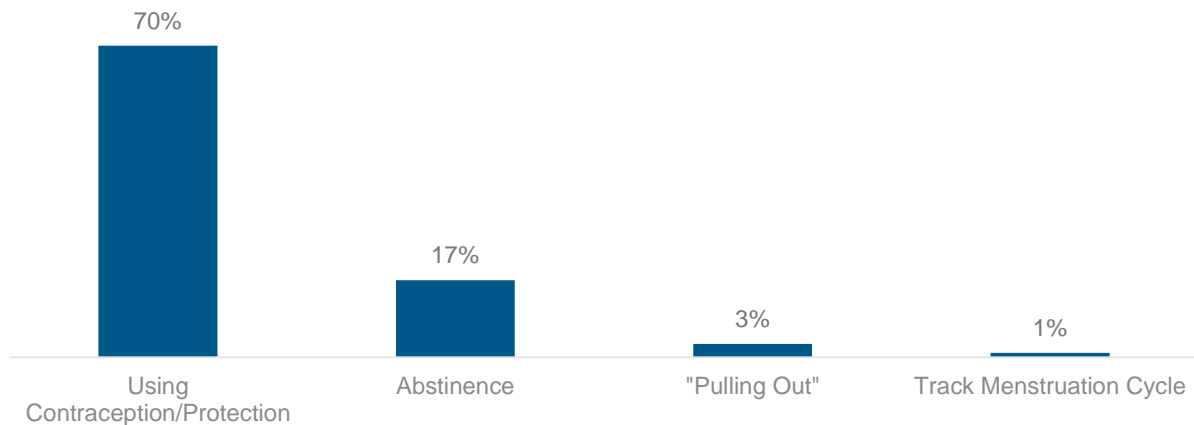
What advice would help you if you were trying to avoid getting pregnant?

(Open-ended response, structure and categorized)

KEY FINDING

Most adolescents (69.9 percent) were focused on forms of protection/contraception, while others were focused on abstinence (17.3 percent). Much less frequently mentioned advice included the idea of “pulling out” (3 percent) and tracking menstruation cycles (1 percent).

Type of Advice Considered Helpful If Adolescent was Trying to Avoid Getting Pregnant



“The only way to truly avoid getting pregnant is to not have sex but condoms and birth control are very effective.” – Rural Female, 16+

“If you wait it won't be a problem. I think birth control is something you should decide on with your significant other.” – Rural Female, 16+

“Use protection!!! Condoms, birth control, pull out everything. Maybe even abstinence.” – Rural Female, 16+

“I’m a male I don’t have this problem. But to avoid getting my other (sic) pregnant I’d use a condom.” – Rural Male, 16+

“Use birth control and any protection, and do not have sex unless the other person has given consent and has agreed to also use protection.” – Urban Male, Under 16

“Use a condom and pull out and use plan b cause why not be safe in multiple ways.” – Rural Female, 16+

“Use condoms or birth control or pay attention to your ovulation dates.” – Urban Female, 16+

“Use protection and be cautious.” – At-Risk Urban Female, Under 16

“I would wear a condom, so I do not get my girlfriend pregnant and I would make sure my girl has protection too.” – Urban Male, Under 16

“It’s so simple...BIRTH CONTROL. Like BIRTH CONTROL WORKS, it just makes u loose (sic) hair and shit.” – Urban Female, Under 16

“Use pregnant pills or condoms or maybe get an abortion ‘cause you might really not want that baby cause its risky.” – Urban Male, Under 16

“I am a male, so this really is not a concern for me. I can’t get pregnant.” – Urban Male, 16+

“Just wait.” – At-Risk Urban Male, Under 16

Differences by Categorized Mentions

| | |
|--|--|
| Using Contraception/ Protection | - At-risk adolescents were <i>significantly less likely</i> to mention using contraception/protection (49 percent) |
| | - Male adolescents were <i>significantly less likely</i> to mention using contraception/protection (60 percent) |
| Abstinence | - No differences among groups |
| “Pulling Out” | - No differences among groups |
| Tracking Menstruation | - No differences among groups |

iv. Desired Advice Related to Feeling Pressured to Have Sex

To better understand the type of advice adolescents would want if they were feeling pressured to have sex, adolescents were asked the following question.

Question Asked

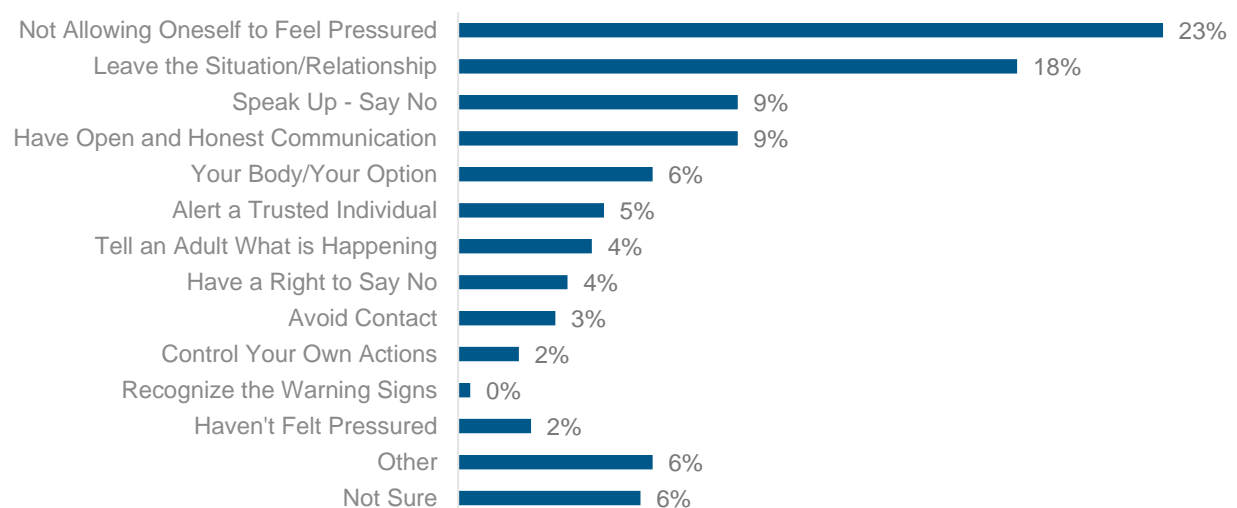
What advice would help you if you were feeling pressured to have sex?

(Open-ended response, structure and categorized)

KEY FINDING

Most frequently, adolescents reported wanting advice related to not feeling pressured to have sex (23 percent), how to leave the situation or relationship if pressured (18 percent), how to speak up and say “No” (9 percent) and how to have open and honest communication with their partner if they felt pressured (9 percent).

Type of Advice Considered Helpful If Adolescent was Feeling Pressured to Have Sex



“Cut out whoever is pressuring you because they clearly don't love you for who you are. There are plenty of amazing people out there who share your values. Those are the people you should surround yourself with.” – Rural Female, 16+

“Leave. It may seem hard but any time you are being pressured to do something you don't want to do it's not a healthy relationship.” – At-Risk Urban Female, 16+

“Realize you have the right to say no, and you need to give consent in order to have sex. If someone is pressuring you to have sex, take a break from them, or explain to them why you do not want to have sex, so they understand why.” – Urban Male, Under 16

“Never have sex with that person or not at least until you’re ready. Cut that person off if you really aren’t comfortable with them because it isn’t healthy for them to be pressuring you.” – Rural Female, 16+

“Put your foot down about it. If you don’t want to have sex, then don’t. Don’t be feel pressured to please your partner.” – Urban Female, 16+

“Telling a trusted adult, no matter how hard it will be you need to tell someone. Also tell the person who is pressuring you that it is illegal and not okay.” – Urban Female, 16+

“You have control over your own actions, don’t let anyone else control you except for you.” – Rural Male, 16+

“Don’t let anyone make you do something you don’t want to do or are not comfortable with. Also, don’t rush it.” – Rural Female, 16+

“You are not trapped in that relationship. If you are not feeling it, let it be known and if your significant other does not accept that, they are not the right fit.” – Rural Male, 16+

Differences by Categorized Mentions

| | |
|---|---|
| Not Allowing Oneself to Feel Pressured | - No differences among groups |
| Leave the Situation/Relationship | - At-risk adolescents were <i>significantly less likely</i> to mention leaving the situation/relationship (8 percent) |
| Speak Up - Say No | - Male adolescents were <i>significantly less likely</i> to speak up or say “No” (4 percent) |
| Have Open and Honest Communication | - No differences among groups |
| Your Body/Your Option | - No differences among groups |
| Alert a Trusted Individual | - No differences among groups |
| Tell an Adult What is Happening | - No differences among groups |
| Have a Right to Say No | - No differences among groups |
| Avoid Contact | - No differences among groups |
| Control Your Own Actions | - No differences among groups |
| Recognize the Warning Signs | - No differences among groups |
| Haven’t Felt Pressured | - No differences among groups |

v. Desired Advice Related to Having Healthy Relationships with Others

While the topic of having healthy relationships was asked earlier in the survey, adolescents provided advice that they'd want related to having and maintaining healthy relationships. Adolescents were asked the following question.

Question Asked

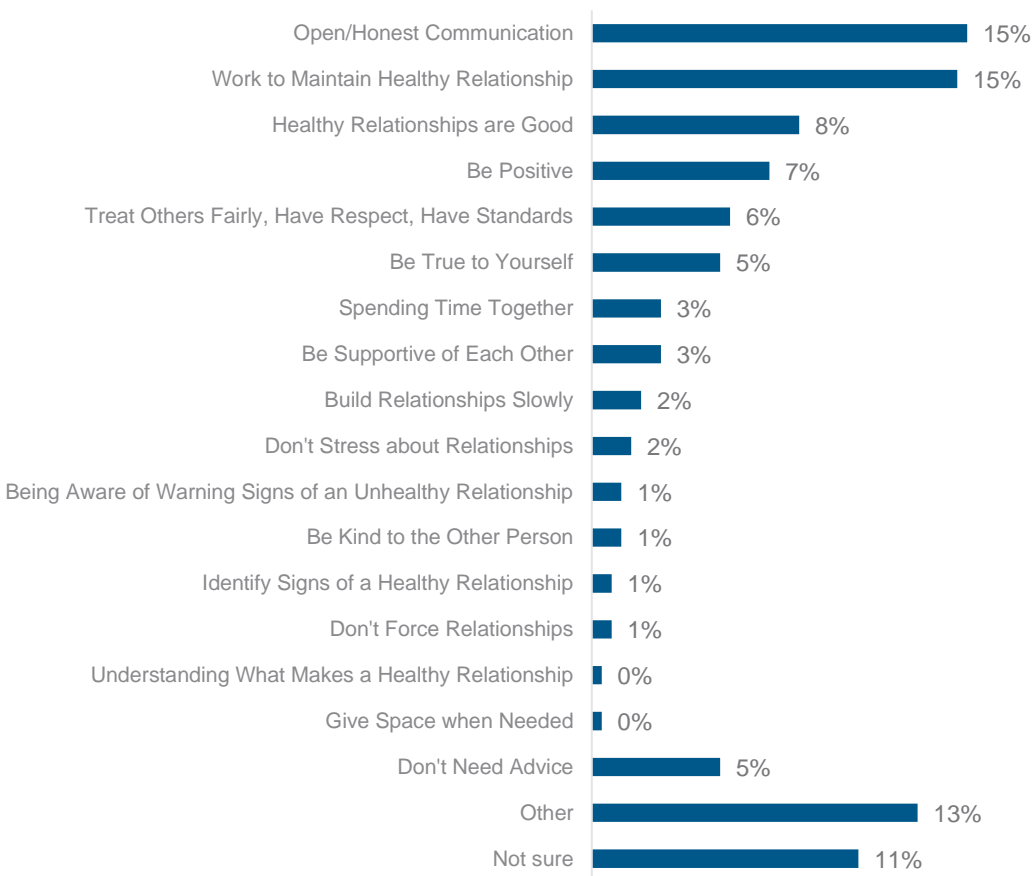
What advice would help you if you were having healthy relationships with others?

(Open-ended response, structure and categorized)

KEY FINDING

Adolescents most frequently mentioned wanting to get advice about maintaining open and honest communication in a relationship (15 percent), steps to take to maintain healthy relationships (15 percent), that healthy relationships are good (8 percent) and to remain positive (7 percent).

Type of Advice Considered Helpful If Adolescent was Having Healthy Relationships with Others



“Healthy relationships are so important, and I am so happy that you are developing them now. Remember to be kind and understanding to your friends and partner so your relationships will continue to flourish.” – Rural Female, 16+

“Always be honest but don’t be rude. There’s a difference. Keep your friends and family close and don’t let little things destroy that relationship.” – Urban Female, 16+

“Take it slow, be there for yourself.” – At-Risk Urban Male, 16+

“Always be honest with them. Be yourself around them but always stay true to yourself.” – Rural Female, Under 16

“Honesty and trust is key to a healthy relationship.” – Urban Female, 16+

“Always listen to your significant other and make sure you can imagine how they are feeling. Also, make sure whatever you guys are doing is mutual and that you both enjoy it.” – Rural Male, 16+

“Do what makes you happy! Surrounding yourself with positive people is great for the mind and soul. Loving life is the best thing for yourself! Build others up as well.” – Rural Female, 16+

Differences by Categorized Mentions

| | |
|--|--|
| Open/Honest Communication | - At-risk adolescents were <i>significantly less likely</i> to mention open/honest communication (4 percent) |
| Work to Maintain Healthy Relationship | - No differences among groups |
| Healthy Relationships are Good | - No differences among groups |
| Be Positive | - No differences among groups |
| Treat Others Fairly, Have Respect, Have Standards | - No differences among groups |
| Be True to Yourself | - No differences among groups |
| Spending Time Together | - No differences among groups |
| Be Supportive of Each Other | - No differences among groups |
| Build Relationships Slowly | - No differences among groups |
| Don’t Stress about Relationships | - No differences among groups |
| Being Aware of Warning Signs of an Unhealthy Relationship | - No differences among groups |
| Be Kind to the Other Person | - No differences among groups |
| Identify Signs of a Healthy Relationship | - No differences among groups |
| Don’t Force Relationships | - No differences among groups |
| Understanding What Makes a Healthy Relationship | - No differences among groups |
| Give Space when Needed | - No differences among groups |

Adolescent Perspectives on Communication

i. Views of Who Adolescents Would Listen to Related to Teen Topics

To assist in the appropriate development of campaign communication strategies, adolescents were asked to share their views on who or what they would listen to when it comes to sex or healthy relationships.

Question Asked

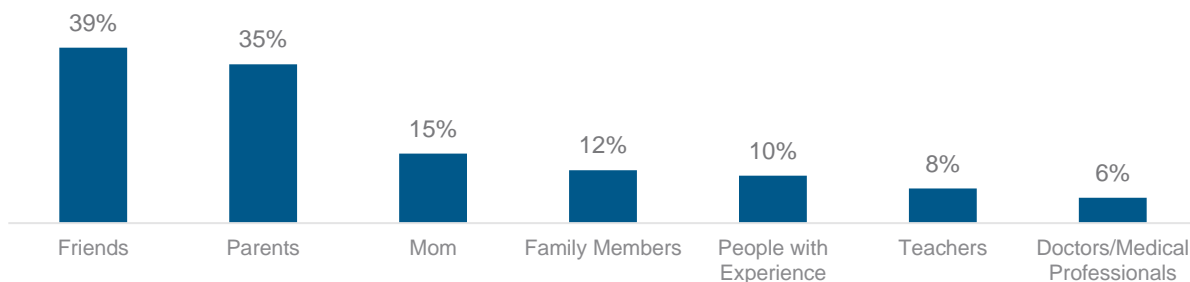
Who or what do you listen to when it comes to sex or healthy relationships?

(Open-ended response, structure and categorized)

KEY FINDING

Adolescents are most likely to listen to friends and parents about sex and healthy relationships. Approximately 39 percent of adolescents mentioned that they would listen to their friends regarding sex or healthy relationships. Thirty-five percent of adolescents mentioned that they would listen to a parent.

Who or What Adolescents Would Listen to Regarding Sex or Healthy Relationships



“My close friends and significant other when it comes to sex. For healthy relationship advice, I receive tips from my family well.” – Rural Male, 16+

“I listen to my friends and adults that don't make me feel awkward when I talk about things like sex.” – Urban Female, 16+

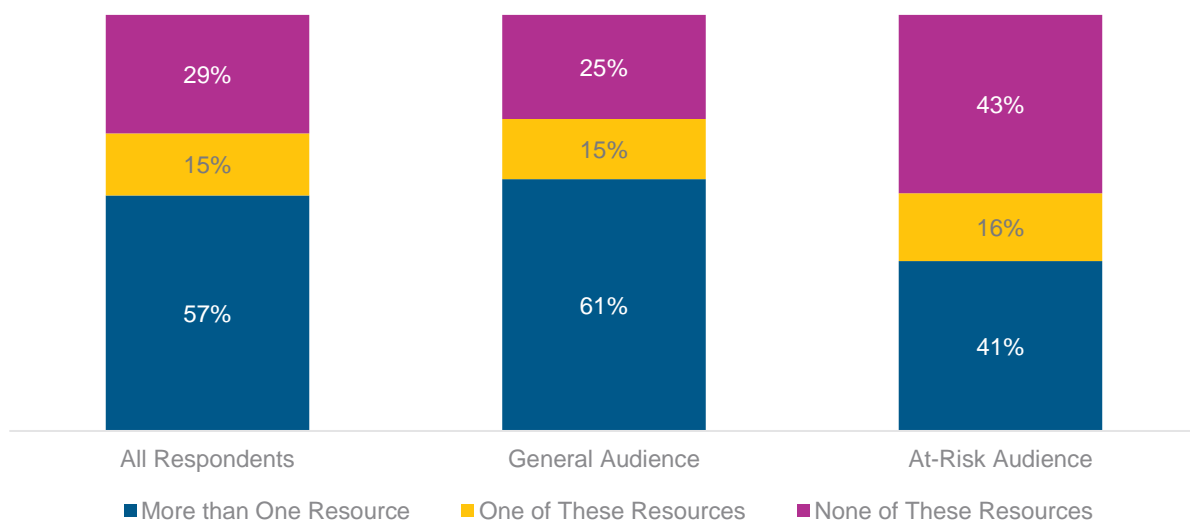
“My parents because they know the first to last thing of have a Relationship. (sic)” – Urban Female, Under 16

Differences by Categorized Mentions

| | |
|--------------------------------------|---|
| Friends | - At-risk adolescents were <i>significantly less likely</i> to mention friends |
| | - The Under 16 age group was <i>significantly less likely</i> to mention friends |
| Parents | - No differences among groups |
| Mom | - No differences among groups |
| Family Members | - No differences among groups |
| People with Experience | - At-risk adolescents were <i>significantly less likely</i> to mention people with experience |
| Teachers | - No differences among groups |
| Doctors/Medical Professionals | - Male adolescents were <i>significantly less likely</i> to mention doctors/medical professionals |

It is also important to note that more than half of adolescents (57 percent) wanted multiple perspectives and a variety of opinions from multiple resources mentioned, including considering friends, parents, people with experience and other resources. *It is important to note that at-risk adolescents were significantly more likely to not listen to any of the specific resources mentioned by others when it came to sex and healthy relationships, with 43 percent not identifying any of the mentioned resources that they would turn to.*

Comparison of Resources/Perspectives Considered among Adolescents



ii. What is Paid Attention to Through Advertising

Beyond understanding who or what adolescents would listen to regarding sex and healthy relationships, respondents were asked an open-ended question about what they would pay attention to about sex and relationships from advertising.

Question Asked

What would you pay attention to about sex and relationships from advertising?

(Open-ended response, structure and categorized)

KEY FINDING

Adolescents most frequently mentioned that they would pay attention to information about safe sex advice, including contraception/protection (18 percent), followed by mentions of ads that promoted or demonstrated healthy relationships (9 percent) and ads that highlighted the consequences of sex (8 percent). It is also important to note that approximately 15 percent of adolescents reported that they would not pay attention to information through advertising (Note: Self-reported mentions of not paying attention to advertising may not reflect the true impact or influence of advertising on adolescents but may signify that these adolescents are unlikely to believe that ads would be a relevant environment for useful information to appear).

What Adolescents Would Pay Attention to About Sex and Relationships from Advertising



“Advice about a more easy (sic) accessible way to stay safe during sex, teens don't like to listen to risk factors, they believe they're invincible.” – Urban Female, 16+

“The bad sides of it. STDs and pregnancy or loss.” – Rural Female, 16+

“I would pay attention to real stories from people who have experienced healthy sex and relationships.” – Urban Female, 16+

“How to treat your partner right, and protection and birth control options.” – Rural Male, 16+

“How to stay safe and how to make your partner at minimum risk. (sic)” – Rural Male, Under 16

“Probably abusive relationship signs that are really real and relatable to high schoolers.” – Urban Female, 16+

“Just general tips and advice, maybe red flags of an unhealthy or abusive relationship. It mostly depends on how it's presented for whether or not I'll trust it, though.” – Urban Female, Under 16

Differences by Categorized Mentions

| | |
|--|--|
| Safe Sex Advice - Contraception/Protection | - No differences among groups |
| Promoting/Demonstrating Healthy Relationships | - At-risk adolescents were <i>significantly less likely</i> to mention promoting/demonstrating healthy relationships (0 percent) - The Under 16 age group was <i>significantly less likely</i> to mention promoting/demonstrating healthy relationships (3 percent) |
| Consequences of Sex | - The Under 16 age group was <i>significantly more likely</i> to mention consequences of sex (14 percent) - Male adolescents were <i>significantly less likely</i> to mention the consequences of sex (4 percent) |
| Real/Transparent/Honest Advice | - No differences among groups |
| Stats/Numbers/Facts | - No differences among groups |
| Individuals in the Ad - Who They Are, What They Say | - No differences among groups |
| Abstinence/How to Manage Abstaining | - No differences among groups |
| Connects with Specific Situation | - No differences among groups |
| Credible Resource | - No differences among groups |
| Wouldn't Pay Attention to Ads | - Male adolescents were <i>significantly more likely</i> to mention that they wouldn't pay attention to ads (21 percent) |

iii. What is Most Difficult About Giving Advice

Adolescents were asked about what is difficult about giving advice to peers to better understand barriers that might exist for the campaign’s messaging efforts.

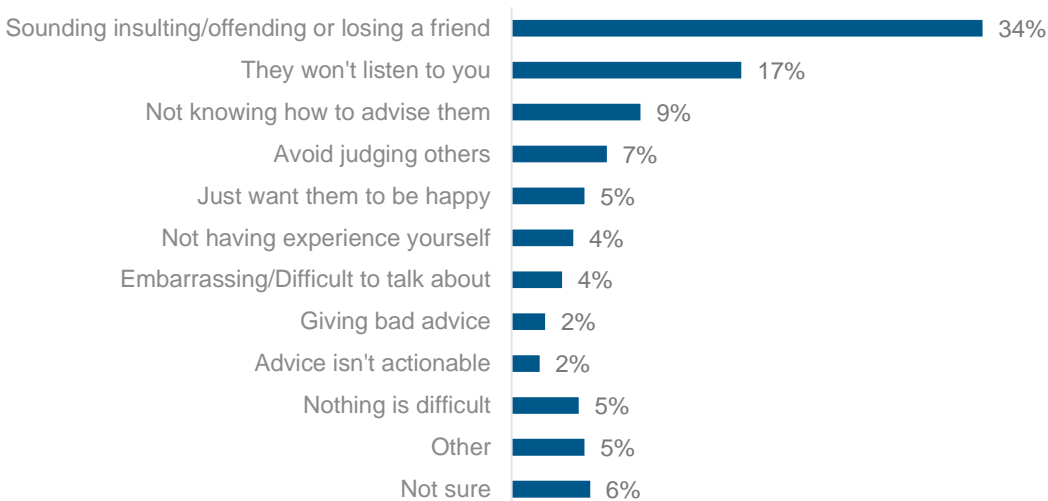
Question Asked

What is most difficult about giving a close friend advice about these things? (Question Context: Starting to have sex, feeling pressured to have sex, using contraception, dating someone who is becoming controlling over them)

(Open-ended response, structure and categorized)

KEY FINDING

The most frequently mentioned concern about giving a close friend advice was in sounding insulting, offending the friend or even potentially losing a friend by giving the advice (34 percent). Additionally, 17 percent of adolescents were concerned that their friend would not listen to them. Another nine percent mentioned that they were not sure how to advise their friend about a situation.



“They might get mad at you because they might never talk to you again.” – At-Risk Urban Female, Under 16

“You don't want to hurt them, but you want to be 100% honest and see what's best for them.” – At-Risk Rural Female, 16+

“It is difficult because you don't know what they are thinking. It is a very personal thing to talk about.” – Urban Female, Under 16

“It can definitely be awkward to talk about sex with your friends. Also, if they are doing something that you don't agree with, I would be nervous that they would judge me for whatever I say.” – Rural Male, 16+

“The fact that I don't even have advice for myself in those types of situations.” – Urban Female, 16+

“Sometimes your friend does not want the advice or does not listen to the advice and you have to watch your friend and hope they are happy and safe.” – Rural Female, 16+

“They may not take me seriously. They could say I am being too cautious, and it is too unlikely to ever happen to them. They may want to save their relationship, no matter the cost to them.” – Urban Female, 16+

“The worst part is worrying about the backlash. You don't know if the person is going to accept your advice and looking out for them, or if they are just going to get angry and accusatory.” – Urban Female, 16+

“They might think your advice doesn't mean anything because you maybe haven't been through it. Or they could be offended if you call them out for not being smart and making stupid decisions.” – Urban Female, Under 16

“I have very strong opinions about those topics and it can be hard to share my opinions in a way that is kind and gentle. In those situations, my friend was very vulnerable and if I were to be completely honest with them, it might have hurt their feelings and they would not ask me for advice anymore.” – Rural Female, 16+

Differences by Categorized Mentions

| | | |
|--|---|--|
| Sounding insulting/offending or losing a friend | - | Female adolescents were <i>significantly more likely</i> to be concerned with sounding insulting/offensive or losing a friend (41 percent) |
| They won't listen to you | - | No differences among groups |
| Not knowing how to advise them | - | No differences among groups |
| Avoid judging others | - | No differences among groups |
| Just want them to be happy | - | No differences among groups |
| Not having experience, yourself | - | No differences among groups |
| Embarrassing/Difficult to talk about | - | Male adolescents were <i>significantly more likely</i> to mention that it was embarrassing/difficult to talk about (7 percent) |
| Giving bad advice | - | No differences among groups |
| Advice isn't actionable | - | No differences among groups |

iv. Perspectives on What Would Make It Easier to Talk About Sex and Healthy Relationships

Adolescents were also asked what would make it easier to talk with others about sex and healthy relationships.

Question Asked

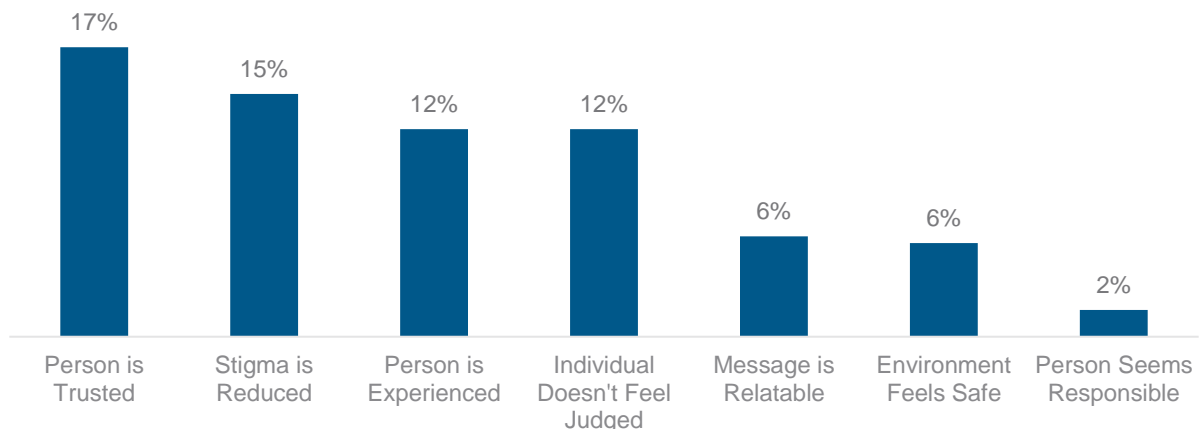
What would make it easier for you to talk with others about sex and healthy relationships?

(Open-ended response, structure and categorized)

KEY FINDING

Adolescent responses covered considerations about the individual who they would talk with, the nature of the discussion and the environment in which they'd have the discussion. Approximately 17 percent of adolescents mentioned that if the person was trusted, it would make it easier for them to talk about sex and healthy relationships. Fifteen percent said it would be easier to talk about if there wasn't a negative stigma about talking about sex. Twelve percent wanted the person they'd talk with to have experience regarding sex and healthy relationships. Another 12 percent reported that they didn't want to feel judged by talking about sex and healthy relationships. Six percent mentioned that the message about sex and relationships would need to be relatable to their current situation. Another six percent reported that they would want to have these types of discussions in an environment in which they felt safe. Two percent mentioned that the individual should seem responsible to them.

What Would Make It Easier to Talk About Sex and Relationships



“If there wasn't such a stigma around sex and having it be this awkward topic of conversation it would be easier to talk about. When it comes to healthy relationships I've learned a lot from television shows or books that have shined some focus on this issue.” – At-Risk Urban Female, 16+

“It would be easier to talk about my issues with people I trust and when I am in a safe environment” – Urban Female, 16+

“If it wasn't such a touchy subject I think it would be easier to talk about.” – Rural Female, 16+

“If people would listen to my opinions and respect them, too.” – Urban Male, Under 16

“If people started normalizing sex. It's not that big of a deal so why bother? Healthy relationships should be easy to talk about if not there are red flags.” – Rural Female, 16+

“Talking to people who I've known for a long time and who I rely on for advice and support.” – Urban Male, 16+

“If sex wasn't thought of as a dirty thing it would be easier to talk about.” – Rural Female, 16+

Differences by Categorized Mentions

| | |
|---------------------------------------|--|
| Person is Trusted | - No differences between groups |
| Stigma is Reduced | <ul style="list-style-type: none">- At-risk adolescents were <i>significantly less likely</i> to mention any type of stigma (2 percent)- The Under 16 age group was <i>significantly less likely</i> to mention any type of stigma (4 percent)- Males were <i>significantly less likely</i> to mention any type of stigma (8 percent) |
| Person is Experienced | - At-risk adolescents were <i>significantly less likely</i> to mention talking with some who has had experience (0 percent) |
| Individual Doesn't Feel Judged | <ul style="list-style-type: none">- At-risk adolescents were <i>significantly less likely</i> to mention a concern about feeling judged (4 percent)- Males were <i>significantly less likely</i> to mention a concern about feeling judged (6 percent)- Females were <i>significantly more likely</i> to be concerned with feeling judged (16 percent) |
| Message is Relatable | - No differences between groups |
| Environment Feels Safe | - Urban adolescents were <i>significantly more likely</i> to be concerned with having a safe environment (9 percent) |
| Person Seems Responsible | - No differences between groups |

Qualitative Assessment of Categorized Mentions

Person is Trusted (17 percent): A key requirement for adolescents is the view that their dialogue about sex and healthy relationships can be shared among people who they trust won't judge them or break their confidence. These respondents reported wanting honest opinions. They wanted to feel like the person they were talking with "had their back."

"People I trust and that will know about me and who tells me everything, so I know I can trust them." – Rural Female, Under 16

"Being comfortable around the person and trusting them cause you don't want them to go off and tell other people about your love life." – Urban Female, Under 16

"If I trust them." – At-Risk Urban Female, Under 16

Stigma of Sex is Reduced (15 percent): Adolescents believed that the topic of sex carried a significantly negative stigma throughout society. They felt that people don't talk openly about sex, consider sex to be taboo and thought society was still too narrow-minded to talk openly about the topic. They also believed it would be easier if healthy relationships were emphasized in society.

- Believe sex education forces the idea that sex is "wrong" or "negative."
- Believe peers and parents are awkward about talking about sex.
- Believe conversation starters would be helpful.

"For sex and relationships to be less taboo amongst teenagers." – Rural Female, 16+

"Making the topic more widely accepted and not awkward." – Rural Male, 16+

"1) It would be easier to talk about sex if people would not be so hesitant to talk about it in front of teens. People do not want to give the wrong idea and tend to ignore it, but we need to hear it. 2) It would be easier if everyone's family talked about this. The first real relationship you developed is one with your family, so they should teach you how to have healthy ones." – Urban Female, 16+

Person is Experienced (12 percent): They seek information from people who are viewed as "experienced" or "experts" in sexual activity and healthy relationships. This may mean that they want advice from those who are viewed as being successful in maintaining healthy relationships, but also from those who have navigated challenging relationships.

“If that person showed that they had healthy relationships themselves so I know they knew what they were talking about.” – Urban Female, 16+

Individual Doesn’t Feel Judged (12 percent): Another critical barrier was the idea that adolescents believed they would be judged, even by talking about sex and healthy relationships or asking questions about these topics. Regardless of their perspective on the issues, they believed their peers, and society at large, would place judgements on them. The topics were considered divisive, in that adolescents felt that having a viewpoint or wanting to get questions answered would label them anywhere on a spectrum, from being promiscuous to being prudish.

“If I know that the person isn't going to judge me.” – Urban Female, 16+

“1) They be open and not yell at me for making this decision. 2) to just share about there (sic) experiences in the past.” – Urban Female, 16+

Message is Relatable (6 percent): Some adolescents mentioned wanting to talk with people who have gone through what they’re experiencing. Being relatable was considered a way to not make the discussion awkward, which was a strong concern among many respondents.

“Someone who would know what I would be going through.” – At-Risk Female, Under 16

Environment Feels Safe (6 percent): For some adolescents (6 percent), these are topics that would be preferred to be discussed in individual settings, or within environments where they have some level of anonymity. These adolescents want to be reassured that those who are providing advice or guidance have the adolescents’ best interest in mind.

“Maybe if everyone was open so maybe if you have like a guest speaker to have people write down story about safe sex and bad sex they it would be anonymous, and no one wouldn’t know who had what happened then you could talk about it.” – Urban Female, Under 16

Person Seems Responsible (2 percent): Respondents viewed “responsible” as anyone who had appropriately managed their sexual behavior safely, not just individuals who had abstained.

“Talking about healthy relationships would be easier if you could talk with a group of people your own age and those who are older than you, and people who have been in abusive or toxic relationships.” – Urban Female, 16+