

# LET'S TALK

Family Communication Toolkit



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# **Growth and Development/Puberty**



# Growth and Development, Ages Zero to Three – What Parents Need to Know

## Parents' Sex Ed Center

Human development is a lifelong process of physical, behavioral, cognitive, and emotional growth and change. In the early stages of life—from babyhood to childhood, childhood to adolescence, and adolescence to adulthood—enormous changes take place. Throughout the process, each person develops attitudes and values that guide choices, relationships, and understanding.

Sexuality is also a lifelong process. Infants, children, teens, and adults are sexual beings. Just as it is important to enhance a child's physical, emotional, and cognitive growth, so it is important to lay foundations for a child's sexual growth. Adults have a responsibility to help children understand and accept their evolving sexuality.

Each stage of development encompasses specific markers. The following developmental guidelines apply to most children in this age group. However, each child is an individual and may reach these stages of development earlier or later than other children the same age. When concerns arise about a specific child's development, parents or other caregivers should consult a doctor or other child development professional.

### Physical Development

Most children aged zero to three will:

- Double their height between birth and age three
- Triple their weight between birth and age three
- Develop teeth and the ability to eat solid foods
- Develop 75 percent of their brain capacity
- Learn to crawl and walk
- Develop large motor skills such as running, jumping, and climbing up stairs
- Begin to take off and put on clothes
- Begin to control body functions through toilet training

### Cognitive Development

Most children aged zero to three will:

- Learn language and communication skills and advance from using single words to phrases to complete sentences
- Develop an imagination and begin to create imaginary scenarios and friends
- Understand the world primarily through their family
- Begin to interact with peers through imitation [Although some children at this age do not yet play directly with each other, they often engage in parallel play.]
- Think concretely, retain some information, and process information primarily through their five senses – by seeing, touching, hearing, tasting, and smelling
- Identify with and begin to imitate their same-sex parent or guardian
- Begin to understand the differences between male and female (gender differences and gender roles)
- Imitate the language and behavior of trusted adults



## Emotional Development

Most children aged zero to three will:

- Develop trust for caregivers who fulfill their needs, such as responding when the child is hungry, wet, etc.
- Begin to test independence and explore limits, but still seek closeness to primary caregiver
- Have relationships primarily with family members who are the most important people in the child's life at this time
- Physically demonstrate feelings, such as kissing and hugging to show love and hitting to show anger
- Master the idea of being happy, sad, or angry, but will generally choose to express emotions physically rather than verbally [The "terrible twos" occur when a child is developing a sense of self outside of and distinct from others, and expresses this individuality by saying "no" and by insisting on doing things him/herself.]

## Sexual Development

Most children aged zero to three will:

- Be curious and explore their own body and others' bodies
- Experience an erection or vaginal lubrication
- Touch their genitals for pleasure
- Talk openly about their bodies
- Be able to say and understand, when taught, the appropriate names for body parts (head, nose, stomach, penis, vulva, etc.)

## What Families Need to Do to Raise Sexually Healthy Children

To help children ages zero to three to develop a healthy sexuality, families should:

- Help children feel good about their entire body. Caregivers should name all body parts accurately and convey that the body and its functions are natural and healthy.
- Touch and comfort children often to help them understand love and how it can be shared. Meeting children's needs also helps them develop trust.
- Help children begin to understand the difference between public and private behaviors and that certain behaviors, such as picking one's nose or touching one's genitals, are *private* ones.
- Teach about anatomical differences between males and females while maintaining that boys and girls are equally special.
- Teach children that they can say no to unwanted touch, regardless of who is attempting to touch them, and that they have a right to be respected when they say no.
- Describe bodily processes, such as pregnancy and birth, in very simple terms.
- Avoid shame and guilt about body parts and functions.



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# Parents' Sex Ed Center

## Growth and Development, Ages Four to Five – What Parents Need to Know

Human development is a lifelong process of physical, behavioral, cognitive, and emotional growth and change. In the early stages of life—from babyhood to childhood, childhood to adolescence, and adolescence to adulthood—enormous changes take place. Throughout the process, each person develops attitudes and values that guide choices, relationships, and understanding.

Sexuality is also a lifelong process. Infants, children, teens, and adults are sexual beings. Just as it is important to enhance a child's physical, emotional, and cognitive growth, so it is important to lay foundations for a child's sexual growth. Adults have a responsibility to help children understand and accept their evolving sexuality.

Each stage of development encompasses specific markers. The following developmental guidelines apply to most children in this age group. However, each child is an individual and may reach these stages of development earlier or later than other children the same age. When concerns arise about a specific child's development, parents or other caregivers should consult a doctor or other child development professional.

### Physical Development

Most children aged four to five will:

- Continue to grow, but at a slower rate than during infancy and the toddler years [Some parts grow faster or sooner than others. For example, organs grow faster than the body, giving preschoolers a rounded tummy.]
- Reach at least 50 percent of their adult height and about 20 percent of their adult weight by age five
- Develop more coordinated large motor skills, enabling them to skip, run, and climb up and down stairs
- Develop fine motor skills, enabling them to tie shoelaces, button shirts, use scissors, and draw recognizable figures
- Continue significant brain development, completing 90 percent of such development by age five
- Develop increased lung capacity and the ability to breathe more deeply
- Lose their “baby look” as their limbs grow longer
- Appear about the same size, regardless of gender
- Increase in overall health and gain resistance to germs

### Cognitive Development

Most children aged four to five will:

- Interact with and learn about the world through play activities
- Begin to experience the world through exploration and feel inquisitive about self and surroundings
- Begin separation from family as they experience less proximity to caregivers and more independence

- Understand what is good and bad (though they may not understand why) and be able to follow the rules
- Be able to understand and accomplish simple activities to be healthy, such as brushing teeth or washing hands
- Understand the concept of privacy

## Emotional Development

Most children aged four to five will:

- Still rely on caregivers, while no longer needing or wanting as much physical contact with caregivers as they received in infancy and as toddlers
- Continue to express emotions physically and to seek hugs and kisses
- Socialize with peers, begin to develop relationships, and learn to recognize some peers as friends and others as people they don't like
- Have more opportunities to interact with peers, either through school or recreational activities, and will play with other children

## Sexual Development

Most children aged four to five will:

- Experience vaginal lubrication or erection
- Touch their genitals for pleasure
- Feel curiosity about everything, and ask about where babies come from and how they were born
- Feel curiosity about bodies and may play games like doctor
- Feel sure of their own gender and have the ability to recognize males and females
- Begin to recognize traditional male and female gender roles and to distinguish these roles by gender
- Become conscious of their own body, how it appears to others, and how it functions

## What Families Need to Do to Raise Sexually Healthy Children

To help four- to five-year-old children develop a healthy sexuality, families should:

- Help children understand the concept of privacy and that talk about sexuality is private and occurs at home.
- Teach correct names of the major body parts (internal and external) and their basic functions.
- Explain how babies “get into” the mother’s uterus.
- Encourage children to come to them or other trusted adults for information about sexuality.

## Growth and Development, Ages Six to Eight – What Parents Need to Know

Human development is a lifelong process of physical, behavioral, cognitive, and emotional growth and change. In the early stages of life—from babyhood to childhood, childhood to adolescence, and adolescence to adulthood—enormous changes take place. Throughout the process, each person develops attitudes and values that guide choices, relationships, and understanding.

Sexuality is also a lifelong process. Infants, children, teens, and adults are sexual beings. Just as it is important to enhance a child's physical, emotional, and cognitive growth, so it is important to lay foundations for a child's sexual growth. Adults have a responsibility to help children understand and accept their evolving sexuality.

Each stage of development encompasses specific markers. The following developmental guidelines apply to most children in this age group. However, each child is an individual and may reach these stages of development earlier or later than other children the same age. When concerns arise about a specific child's development, parents or other caregivers should consult a doctor or other child development professional.

### Physical Development

Most children aged six to eight will:

- Experience slower growth of about 2 ½ inches and eight pounds per year
- Grow longer legs relative to their total height and begin resembling adults in the proportion of legs to body
- Develop less fat and grow more muscle than in earlier years
- Increase in strength
- Lose their baby teeth and begin to grow adult teeth which may appear too big for their face
- Use small and large motor skills in sports and other activities

### Cognitive Development

Most children aged six to eight will:

- Develop the skills to process more abstract concepts and complex ideas (e.g., pregnancy, addition/subtraction, etc.)
- Begin elementary school
- Spend more time with the peer group and turn to peers for information [They need information sources outside of family, and other adults become important in their lives.]
- Be able to focus on the past and future as well as the present
- Develop an increased attention span
- Improve in self-control, being able to conform to adult ideas of what is “proper” behavior and to recognize appropriateness in behavior
- Understand the concepts of normality/abnormality, feel concern with being normal and curiosity about differences
- Begin to develop as an individual

- Think for themselves and develop individual opinions, especially as they begin to read and to acquire information through the media

## Emotional Development

Most children aged six to eight will:

- Become more modest and want privacy
- Develop relationships with and love people outside the family as their emotional needs are met by peers as well as family
- Develop less physically demonstrative relationships and express love through sharing and talking [They may be embarrassed by physical affection.]
- Need love and support, but feel less willing to ask for it
- Understand more complex emotions, such as confusion and excitement
- Want more emotional freedom and space from parents
- Become better at controlling and concealing feelings
- Begin to form a broader self-concept and recognize their own strengths and weaknesses, especially with regard to social, academic, and athletic skills
- Have friends and sustained peer group interactions

## Sexual Development

Most children aged six to eight will:

- Prefer to socialize with their own gender almost exclusively and maintain a fairly rigid separation between males and females [They will tease someone who acts in a way that does not adhere to pre-defined gender roles.]
- Recognize the social stigmas and taboos surrounding sexuality, especially if parents are nervous about the subject, and will be less open about asking questions
- Understand more complex ideas with regard to sexuality and begin to understand intercourse apart from making a baby
- Look to peers, media, and other sources for information about sex
- Understand gender role stereotypes, if presented as such
- May engage in same-gender sexual exploration
- Have a stronger self-concept in terms of gender and body image

## What Families Need to Do to Raise Sexually Healthy Children

To help six- to eight-year-old children develop a healthy sexuality, families should:

- Continue to provide information about sexuality, even if a child does not ask for it. At these ages, children may ask fewer questions, but still have lots of curiosity and need information about sexuality.
- Explain that there are many different types of families and all types have equal value and deserve respect.
- Provide basic information about important sexuality issues, such as HIV/AIDS, abortion, marriage, and sexual abuse.
- Inform children about the changes that will take place when they begin puberty. Though most six- to eight-year-old children do not experience these changes, the age at which some begin to show signs of puberty, such as pubic hair, breast buds, and hair under the arms is gradually decreasing, so that children need this information sooner.
- Recognize that everyone does not have the same sexual orientation. Acknowledge to children that many people have romantic feelings for members of the other gender, and some have these feelings for members of the same gender.

## Growth and Development, Ages Nine to 12 – What Parents Need to Know

Human development is a lifelong process of physical, behavioral, cognitive, and emotional growth and change. In the early stages of life—from babyhood to childhood, childhood to adolescence, and adolescence to adulthood—enormous changes take place. Throughout the process, each person develops attitudes and values that guide choices, relationships, and understanding.

Sexuality is also a lifelong process. Infants, children, teens, and adults are sexual beings. Just as it is important to enhance a child's physical, emotional, and cognitive growth, so it is important to lay foundations for a child's sexual growth. Adults have a responsibility to help young people understand and accept their evolving sexuality.

Each stage of development encompasses specific markers. The following developmental guidelines apply to most children in this age group. However, each child is an individual and may reach these stages of development earlier or later than other children the same age. When concerns arise about a specific child's development, parents or other caregivers should consult a doctor or other child development professional.

### Physical Development

Most young people aged nine to 12 will:

- Experience a growth spurt with significant weight gain, muscle growth, and genital maturation [Growth spurt begins earlier for girls; lasts longer for boys, who end up taller].
- Enter puberty, a time when hormones produced in the pituitary gland trigger production of testosterone in males, estrogen/progesterone in females [This usually begins earlier in girls (nine to 12) than in boys (11 to 14).] During puberty—
  - Skin becomes more oily and may develop pimples.
  - Sweating increases and youth may have body odor.
  - Hair grows under arms and on pubis and, in males, on face and chest.
  - Body proportions change [hips widen in females, shoulders broaden in males].
  - Joints may ache due to rapid growth.
  - In males, genitals mature, scrotum darkens, voice deepens, sperm is produced, and erections, ejaculation, and wet dreams are more frequent.
  - In females, genitals mature, breasts develop, vaginal lubrication increases, and ovulation and menstrual cycle begin.
- Masturbate [both males and females] and may have fantasies about others and about sexual intimacy

### Cognitive Development

Most young people aged nine to 12 will:

- Move toward independence as they progress to middle/junior high school
- Continue developing skills in making decisions as they become more independent
- Begin to consider future careers and occupations
- Shift their school focus from play-centered activities to academics
- Begin to look to peers and media for information and advice [Friends greatly influence them.]
- Develop increasing capability for social conscience and for abstract thought, including understanding complex issues such as poverty and war
- Take on increased responsibility, such as family jobs and babysitting

## Emotional Development

Most young people aged nine to 12 will:

- Want to blend in and not stand out from their peers in any way, particularly as to gender roles and sexuality
- Feel concern about outward appearance [They want to look like “everyone else.”]
- Become self-conscious and self-centered
- Have ambivalent, conflicting feelings about puberty and about sexual desire and want to be independent and to conform
- Care greatly about relationships with peers, friendships, dating, and crushes and give peers more importance than family
- Relate to both same-gender and opposite-gender peers and may develop sexual feelings for others as a new dimension within relationships
- Develop the capacity to understand the components of a caring, loving relationship
- Experience feelings of insecurity and begin to doubt self-concept and previous self-confidence [Girls, especially, often experience a significant drop in self-esteem.]
- Struggle with family relationships and desire privacy and separation from family [They test limits and push for independence.]
- Experience mood swings, especially evident in family relationships
- Develop infatuations or “crushes” and may begin dating

## Sexual Development

Most young people aged nine to 12 will:

- Have an emerging sense of self as a young adult
- Feel conscious of their sexuality and how they choose to express it
- Understand jokes with sexual content
- Feel concerns about being normal, such as whether it is normal to masturbate, have wet dreams, etc.
- Feel anxious about puberty, when it will happen, how it will occur, how to be prepared, etc.
- Feel shy about asking questions of caregivers, especially regarding sexuality, and may act like they already know all the answers
- Value privacy highly

## What Families Need to Do to Raise Sexually Healthy Youth

To help nine- to 12-year-old youth develop a healthy sexuality, families should:

- Help young people understand puberty and the changes they are going through and that these changes, including menstruation and nocturnal emissions (ejaculation), are normal.
- Respect young people’s privacy while encouraging open communication.
- Convey that growth and maturation rates differ from person to person.
- Help young people understand that, while they are maturing physically, they still have lots of emotional and cognitive growth ahead and that sexual intercourse is not healthy, appropriate, or wise at this time in their lives.
- Acknowledge that abstinence is normal and healthy, that sexual development is healthy and natural, and that, as they grow older, there will be many ways to express sexuality that do not include sexual intercourse.
- Discuss the important relationship between sexual and emotional feelings.
- Be open to conversations about contraception and condoms and respond honestly and accurately when young people ask about them.



## Growth and Development, Ages 13 to 17 – What Parents Need to Know

Human development is a lifelong process of physical, behavioral, cognitive, and emotional growth and change. In the early stages of life—from babyhood to childhood, childhood to adolescence, and adolescence to adulthood—enormous changes take place. Throughout the process, each person develops attitudes and values that guide choices, relationships, and understanding.

Sexuality is also a lifelong process. Infants, children, teens, and adults are sexual beings. Just as it is important to enhance a young person's physical, emotional, and cognitive growth, so it is important to lay foundations for an adolescent's sexual growth. Adults have a responsibility to help young people understand and accept their evolving sexuality.

Each stage of development encompasses specific markers. The following developmental guidelines apply to most young people in this age group. However, each adolescent is an individual and may reach these stages of development earlier or later than other teens the same age. When concerns arise about a specific teen's development, parents or other caregivers should consult a doctor or other adolescent development professional.

### Physical Development

Most teens, ages 13 to 17 will:

- Complete puberty and the physical transition from childhood to adulthood
- Reach nearly their adult height, especially females [Males continue to grow taller into their early twenties.]

### Cognitive Development

Most teens, ages 13 to 17 will:

- Attain cognitive maturity—the ability to make decisions based on knowledge of options and their consequences
- Continue to be influenced by peers [The power of peer pressure lessens after early adolescence.]
- Build skills to become self-sufficient
- Respond to media messages but develop increasing ability to analyze those messages
- Develop increasingly mature relationships with friends and family
- Seek increased power over their own lives
- Learn to drive, increasing their independence

### Emotional Development

Most teens, ages 13 to 17 will:

- Have the capacity to develop long-lasting, mutual, and healthy relationships, if they have the foundations for this development—trust, positive past experiences, and an understanding of love
- Understand their own feelings and have the ability to analyze why they feel a certain way
- Begin to place less value on appearance and more on personality



## Sexual Development

Most teens, ages 13 to 17 will:

- Understand that they are sexual and understand the options and consequences of sexual expression
- Choose to express their sexuality in ways that may or may not include sexual intercourse
- Recognize the components of healthy and unhealthy relationships
- Have a clear understanding of pregnancy and of HIV and other sexually transmitted infections and the possible consequences of sexual intercourse and have the ability to make reasoned choices about sex based on knowledge
- Recognize the role media play in propagating views about sex
- Have the capacity to learn about intimate, loving, long-term relationships
- Have an understanding of their own sexual orientation [This is different than sexual behavior]

## What Families Need to Do to Raise Sexually Healthy Adolescents

To help teens ages 13 to 17 develop as sexually healthy youth, families should:

- Clearly articulate your family and religious values regarding sexual intercourse. Express that, although sex is pleasurable, young people should wait to initiate sex until they are in a mature, loving, and responsible relationship.
- Express that we all have a variety of options for experiencing intimacy and expressing love.
- Discuss together the factors, including age, mutual consent, protection, contraceptive use, love, intimacy, etc., that you and your teen believe should be a part of decisions about sexual intercourse.
- Reinforce teens' ability to make decisions while providing information on which they can base those decisions.
- Discuss contraceptive options and talk about the importance of condom use.
- Discuss teens' options, should unprotected intercourse occur—including emergency contraception and STI testing and treatment. Discuss teens' options, should pregnancy occur, including abortion, parenting, and adoption.
- Discuss exploitive behavior and why it is unhealthy and (in some cases) illegal.
- Help youth identify various physical and verbal responses to avoid/get away from sexual situations that make them feel uncomfortable.
- Acknowledge that teens have many future life options, that some may marry and/or parent while others may remain single and/or childless.
- Use inclusive language that recognizes that some youth may be gay, lesbian, bisexual, or transgender.

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## Talking to Your Child About Menstruation

### Preparing for the First Period

The start of menstruation is a momentous event in a girl's life. Some girls greet those first drops of blood with joy or relief, while others feel bewildered and scared. Whatever the reaction, the arrival of the first period holds the same meaning for every girl: It's proof that she's becoming a woman.

On average, most girls start their periods when they're 12 or 13 years old (although some begin earlier or later). But if you wait until your daughter gets her period to talk to her about menstruation, that's too late.

So, how do you discuss menstruation and offer education, as well as guidance and support, before the big day even arrives? Or, what do you tell your son? (Boys have questions, too.) Before you can discuss menstruation, it's important to have a good understanding of how the process works.

### About Menstruation

In the early 1900s, girls generally reached menarche (the medical term for the first period or the beginning of menstruation) at age 14 or 15. For a variety of reasons, including better nutrition, girls now usually start to menstruate between the ages of 10 and 16. But menstruation isn't just about having a period. It's a sign that a girl is physically capable of becoming pregnant.

During the menstrual cycle, hormones are released from different parts of the body to help control and prepare the body for pregnancy. That preparation begins when the ovaries (two oval-shaped organs that lie to the upper right and left of the uterus, or womb) produce the hormones estrogen and progesterone. These hormones trigger certain changes in the endometrium (the lining of the uterus). Then, other hormones from the pituitary gland stimulate the maturing and release of the egg, or ovum, from the ovary.



The release of the egg is called ovulation, and it occurs in the middle of the cycle — usually day 14 of a 28-day cycle, for example. From the ovary, the egg moves into one of the fallopian tubes (the two tubes that lead from the ovaries to the uterus).

If the egg is fertilized by sperm, the fertilized egg will take about 2 to 4 days to travel down the fallopian tube. It will then attach to the thick, blood-rich lining of the uterus. If it's not fertilized, the egg begins to fall apart, the estrogen and progesterone levels drop, and the uterine lining breaks down and is shed — this bleeding is what's known as a period.

A menstrual cycle lasts from the first day of one period to the first day of the next. The typical cycle of an adult female is 28 days, although some are as short as 22 days and others are as long as 45. Periods usually last about 5 days, although that can vary, too. During a period, a woman passes about 2-4 tablespoons (30-59 milliliters) of menstrual fluid.

For the first few years after menstruation begins, cycles are often irregular. They may be shorter (3 weeks) or longer (6 weeks), or a young woman may have only three or four periods a year. The absence of periods is called amenorrhea. A girl should see her doctor if she hasn't started menstruating by age 15, or 3 years after her first signs of puberty appeared.

So, how will you know when *your* daughter might start menstruating? You'll probably be able to see physical changes that signal she's getting close to starting. Breast development is usually the first sign that a girl has entered puberty. It's usually followed by the growth of some pubic hair.

About a year after breast development begins, most girls enter into a phase of rapid growth. They'll get taller and curvier, and their feet will grow. Then, about a year after the growth spurt begins and about 2 and a half years after breast development starts, the first period arrives.

### **Timing Is Everything**

It's probably best to avoid "The Talk" about menstruation. Instead, try to spread it out into lots of smaller conversations — education about how the human body works should be continuous. Otherwise, too much importance is placed on a single discussion and the information can be overwhelming. Kids reaching puberty should already know what's going to happen to their bodies.

Even toddlers begin asking questions about their bodies, and parents should answer them honestly. But how specific you are with the details should depend on your child's maturity and ability to understand.

Throughout childhood, kids ask many questions and each is an opportunity for parents to advance their kids' knowledge. Doing so not only gives kids the information they need when they ask for it, but also lets them know that their parents are available for and comfortable with these discussions.

But you shouldn't necessarily wait for their questions to talk about puberty and menstruation. Ideally, by the time they're close to puberty, both girls and boys should have full knowledge of the changes that will take place in their bodies. Why? Kids really want to learn about most things from their parents. And you can be sure that they'll also hear their friends discuss these changes.

By providing kids with good information, parents will know that they're well-informed and able to sort out any misinformation. Kids can often make certain aspects of puberty — menstruation, especially —

sound bad and scary; and if that's the only information kids, then that's what they'll believe.

It's also important for parents to paint the process of menstruation in a positive light. If a mother refers to her period as "the curse," her daughter might get a negative impression of the whole experience. Instead, mothers can explain that monthly periods are a natural and wonderful part of being a woman. After all, without them, women couldn't become mothers.

Explaining that everyone is different is also key. For example, your daughter may be concerned that her body is changing more quickly — or more slowly — than her friends' bodies.

In addition to understanding how menstruation works, girls need to be familiar with feminine-hygiene supplies (sanitary pads and tampons) and they should know that sometimes periods may cause cramps when the muscles of the uterus contract.

Another reason kids need to know about menstruation at an early age is that sexually active girls can get pregnant even before they start menstruating. Sometimes ovulation (the release of an egg from an ovary) can happen just before a girl is about to have her first period. This means that she can be fertile and become pregnant even though she hasn't yet menstruated.

## Common Questions About Periods

Kids — both girls *and* boys — often have lots of questions about menstruation, such as:

- **How come only girls have periods?** Explain that boys change in different ways during puberty, like the deepening of their voices and the growth of facial hair. Getting her period means a girl can have a baby. Periods happen because of changes in the uterus — a body part that girls have but boys do not.
- **Do girls have their periods for the rest of their lives?** No, a woman stops having her period usually between the ages of 45 and 51, which means she will no longer be able to become pregnant (at least without the help of some fancy reproductive technology, that is!).
- **How long does a period last and how much blood is there?** It varies for each girl, but some have their period for 3 days and others have it for a week. Periods can be light, moderate, or heavy, and there can be a total of 2-4 tablespoons (30-59 milliliters) of blood. And this can vary from period to period in the same girl.
- **Are pads or tampons better?** In choosing between the two, what matters is a girl's physical and emotional comfort. A tampon can be uncomfortable in the years right after menstruation starts, when the pelvis and vagina are still growing. Usually, girls are more comfortable using pads at first, but they may want to start using tampons when they get older (although they don't *need* to wait to use tampons until a certain age). Their friends may have started using them, and the freedom tampons can give may be appealing. Each box of tampons includes instructions, so be sure to read them with your daughter.

Although the first few times using a tampon can be frustrating, explain to your daughter that it will soon be easy with a little practice. Because the muscles of the vagina can become tense when a girl is nervous, it can be difficult to insert a tampon at first. It's important to relax as much as possible. It's a good idea to start with a slim tampon with an applicator because they can be easier to insert. It can also help to first try a tampon on a day with heavier flow, so that it is easier to put in.

- **Do girls have to stop playing sports or swimming while they have their periods?** Girls should understand they can do everything they normally would do — as long as they're comfortable. For example, girls may choose to wear a tampon so they can continue to swim while menstruating.
- **What's toxic shock syndrome (TSS)?** TSS is a rare but serious bacterial infection that can be associated with tampon use. Fortunately, TSS that is associated with menstruation can almost always be prevented by changing tampons regularly and by using the smallest absorbency needed (for example, "slender regular" instead of "super plus"). A reasonable precaution is to change tampons every 4 hours or more frequently if the blood flow is heavy.
- **Do girls always have cramps with their periods?** Concern about cramps is a big issue for some girls. While most girls eventually have some cramps, many do not for the first year or two of getting their periods. It's important to tell girls that cramps usually only last a few days. Sometimes, a hot water bottle or a hot bath can help ease discomfort. Some find that deep breathing and exercising help, too. If cramps become too uncomfortable, your daughter might want to take an over-the-counter (OTC) medicine like ibuprofen (such as Advil or Motrin).

Having cramps for a day or two each month is common, but signs of dysmenorrhea — severely painful menstruation that interferes with a girl's ability to attend school or study or sleep — or other menstrual problems should be discussed with your doctor.

- **What's PMS?** Premenstrual syndrome (PMS) includes physical and emotional changes (mood swings and irritability, tension, bloating, and breast tenderness) that can occur during the time right before some girls get their periods. But girls usually don't develop symptoms associated with PMS until several years after menstruation starts — if ever. While not all girls experience PMS, for those who do, plenty of rest, exercise, and eating a balanced diet may help.
- **Do girls need to douche or use deodorant spray when they have their periods?** No. In fact, douching can increase a girl's possibility of infection by disrupting the normal balance of bacteria in the vagina.

## Tips for Talking

Just as parents might be slightly embarrassed to talk with their children about menstruation, kids and teens may find it difficult to let mom and dad know their questions or concerns. If talking about menstruation is awkward for you, here are some ways to make discussions a little easier and more open:

- Look for good books and videos or DVDs that can help foster a more comfortable and educational conversation.
- Speak to your family doctor about ways to talk about menstruation and puberty.
- Brush up on the facts of menstruation and have information readily available for your child to look at or read.
- If there's a question that you don't know the answer to, let your child know you will find out the information.
- Coordinate your conversations with the health lessons and sex education your child receives in school. Ask your child's teacher about his or her plans and for any advice.
- To break the ice, try asking your child some questions that will help you both ease into discussions. Ask what kind of questions he or she has while you walk down the feminine-hygiene products aisle at your grocery store or while you watch a commercial for pain relievers advertised to alleviate symptoms of PMS.
- If you hear your child mention something related to getting a period, spur a conversation by asking where the information came from. Questions can be a great way to set the record straight on any misconceptions kids might have.
- Before you take your preteen daughter for a routine checkup, let her know that the doctor may ask if she's gotten her period yet. You can then ask if she has any concerns or questions about getting her first period.

It's important to tell kids the truth about menstruation in an age-appropriate way and to be comfortable with the accuracy of that information. Don't be put off by their questions — they're probably the same questions you had at that age, and now you can answer them.

Reviewed by: Steven Dowshen, MD

Date reviewed: August 2011



Note: All information on KidsHealth® is for educational purposes only. For specific medical advice, diagnoses, and treatment, consult your doctor.

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# Puberty and Boys

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## What is puberty?

Between the ages of 10 and 14 most boys and girls begin to notice changes taking place in their bodies. These changes, which occur over a number of years, are generally referred to as puberty.

The changes take place in all boys and girls but they will start at different times and take place at different rates. Not everyone starts puberty between the ages of 10 and 14, some people start younger, and some much later. Similarly, in some people all the changes take place in two years, and in others they can take as long as four years. Generally they start between ages 7 and 13 in girls and ages 9 and 15 in boys.

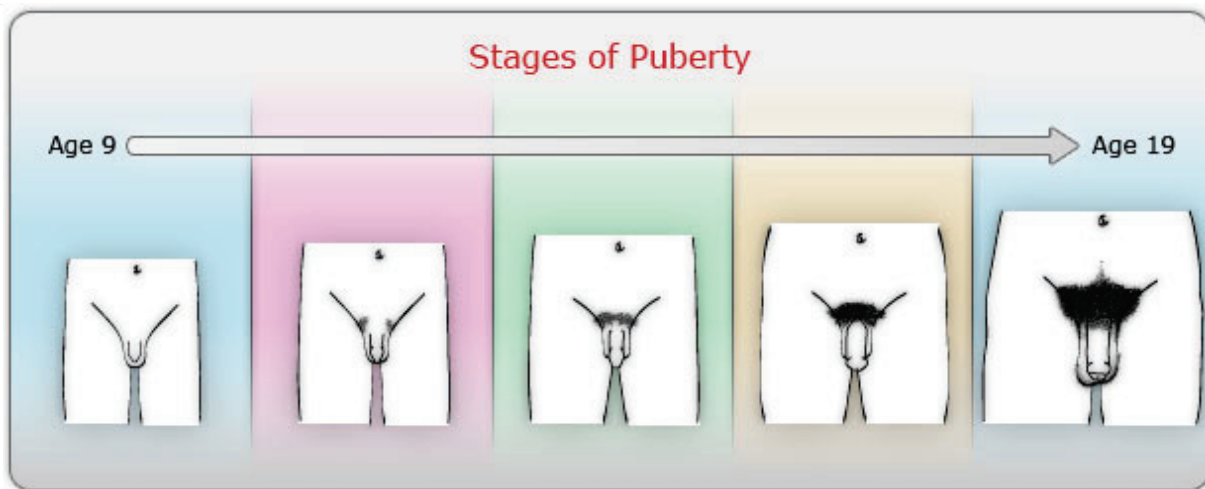
Puberty starts when extra amounts of chemicals called hormones start to be produced in the body. These hormones guide the changes that take place in the body. As well as causing physical changes these hormones also cause emotional changes.

## What are the physical changes that take place in boys?

<http://www.avert.org/puberty-boys.htm>9/19/11 10:00 AM

A boy's voice gets deeper, his muscles develop and his chest gets broader. Hair starts to grow on his face, legs, chest, and under his arms. In due course he will need to start shaving.

During this time his penis and testicles will also grow bigger and longer. Sometimes one testicle grows faster than the other, and it is natural for one to hang lower than the other. Hair, called pubic hair, will also start to grow at the base of his penis. As a boy gets older, this hair will grow thicker and courser.



This diagram is only a representation. All boys' bodies look different and penises come in many different shapes and sizes.

As a boy progresses through the stages of puberty, he will also start to have erections and he may have wet dreams.

### **What is an erection?**

An erection is when a boy's penis hardens and lengthens. This usually happens when a boy has romantic or sexual thoughts, or as a result of physical stimulation. However, during puberty a boy will start to get erections more often, sometimes without any stimulation at all.

Most erections are not straight, and tend to either curve upwards or to either side. Many boys worry that their penis is smaller than other boys', but most penises are around the same size when erect.

### **What is a wet dream?**

*“Wet dreams are not something to be embarrassed about; they are natural and happen to lots of people.”*

Erections can happen at any time, including when a boy is asleep. A wet dream happens when a boy becomes sexually aroused while he is asleep and ejaculates (semen - the sticky liquid that sperm is part of - is released from his body through his penis). Sometimes boys can remember having had a sexual dream. But often they just notice a wet patch on their nightclothes or on the sheets when they wake up.

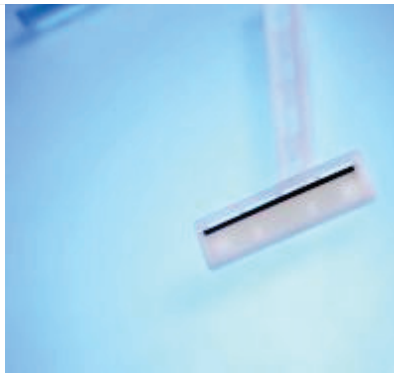
If a boy has a wet dream, he should always wash when he wakes up. This is because he may develop an infection around his penis and testicles if the area is not kept clean. It is a good idea for a boy to wash his testicles and penis, particularly behind his foreskin (if he has one), every day.

Wet dreams are not something to be embarrassed about; they are natural and happen to lots of people. There is also no need to worry about not getting wet dreams as not everyone does.

### **How often does a boy need to shave?**







Disposable razor

When a boy first grows hair on his face, it is usually just a small amount on his upper lip and chin. This can be removed by shaving it off with a razor. Razors can be bought in most supermarkets and drug stores.

Sometimes shaving can cause a rash, particularly if a boy has not shaved before or has sensitive skin. Using shaving foam or gel before shaving will help reduce any irritation caused to the skin. You can also buy electric razors, which are used on dry skin and are less likely to cause cuts.

At first a boy probably won't need to shave very often. But eventually a boy will probably need to shave every day as this hair starts to grow back thicker and more quickly.

### **What does it mean for a boy's voice to break?**

This is just a way of saying that a boy's voice will get deeper. Sometimes it can happen very quickly, perhaps even overnight. But often boys go through a period where they have trouble controlling their voice, and it goes up and down in pitch as they talk. This can be embarrassing, but it usually doesn't last very long and all boys' voices will eventually settle down and sound deeper.

*"When my voice was breaking i used to get really embarrassed, it would go really high in the middle of a sentence and all my mates would laugh. But now i laugh right back when it happens to them!" Jon*

## **What can a boy do if...**

### **He gets spots (pimples)?**

Almost everybody has spots at some time during their life and most young people get spots around puberty. Washing your face more often with mild unperfumed or antiseptic soap and warm water may help, but be careful not to scrub your face as this can irritate the skin. Some people find that eating less fatty foods (such as chips and chocolate) and drinking lots of water can help. However, spots during puberty are usually caused by hormones, and are not something that you can control.

It is important to try not to pick at, or squeeze the spots as this can cause them to become infected. It may help to use a face wash, cream or lotion, designed specifically for spots. These can often be bought from chemists.

If you get very bad spots it might be acne. Acne is a common skin condition that mostly occurs on the face, arms, back and chest. If you think that you might have acne, you could speak to a doctor as they will be able to give you advice. There are also various special creams and pills that your doctor may prescribe to help you with the problem.

### **He has mood swings?**

Boys and girls may experience sudden changes in feelings during puberty. Feelings can swing backwards and forwards, and you may feel like laughing at one moment and crying the next. Boys particularly can experience strong feelings of anger. Sudden mood changes are partly caused by the increasing amount of hormones in the body.

Talking to a friend or someone you trust can help to relieve your feelings. Mood changes are only temporary, and will settle down with time.

### **He gets an erection when he doesn't want to?**

Spontaneous erections are very common during puberty, and there's not much a boy can do to stop them happening. However, there are ways of dealing with an unexpected erection and making it less noticeable. You can sit down or cover it with something (for example a folder, bag, or by tying a sweatshirt round your waist). You can also choose to wear clothes that make an erection less obvious, for example jeans and tighter styles of underwear. Try to concentrate on something else until it goes away. You may be embarrassed, but remember that it happens to everyone.

***"The worst time was when i was playing soccer. I was out in the middle of the field in front of everyone so i couldn't do much about it. It wasn't funny at the time but everyone got over it pretty quick"*** Alex

### **Someone says he smells?**

As boys and girls' bodies develop during puberty so too do their sweat glands. These glands are to help control the body's temperature and result in more sweat being produced. The best way to reduce the risk of smelling is to wash and change your clothes regularly. You can also use antiperspirant deodorant under your arms.

### **He is unhappy about the way he looks?**

***"Remember that there is a large range of healthy penis sizes and shapes, and that most penises are around the same size when erect."***

The physical changes that occur during puberty can cause considerable worry for young people. Boys often compare themselves to their friends, and worry if they are growing or changing faster or slower.

Height and weight are two things that particularly worry young people. For boys, penis size is also a common worry. Try to remember that there is a large range of healthy penis sizes and shapes, and that most penises are around the same size when erect. Also remember that your body is changing and will keep changing as you go through puberty.

It is important to think about the things you like about yourself and the way you look.

### **He starts changing earlier than his friends?**

There is no set time when puberty starts, and this means that often boys will find they start to change at a different time from other boys their age. This is very normal, but can cause a boy to feel embarrassed or 'different' from his friends. Remember that it won't be long before others start to go through the same changes.

Some boys begin puberty as early as age 9. In some cases a boy may begin to show signs of puberty at a younger age. This is known as 'precocious puberty'. If a boy starts to show signs of puberty much earlier than age 9, it is a good idea to speak to a doctor to make sure there are no underlying health problems.

If you are worried, try to speak with somebody you feel comfortable talking to.

### **All his friends have started changing but he hasn't?**

In the same way that boys who are 'early developers' can feel embarrassed or 'different', not beginning puberty until much later than others can also cause a boy to worry. Try to remember that everyone goes through puberty at their own pace. Starting later than your friends does not mean that your body will always be less mature; it won't be long before you start to go through the same changes that they are.

Some boys don't start puberty until age 15. If a boy is worried that he has not begun to see any changes by this age, he should speak to an adult who he feels comfortable talking to.

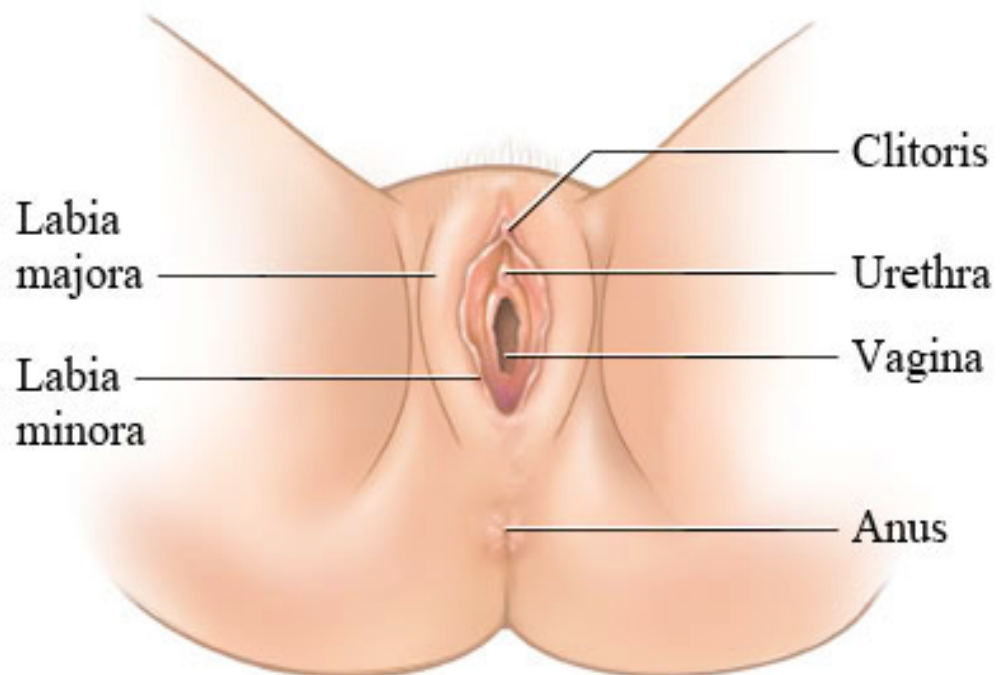
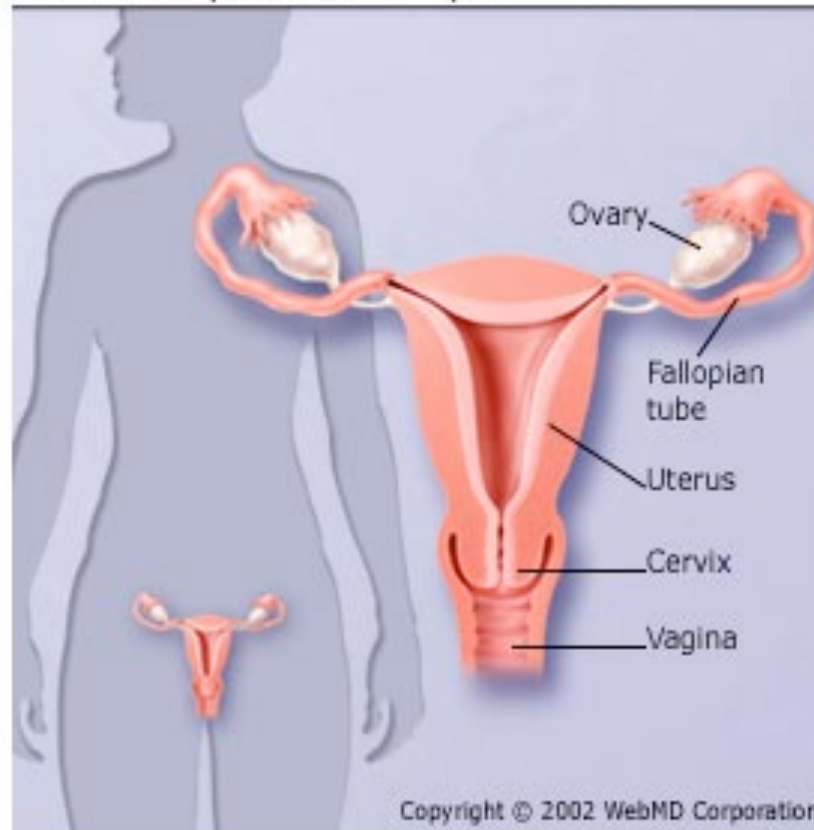
If a boy is much older than 15 and has not begun puberty (known as 'delayed puberty'), it is a good idea to speak to a doctor to make sure there are no underlying health problems.

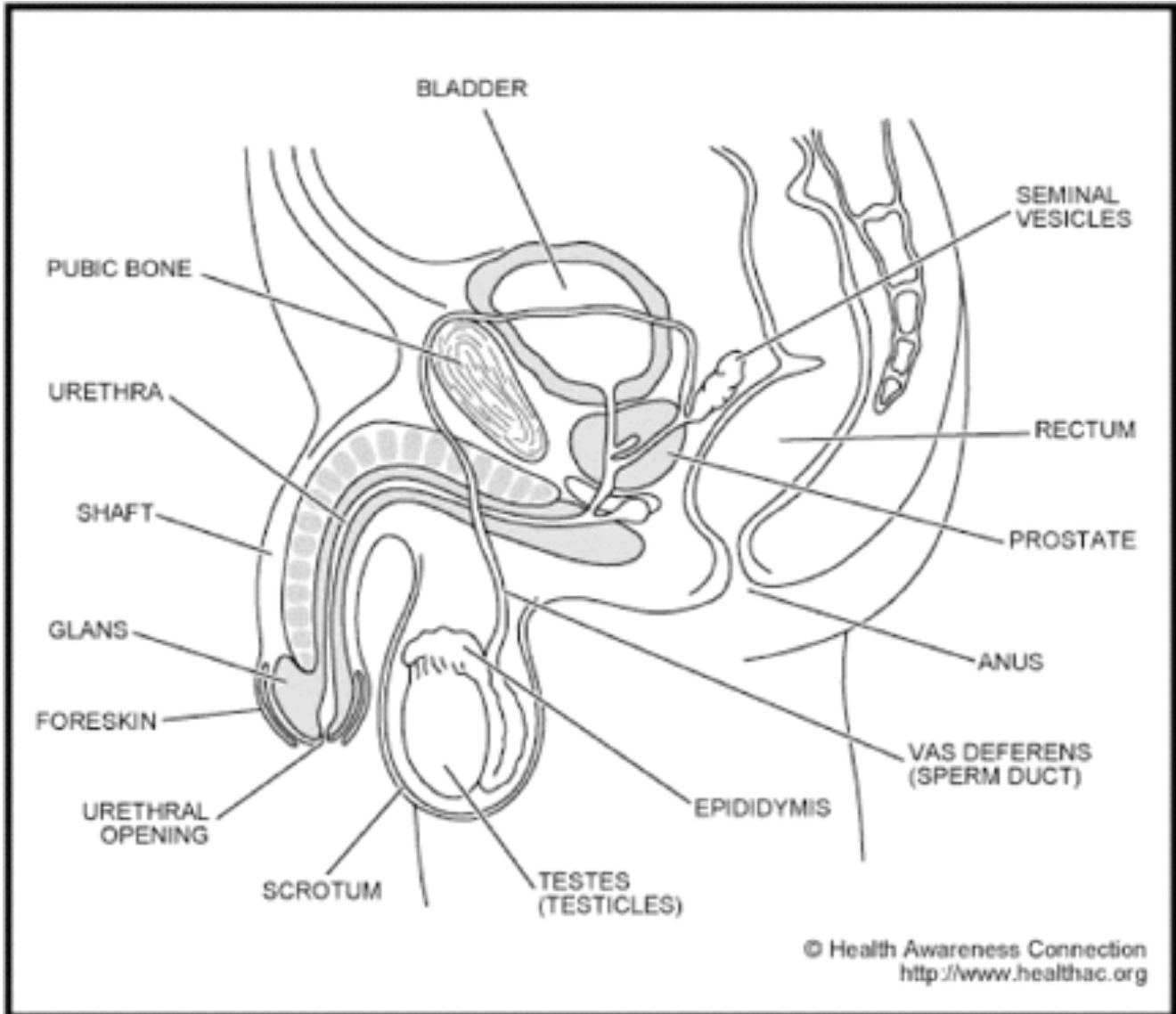
### **He is being bullied?**

Bullying comes in many different forms. It is bullying if somebody hurts you physically, calls you names, threatens you, steals or damages your belongings, excludes you, or spreads rumours about you. It is not something that just happens at school, it can happen anywhere: at home, over the phone, through text messages, and online. Bullying is a very serious issue and if a boy is being bullied for any reason, he should speak to an adult.

***"Even though you may feel helpless sometimes, there are a lot of things you and others can do to help stop the bullying."1***

## Female Reproductive System





# Healthy Relationships & Safety

[babycanwait.com](http://babycanwait.com)

# A PARENT'S HANDBOOK

How To Talk To Your Children  
About Developing Healthy  
Relationships

# DEAR PARENT OR GUARDIAN

Eleven-year-old Michael giggles when his buddies refer to the girls in their class as “bitches,” but deep down it makes him uncomfortable. Thirteen-year-old Jessica feels conflicted about the kiss she gave to Tyler after he bought her a soda. He bought her something, so, she wonders, does she owe him a kiss? Twelve-year-old Debbie sighs when she boots up her e-mail — it’s filled with 15 mean-spirited messages from a boy at school who claims he likes her.

It’s tricky business raising pre-teens these days. The good news is you have kids that mature earlier, are more independent and have access to the greatest quantity and quality of information ever available. The bad news is you have kids that mature earlier, are more independent and have access to the greatest quantity and quality of information ever available.

It is with this contradiction in mind that we decided to create this booklet, “A Parent’s Handbook: How to Talk to Your Children About Developing Healthy Relationships.” Our goal is to help adults create an environment in which they can give their pre-teen boys and girls the skills with which to have positive, healthy relationships with peers and in dating situations. We expect that implementation of those skills will help to prevent relationship violence and break the cycle of abuse.

We hope that with the help of this handbook and the love and support of parents and other important adults in their lives, pre-teens can grow up to become strong men and women who engage in balanced, rewarding and loving relationships. In addition, by using the techniques and examples found in this handbook, you will have laid a strong and lasting foundation for effective communication between you and your children. As parents, it’s okay not to have all the answers—we’ve provided a list of resources for that—it’s more important that you ask the questions.

Your children learn as much from your words as from your actions.

Sincerely,

**LIZ CLAIBORNE INC**

## Other handbooks in our series:

A Woman's Handbook: A Practical Guide to Discussing Relationship Abuse

A Teen's Handbook: What You Need to Know About Dating Violence

A Parent's Guide to Teen Dating Violence: 10 Questions to Start a Conversation

Tough Talk: What Boys Need to Know About Relationship Abuse



Let's Talk

# HOW TO START THE DIALOGUE

While it's not easy to bring up such topics as drugs, drinking, sex and ways to relate positively to peers, parents have an obligation to create an open environment in which to start the conversation. Here are six steps to encourage your kids to talk about difficult issues.

**1. Keep an Open Environment** — Be available to listen to your children. Give them plenty of opportunities to start a talk and don't criticize them for having questions, even if they raise ideas that are disturbing to you. Note that big ideas often begin as little thoughts slipped in the middle of a conversation about something else.

**2. Give Your Undivided Attention** — When the opportunity presents itself, focus your attention on the conversation and your child. Don't let other things distract you or divide your concentration. If it's really a bad time to talk, schedule and keep another time, but first make sure that waiting is okay with your child.

**3. For Important Topics, Start the Talk** — If you think it's difficult for an adult to raise certain topics, imagine how hard it must be for a child.

**4. Talk with Your Kids On Their Level** — Use examples from TV, movies, even your own experiences when you speak to your child. Keep your ideas clear and be sure that they relate directly back to your example.

**5. Talk Often** — Frequent chats are a great way of communicating, reinforcing your values and letting your kids know that you are interested in their lives.

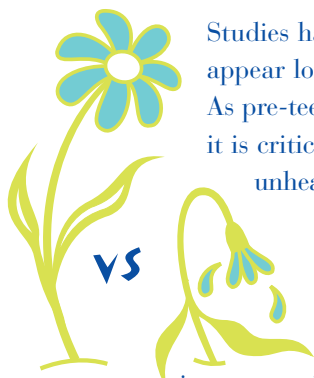
**6. Understand the Questions and Answer Honestly** — If you're not sure what your child is asking, say so. Once you understand the question, answer honestly and assure your child that you can come up with a solution together.

Don't be upset if your child is more comfortable talking with an aunt, uncle, family friend or teacher. In fact, encourage them to do so and keep in mind that the important thing is having *someone* to turn to for advice.

# DEFINING

## HEALTHY AND UNHEALTHY

### RELATIONSHIPS



Studies have shown that aspects of domestic violence can appear long before anyone is married or even going steady. As pre-teens enter into more complex and intimate relationships, it is critical to help them define what constitutes healthy versus unhealthy relationships.

A **healthy** relationship has open and honest communication and an even playing field on which partners share power and control over decisions.

An **unhealthy** relationship has an imbalance in which one partner tries to exercise control and power over the other through threats, emotional abuse and physical abuse. At its most extreme, an unhealthy relationship can include name-calling and insults, withholding of money or other resources, threats to isolate a person from friends and family, coercion, violent acts, stalking and significant physical injury.

# TEN TIPS

## FOR TALKING TO KIDS ABOUT

### RELATIONSHIPS



It's best to help set some guidelines and realistic expectations for your child about things like dating *before* they actually begin.

While a good dating relationship can serve as a model for wonderful future relationships, a bad experience can start a negative pattern of relationships. What follows are ten ways you can help kids prepare for the good and the bad of dating relationships:

**1. Assess Your Own Values Before You Talk to Your Kids** — How do you expect men and women to act? How should people behave when they disagree? How should decisions be made in a relationship? Make sure that you can explain your reasoning and can support it with examples.

**2. Reveal the Unspoken “Rules of Dating”** — Give your kids clear examples of what is appropriate behavior in a dating relationship. Talk to them about the standards of conduct that you expect rather than letting locker room or slumber party talk be their only source of information.


**3. Tell the Whole Truth...Good and Bad** — Pre-teens generally view dating very romantically. Support these expectations, but also be realistic with them about the bad things that can happen. Let them know that violence is never acceptable. Give them a few suggestions or phrases to help them get out of difficult situations (“I’m not ready to go that far,” or “I’m not comfortable, can we talk about this?”).

**4. Teach Assertiveness, Not Aggressiveness** — One of the best skills parents can teach their pre-teens is to make their feelings known by stating their opinions, desires and reactions clearly. For example, if they don’t want to do something, they need to say so. Finally, when there is conflict— if things cannot be settled— encourage them to always take a break and cool down before feelings get hurt.

**5. Teach Anger Control** — Help your kids recognize their personal warning signs for anger. Do they have clenched fists, gritted teeth, a red face, tensed arms and shoulders? Teach them to calm down by counting backwards from ten to one, deep breathing, visualizing a peaceful scene or happy memory, reassuring themselves that they’re in control, or, if all else fails, walking away.

**6. Teach Problem Solving** — When confronted with a tough issue, have your child determine what exactly happened and what may have caused the situation. Then, ask them to think of several different ways in which it could have been resolved, consider the consequences of each of the alternatives and discuss their choice.

**7. Teach Negotiation** — Help your children understand that compromising and taking turns are positive steps to a healthy relationship and that violence, threats and insults have no place in respectful negotiation. Teach your children to negotiate and acknowledge the situation. State each person’s point of view honestly and discuss options that allow both people to “win.”



**8. Explain the “Danger Zone”** — Teach them to recognize that thoughts of aggression are signals of frustration that need to be acknowledged and dealt with. Help your kids understand that any incident of violence in a relationship is a predictor of very serious problems that are very likely to continue and escalate.

**9. Keep No Secrets** — Secrecy that isolates kids from friends and family is not acceptable and can be the first sign of manipulation and coercion. Teach your kids that being strong means relying on the appropriate authorities, from parents and teachers to police, if necessary.

**10. Be the Ultimate Role Model** — Pre-teens learn by observing those around them, especially their parents. It is critical that you respect yourself, your partner and other people.

If your conversations raise real concerns, speak to your child's school counselor, doctor, clergy, or your local mental health center. If you have questions about these tips or any information in this booklet, please send your inquiries in writing to: Dr. Richard Gallagher, The Parenting Institute, NYU Child Study Center, New York University Medical School, 550 First Avenue, New York, NY 10016.

# QUICK QUIZ

## FOR PARENTS AND KIDS



Take this quick quiz with your son or daughter to help you both determine your ideas about relationships.

- 1.** Choose one couple you know who you believe has a healthy relationship. Choose one who you think has an unhealthy relationship. Why did you pick those you chose?
- 2.** What's a healthy way to fight? What's an unhealthy way to fight? Can you think of a situation in your life where you fought unfairly? What could you have done to make it a fair fight?
- 3.** What does it mean to stand up for yourself? If you're a girl, are you being strong or pushy?
- 4.** What should you do if someone you're dating threatens you? Or tells you to keep quiet and not tell a soul, even though you know it is wrong?
- 5.** Whose relationship would you most like yours to be like?

# RESOURCE GUIDE

While the information in this handbook was developed to provide guidelines for talking with your children about healthy relationships, there will most likely be occasions when you may not have the answer to your child's question or the solution to a problem. Since it is impossible to anticipate every situation that may arise, the following are resources where you can get more information:

## Emergency Help

911

## National Domestic Violence Hotline

1-800-799-SAFE (7233)

1-800-787-3224 (TTY)

## National Teen Dating Abuse Helpline

1-866-331-9474

1-866-331-8453 (TTY)

## Websites

Family Violence Prevention Fund ([www.endabuse.org](http://www.endabuse.org))

Facts and statistics, local and regional hotline numbers, domestic violence education and prevention, and public policy information.

Family Violence Awareness Page ([www.famvi.com](http://www.famvi.com))

Facts and statistics, local and regional hotline numbers for battered women, and domestic violence programs by state.

The Empower Program

([www.empowered.org](http://www.empowered.org))

The Empower Program's mission is to work with youth to end the culture of violence.

Girls Incorporated National Resource Center

([www.girlsinc.org](http://www.girlsinc.org))

Statistics, research, information and resources on issues affecting girls.

The Whole Family Center ([www.wholefamily.com](http://www.wholefamily.com))

Pages for parents and teens; myths, facts and statistics about relationships.

## Books

*All That She Can Be: Helping Your Daughter Maintain Her Self-Esteem* by Carol J. Eagle, Carol Colman (1994, Fireside).

*Chicken Soup for the Teenage Soul: 101 Stories of Life, Love and Learning*, by Jack Canfield, et. al. (1997, Health Communications, Inc.).

*How to Talk to Your Kids About Really Important Things: For Children Four to Twelve*, by Charles E. Schaefer, Theresa Foy Digeronimo (1994, Jossey-Bass Publishers).

*In Love and in Danger: A Teen's Guide to Breaking Free of Abusive Relationships*, by Barrie Levy (1998, Seal Press Feminist Pub.).

*Keep Talking: A Mother-Daughter Guide to the Pre-Teen Years*, by Lynda Madison (1997, Andrews & McMeel).

*Raising a Thinking Child: Help Your Young Child to Resolve Everyday Conflicts and Get Along with Others*, by Myrna B. Shure, Theresa Foy Digeronimo (1996, Pocket Books).

*Strong Mothers, Strong Sons: Raising Adolescent Boys in the '90s*, by Ann F. Caron (1995, HarperCollins).

*Teen Tips: A Practical Survival Guide for Parents With Kids 11–19*, by Tom McMahon (1996, Pocket Books).

## Organizations

The Parenting Institute  
NYU Child Study Center, New York University Medical School  
550 First Avenue, New York, NY 10016  
212-263-6622

Children Now  
1212 Broadway, Suite 530, Oakland, CA 94612  
510-763-2444  
[www.childrennow.org](http://www.childrennow.org)  
Call 1-800-CHILD-44 for a booklet on talking to kids (8-12 years old) about tough issues.

All of the handbooks in our series, including additional copies of this handbook, can be ordered by calling **1-800-449-STOP(7867)**. To download expanded versions (including statistics, quizzes and other special sections), visit our website at **[www.loveisnotabuse.com](http://www.loveisnotabuse.com)**

## Teens, Sex and the Law

It seems to many teens that adults are always making a big deal about people having sex under the age of consent. Many young people think that if they feel ready to have sex and they use protection, it is nothing to do with anyone else. But every teen needs to know the sex laws and what they mean.

### **So what does the age of consent mean?**

The age of consent is the age when the law says you can agree to have sex. In most countries, until you reach this age you can't legally have sex with anyone, however old they are. Sometimes the law is slightly different when the partners are of a similar age, but there is usually still a minimum age below which sex is always illegal.

### **But our parents say it's okay...**

That doesn't make any difference - your parents don't make the law. Teens can't get around the laws for smoking, drinking or driving because their parents say so, and it's the same with sex. The age of consent laws always apply, whether you're in love, or you've been together for ages, or you've had sex before.

### **But it's no-one else's business. Why do we have these laws?**

Although many young people are mature enough to know how to deal with it if someone tries to get them to have sex, some teens are not grown up enough to know what to do. Age of consent laws are there to stop young people from being exploited by adults.

### **What is the age of consent?**

What the age of consent is depends on where you live - there are different age limits in different places, and in some places the age of consent is different for boys and for girls.

### **Is there an age of consent for gay men and lesbians?**

Yes. Some places have different age of consent limits for gay men and lesbians.

### **What is 'statutory rape'?**

If you are under the age of consent and you choose to have sex with someone who is over the age of consent, then they can be charged with the crime of 'statutory rape'. Some countries have different names for this crime, and some states in the US call it 'unlawful sexual penetration' or just 'rape'.

### **And what's sexual abuse?**

This is when a person is pressured into any type of sexual contact that they do not agree to. If you know anyone who is being pressured in this way, you should tell an adult that you trust what's going on.

## Safety Steps You Can Take to Avoid or Prevent Sexual Violence

**Know your sexual intentions and limits and communicate them clearly.** You have the right to say "no" to any unwanted sexual contact. If you say "no," say it like you mean it. Back up your words with your body language. If you are uncertain about what you want, ask your partner to respect your feelings. Don't give mixed messages.

**Don't assume your partner can read your mind.** Don't assume that your partner will "get the message" without your having to say what you are feeling. Tell the person you are with how far you want to go, what you want and don't want to do, and when you want to stop.

**Remember that some people think that drinking heavily, wearing "sexy" clothes, or agreeing to be alone with them indicates a willingness to have sex.** Be especially careful to communicate your limits and intentions clearly in such situations.

**Trust your "gut" feelings.** If you start to feel uncomfortable or unsafe in a situation, listen to your feelings and act on them. Get yourself out of the situation as soon as possible.

**Don't be afraid to ask for help or "make a scene" if you feel threatened.** If you are being pressured or forced into sexual activity against your will, let the other person know how you feel and get out of the situation, even if it's awkward and even if you embarrass the other person or hurt his feelings.

**Be especially careful in situations involving the use of drugs or alcohol.** Drugs and alcohol can make you less aware of danger signs and less able to communicate clearly. Be especially aware when you are in a new situation or with people that you don't know well. You need to be able to make good decisions to protect yourself from sexual assault.

**Go to parties or clubs with friends you can trust and agree to "look out" for one another.** At parties where there is drinking or drugs, appoint a "designated sober person," one friend who *won't* drink and who will look out for the others in the group by regularly checking on them. Leave parties with people you know. Don't leave alone or with someone you don't know very well.

**Listen carefully to the person you are with in sexual situations.** If your partner says "no" to sexual contact, or her body language tells you she is unsure or unwilling, **stop**. If your partner was willing at first, but now doesn't want to go any further, **stop**. If you think you are getting a "mixed message," or you are not sure what your partner wants, don't use threats or force. **Stop**. Ask your partner what she or he wants.

**Don't assume you know what another person wants.** For example, don't automatically assume that just because a girl gets drunk, wears "sexy" clothing, or agrees to be alone with you, she wants to have sex. Don't assume that just because someone has had sex with you before, she or he is willing to have sex with you again. And don't assume that when a partner consents to kissing or other sexual touching, she or he is willing to have sexual intercourse.

**Resist peer pressure to do things you don't want to do.** Don't participate in violent or criminal acts or get involved in any activity that makes you feel uncomfortable. Don't ever "join in" or "go along" with people who are abusing another person.

**Be aware that if you have sex with someone who is mentally or physically unable to give consent or is unable to resist, you may be committing rape or sexual assault.** If you have sex with someone who is under the influence of alcohol or drugs, "passed out," asleep, unable to say "no," or too "out of it" to know what is happening, you may be guilty of rape or sexual assault.

**Resist peer pressure to do things you don't want to do.** Don't participate in violent or criminal acts or get involved in any activity that makes you feel uncomfortable. Don't ever "join in" or "go along" with people who are abusing another person.

**"Get involved" if you think someone else might be in trouble.** If you see someone who could be about to commit rape or become a victim, help the person who may get hurt.



# A TEEN'S GUIDE TO SAFETY PLANNING

## WHY DO I NEED A SAFETY PLAN?

Everyone deserves a relationship that is healthy, safe and supportive. If you are in a relationship that is hurting you, it is important for you to know that *the abuse is not your fault*. It is also important for you to start thinking of ways to keep yourself safe from the abuse, whether you decide to end the relationship or not. While you can't control your partner's abusive behavior, you *can* take action to keep yourself as safe as possible.

## WHAT IS A SAFETY PLAN?

A safety plan is a practical guide that helps lower your risk of being hurt by your abuser. It includes information *specific to you and your life* that will help keep you safe. A good safety plan helps you think through lifestyle changes that will help keep you as safe as possible at school, at home and other places that you go on a daily basis.

## HOW DO I MAKE A SAFETY PLAN?

Take some time for yourself to go through each section of this safety planning workbook. You can complete the workbook on your own, or you can work through it with a friend or an adult you trust.

## Keep in Mind:

- In order for this safety plan to work for you, you'll need to fill in personalized answers, so you can use the information when you most need it.
- Once you complete your safety plan, be sure to keep it in an accessible but secure location. You might also consider giving a copy of your safety plan to someone that you trust.
- Getting support from someone who has experience working with teens in abusive relationships can be very useful. Keep in mind that Break the Cycle is always here to help you.

# MY SAFETY WORKBOOK - PAGE 1

## Staying Safe at School:

The safest way for me to get to and from school is:

\_\_\_\_\_  
\_\_\_\_\_.

If I need to leave school in an emergency, I can get home safely by:

\_\_\_\_\_  
\_\_\_\_\_.

I can make sure that a friend can walk with me between classes. I will ask:

\_\_\_\_\_ and/or \_\_\_\_\_.

I will eat lunch and spend free periods in an area where there are school staff or faculty nearby. These are some areas on campus where I feel safe:

\_\_\_\_\_, \_\_\_\_\_,  
\_\_\_\_\_, and \_\_\_\_\_.

**I could talk to the following people at school if I need to rearrange my schedule in order to avoid my abuser, or if I need help staying safe at school:**

- School Counselor
- Coach
- Teachers: \_\_\_\_\_
- Principal
- Assistant/Vice principal
- School security
- Other: \_\_\_\_\_

**If I live with my abuser, I will have a bag ready with these important items in case I need to leave quickly (check all that apply):**

- Cell phone & charger
- Spare money
- Keys
- Driver's license or other form of ID
- Copy of Restraining Order
- Birth certificate, social security card, immigration papers and other important documents
- Change of clothes
- Medications
- Special photos or other valuable items
- If I have children—anything they may need (important papers, formula, diapers)

## Staying Safe at Home:

I can tell this family member about what is going on in my relationship:

\_\_\_\_\_

There may be times when no one else is home. During those times, I can have people stay with me. I will ask:

\_\_\_\_\_.

The safest way for me to leave my house in an emergency is:

\_\_\_\_\_.

If I have to leave in an emergency, I should try to go to a place that is public, safe and unknown by my abuser. I could go here:

\_\_\_\_\_

and/or here: \_\_\_\_\_.

I will use a code word so I can alert my family, friends, and neighbors to call for help without my abuser knowing about it. My code word is:

\_\_\_\_\_.

# MY SAFETY WORKBOOK - PAGE 2

## Staying Safe Emotionally:

My abuser often tries to make me feel bad about myself by saying or doing this:

\_\_\_\_\_  
\_\_\_\_\_.

When he/she does this, I will think of these things I like about myself:

\_\_\_\_\_,  
\_\_\_\_\_ and  
\_\_\_\_\_.

I will do things I enjoy, like:

\_\_\_\_\_,  
\_\_\_\_\_ and  
\_\_\_\_\_.

I will join clubs or organizations that interest me, like:

\_\_\_\_\_ or \_\_\_\_\_.

**If I feel down, depressed or scared, I can call the following friends or family members:**

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

**During an emergency, I could call the following friends or family members at any time of day or night:**

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

## Getting Help in Your Community:

For emergencies: 911

Break the Cycle: 888.988.TEEN or www.thesafespace.org

National Teen Dating Violence Hotline: 866.331.9474

Local police station: \_\_\_\_\_

Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Local domestic violence organization: \_\_\_\_\_

Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Local free legal assistance: \_\_\_\_\_

Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Nearest youth shelter: \_\_\_\_\_

Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

# MY SAFETY WORKBOOK - PAGE 3

## These are things I can do to help keep myself safe everyday:

- I will carry my cell phone and important telephone numbers with me at all times.
- I will keep in touch with someone I trust about where I am or what I am doing.
- I will stay out of isolated places and try to never walk around alone.
- I will avoid places where my abuser or his/her friends and family are likely to be.
- I will keep the doors and windows locked when I am at home, especially if I am alone.
- I will avoid speaking to my abuser. If it is unavoidable, I will make sure there are people around in case the situation becomes dangerous.
- I will call 911 if I feel my safety is at risk.
- I can look into getting a protective order so that I'll have legal support in keeping my abuser away.
- I will remember that the abuse is not my fault and that I deserve a safe and healthy relationship.

## These are things I can do to help keep myself safe in my social life:

- I will ask my friends to keep their cell phones with them while they are with me in case we get separated and I need help.
- If possible, I will go to different malls, banks, grocery stores, movie theaters, etc. than the ones my abuser goes to or knows about.
- I will not go out alone, especially at night.
- No matter where I go, I will be aware of how to leave safely in case of an emergency.
- I will leave if I feel uncomfortable in a situation, no matter what my friends are doing.
- I will spend time with people who make me feel safe, supported and good about myself.

## These are things I can do to stay safe online and with my cell phone:

- I will not say or do anything online that I wouldn't in person.
- I will set all my online profiles to be as private as they can be.
- I will save and keep track of any abusive, threatening or harassing comments, posts, or texts.
- I will never give my password to anyone other than my parents or guardians.
- If the abuse and harassment does not stop, I will change my usernames, email addresses, and/or cell phone number.
- I will not answer calls from unknown, blocked or private numbers.
- I can see if my phone company can block my abuser's phone number from calling my phone.
- I will not communicate with my abuser using any type of technology if unnecessary, since any form of communication can be recorded and possibly used against me in the future.

# Internet and Cell Phone Safety

[babycanwait.com](http://babycanwait.com)



## A PARENT'S GUIDE TO SOCIAL NETWORKING



Comments | Info | Photos | Profile | Inbox

### Help! My child is on a social networking site!

While you may be concerned when your children join a social networking site, it doesn't mean they're in danger. Social networking sites are places online where young people go to socialize with their friends, talk to people with similar interests, and share what's going on in their lives. But these sites can also be places where kids post something inappropriate or meet the wrong people.

### How can I keep my child safe?

Check, check, check! The most important thing you can do to protect your child on these sites is to get involved and regularly check his/her profile.

### What do I look for?

Sometimes looking through your child's social networking profile can be overwhelming. Where are the privacy settings? What is a "wall"? Use this practical guide and check off each section when you're done. That way, you won't miss anything.

## 5 Positive Things Your Child Can Do On Social Networking Sites

### 1. Create family photo albums

What better way to keep your distant relatives up-to-date on your family's activities?

### 2. Champion a cause

From animal rights to bullying awareness, social networking sites are the place to go for social activists.

### 3. Join a group

Niche communities have found a home on social networking sites where people can connect and discuss their interests with like-minded people.

### 4. Market a talent

Stars are born every day online. No need to move to Hollywood to pursue that recording contract; with one hit video the producers will come to you!

### 5. Find a college

Social networking makes it easier to chat with college students and faculty, so your child can make an informed decision about where to go to school.

### POPULAR SOCIAL NETWORKING SITES FOR TEENS

Facebook | MySpace | myYearbook | Bebo | Gaia



A Parent's Guide to Social Networking



A PROGRAM OF THE NATIONAL CENTER FOR MISSING & EXPLOITED CHILDREN

**Profile Picture**

This is the picture that will appear next to your child's name. Is it too revealing? Is there anything inappropriate, like nudity, alcohol, or drugs? Make sure you approve before it goes public.

**Username**

This is either your child's real name or a nickname. Using a real name isn't bad; it just means you have to look more closely at the privacy settings and contacts.

**Account/Settings**

This is where you'll go to adjust your child's privacy settings. Go through each option slowly. Always ask yourself - what is on the profile and who can see it?

**Information/About Me**

Here your children can post personal information, including where they live, where they go to school, who they're dating, etc. Check what they're sharing and delete anything you think is too much information.

**Friends/Contacts**

This is a list of everyone your child has accepted as a friend/contact. It may include people you don't know, or even people your child only knows online. Go through each contact together and decide if each is an appropriate friend for your child.

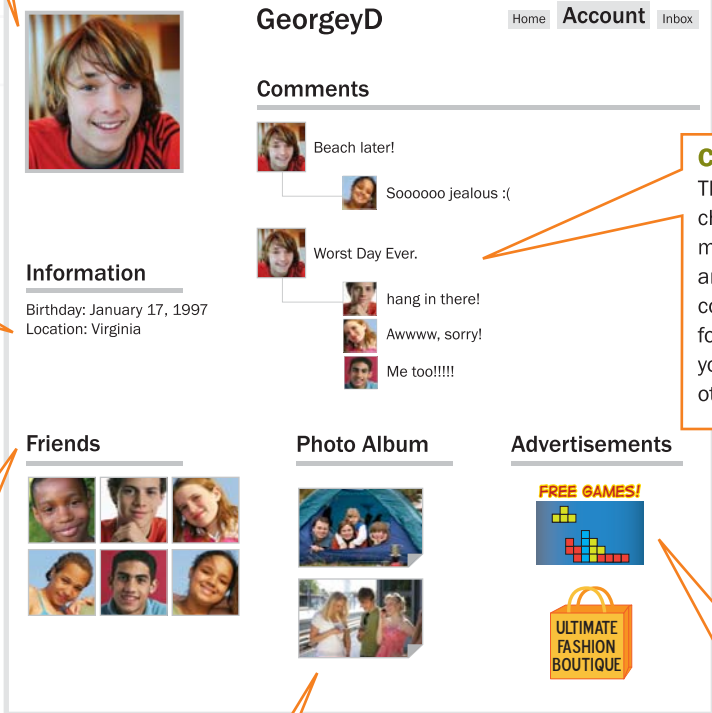
**Photos/Albums**

What kinds of photos is your child sharing? Who can see them? Check for anything inappropriate, like nudity, alcohol, or drugs.

**Ads/Apps**

Most social networks have ads and applications from 3rd parties, like games and fan pages. If your children click on these or add them to their profiles, they may be allowing access to their personal information. Have a discussion about what's OK to add and what's not.

SOCIAL NETWORKING SITE



**Comments/Wall**

This is where your child's friends post messages. Delete any inappropriate comments, and don't forget to check what your child is posting on others' pages, too.



# PROTECTING YOUR KIDS ONLINE



## TAKE CHARGE

### Set some ground rules.

Establish basic guidelines like when your kids can go online, what sites they can visit, and how many texts they can send a month, so everyone is on the same page.

### Research before you buy.

Did you know that handheld games can connect to the Internet or that many laptops have built-in webcams? Understand what technology you're bringing into your home.

### Don't just sit there— REPORT!

If your kids are dealing with cyberbullies or potential predators, report them to the website, cell phone service, law enforcement, or [www.cybertipline.com](http://www.cybertipline.com).

## MONITOR

### Supervise Internet use.

If you can see what your kids are doing, they're less likely to get in trouble.

### Safeguards ≠ Safe Kids.

Installing CIA-level monitoring software on your kids' computers does not guarantee they'll be safe online. Technology can't replace your time and attention as a parent or guardian.

### Don't go overboard.

It's smart to keep an eye on your kids' social networking profiles, but it's never cool when you post embarrassing messages or pictures to their page.

## COMMUNICATE

### Talk to your kids; they're not as mysterious as you think.

Your kids might not tell you everything, but that doesn't mean you shouldn't ask. Get involved so you're not the last to know.

### Challenge them to a duel.

If you have kids who like to play video or computer games, ask if you can play, too. When you respect their interests, they're more likely to respect your rules.

### Don't pull the plug.

Taking away your kids' Internet access because they've done something wrong doesn't solve the problem. Talk to them about protecting themselves and respecting others online.



# Got NetSmartz?

TIPS FOR TEENS

## CYBERBULLYING

### AVOID GOSSIP.

Everyone's bound to get a little excited by those oh-so-dramatic high school scandals, but that doesn't mean you have to text the latest rumor to everyone you know.

### DON'T FEED THE CYBERBULLIES.

Ignore mean or threatening messages. Block the sender and file a report with the website, cell phone service, or police.

### BYSTANDERS ARE GUILTY, TOO.

If your friends are cyberbullying someone and you stay silent, you're just as guilty as they are. Speak up and keep your friends in check.

## SHARING TOO MUCH

### INITIATE OPERATION PROFILE CLEAN-UP.

Scrub your page of everything too personal, embarrassing, and illegal. Those pictures of you passed out next to the empty bottles are not going to look so cool when you start applying for college.

### STOP. THINK. PUT YOUR CLOTHES BACK ON!

You know those pictures of you wearing next-to-nothing and making kissy faces or flexing in the mirror? You might think it's sexy, but the law doesn't, so do yourself a favor – don't send them; don't forward them.

### PROTECT YOUR SPACE.

Use privacy settings and don't accept just anyone as a friend. Do some investigating – Who are they? Why would you hang out with them?

## ONLINE PREDATORS

### RECOGNIZE THE DIFFERENCE BETWEEN CUTE AND CREEPY.

Think about it – an older guy who wants to date someone younger is just creepy. It's not flattering; it's illegal! So don't friend them and don't meet them offline.

### DON'T JUST SIT THERE – REPORT!

If you or someone you know has been victimized by someone you met online, report them to the police and [www.cybertipline.com](http://www.cybertipline.com).

## TRUSTED ADULTS

### TALK TO YOUR PARENTS OR GUARDIANS. THEY'RE NOT AS UPTIGHT AS YOU THINK.

Sometimes adults freak out about what you're doing online because you never tell them anything. Keep them in the loop so they know they can trust you.

[NetSmartz.org/TipSheets](http://NetSmartz.org/TipSheets)



# My Rules for

Primary  
Intermediate

# Real-World Safety



1

I will always check first with my parent, guardian, or other trusted adult before going anywhere, helping anyone, accepting anything, or getting into a car.

2

I will take a friend with me when going places or playing outside.

3

I will tell people "NO" if they try to touch or hurt me. It's OK for me to stand up for myself.

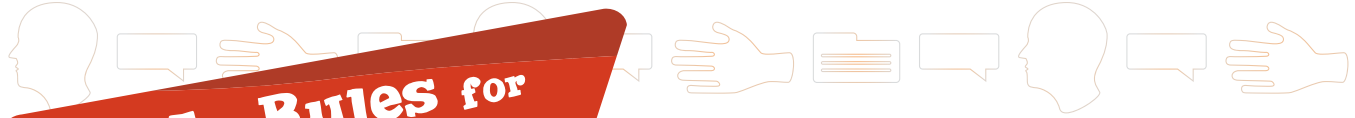
4

I will tell my trusted adult if anything makes me feel sad, scared, or confused.



signed .....

signed .....



# My Rules for

# Internet Safety

Primary

The Internet is where I learn and play  
But I have to be careful everyday  
So I pledge to be safer online  
And follow these rules all of the time:



1 

I will tell my trusted adult if anything makes me feel sad, scared, or confused.

2 

I will ask my trusted adult before sharing information like my name, address, and phone number.

3 

I won't meet face-to-face with anyone from the Internet.

4 

I will always use good netiquette and not be rude or mean online.



signed .....

signed .....



# My Rules for

Primary  
Intermediate

# Real-World Safety



1

I will always check first with my parent, guardian, or other trusted adult before going anywhere, helping anyone, accepting anything, or getting into a car.

2

I will take a friend with me when going places or playing outside.

3

I will tell people "NO" if they try to touch or hurt me. It's OK for me to stand up for myself.

4

I will tell my trusted adult if anything makes me feel sad, scared, or confused.



signed .....

signed .....



# My Rules for

# Internet Safety

Intermediate

I will use the Internet responsibly. That means making smart decisions about what I look at, who I talk to, and what I say. I pledge to be safer online by following these rules:



1

I will tell my trusted adult if anything makes me feel sad, scared, or confused.

2

I will ask my trusted adult before sharing information like my name, address, and phone number.

3

I won't meet face-to-face with anyone from the Internet.

4

I will always use good netiquette and not be rude or mean online.



signed .....

signed .....

# INTERNET SAFETY RULES

Middle School ■ High School

**1** I WILL THINK BEFORE I POST.

I agree not to post information and images that could put me at risk, embarrass me, or damage my future, such as

- » cell & home phone numbers
- » home address
- » sexual messages
- » inappropriate pictures and videos

**2** I WILL RESPECT OTHER PEOPLE ONLINE.

I will not

- » post anything rude, offensive, or threatening
- » send or forward images and information that might embarrass, hurt, or harass someone
- » take anyone's personal information and use it to damage his or her reputation

**3** I WILL BE CAREFUL WHEN MEETING ONLINE FRIENDS IN PERSON.

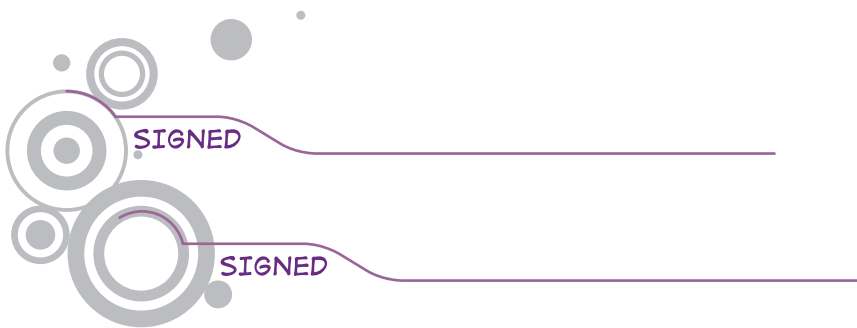
I agree to

- » ask my parent or guardian's permission
- » have a parent or guardian accompany me
- » meet in a public place

**4** I WILL PROTECT MYSELF ONLINE.

If someone makes me feel uncomfortable or if someone is rude or offensive, I will

- » not respond
- » save the evidence
- » tell my parent, guardian, or another trusted adult
- » report to the website, cell phone company, cybertipline.com, or the police







## Tips for Parents and Guardians

1. Set appropriate ground rules for your children's use of wireless devices. Decide who they may communicate with and how they may use these devices.
2. Monitor your wireless bill to keep track of the amount of time and time of the day or night your children spend using these devices, and with whom they communicate. Pay attention to numbers or messages from people you do not recognize or have not approved.
3. Teach your children to tell you if anyone sends them a threatening or frightening message. Also teach them how to block unwanted calls and messages. If your children are being stalked, harassed, or threatened in any way, report the incident to your service provider and local law-enforcement agency. If the material is lewd, obscene, or illegal also report it to the National Center for Missing & Exploited Children's CyberTipline® at [www.cybertipline.com](http://www.cybertipline.com) or **1-800-843-5678**.
4. Remind your children messages may be intercepted or used by others. Teach them to use appropriate language in their messages and not to reveal personal or identifying information. Explain to them the potential consequences of sending sexually explicit or provocative images of themselves or others.
5. Know your children's passwords and assist them in setting up their account. Think about setting controls to block calls from numbers you have not approved.
6. Consider creating settings to control or prohibit access to the Internet, e-mail, and messaging through your children's wireless devices. Also consider disabling the wireless device's camera feature. A global-positioning system (GPS) option, if offered by your service provider, could be used to help locate your children if they become lost.
7. Monitor your children's wireless use just as you do their online computer use. Keep the lines of communication open with your children so they will be more likely to tell you if they have concerns about someone contacting them or information they have received.

## Tips for Parents and Guardians to Discuss With/Teach Children

1. Never share your wireless number and personal or identifying information with anyone you don't know well and trust and without my permission. Respect your friends' privacy by never sharing their contact, identifying, or personal information.
2. Never use your wireless device to take, send, or post images or videos of your friends without permission from their parents or guardians. Taking or sharing embarrassing or inappropriate images or videos of someone is a form of bullying and harassment and could have legal implications.
3. Never share your passwords with anyone other than me. Keep your passwords private.
4. Never give photographs of yourself to anyone without my permission. Never send sexually provocative images or messages. Once you send images to another person or post them online you can never get them back.
5. Never respond to threatening or frightening calls, messages, or images. If you receive any tell me or another trusted adult, and we'll report the incident to the appropriate agency.
6. Never exchange calls or messages with people you don't know well and trust, and before responding think, "Is my reply hurtful or rude?" Use of wireless technology doesn't guarantee privacy.
7. Explore how to use the features on the wireless device. This is a great opportunity for parents, guardians, and children to have a conversation about using the device more safely.

**Visit [www.NetSmartz411.org](http://www.NetSmartz411.org) or call 1-888-NETS411 (638-7411) to learn more about better protecting children when online. If you have information to help in the fight against child sexual exploitation please report it to the National Center for Missing & Exploited Children at [www.cybertipline.com](http://www.cybertipline.com) or 1-800-843-5678.**

# Talking to Youth about Sex

[babycanwait.com](http://babycanwait.com)



# Parents Matter!

## Who Most Influences Teens' Decisions About Sex?

Here's what Teens said:

**Parents: 46%**

Friends: 20

Religious Leaders: 7

Siblings: 5

TV and other Media: 4

Teachers and Educators: 4

Other: 8%

Unknown or N/A: 6%

- **80%** of teens say that it would be much easier for teens to delay sexual activity and avoid teen pregnancy if they were able to have more open, honest conversations about these topics with their parents
- **62%** of teens wish they were able to talk more openly about relationships with their parents.
- **63%** of teens and **62%** of adults agree that the *primary* reason teens don't use contraception is because they are afraid that their parents will find out.

## So, What to Do?

### 1. Be clear about your own sexual values and attitudes.

Communicating with your children about sex, love, and relationships is often more successful when you are certain in your own mind about these issues. To help clarify your attitudes and values, think about the following kinds of questions:

- What do you really think about school-aged teenagers being sexually active - and perhaps even becoming parents?
- Who is responsible for setting sexual limits in a relationship and how is that done, realistically?
- Were you sexually active as a teenager and how do you feel about that now? Were you sexually active before you were married? What do such reflections lead you to say to your own children about these issues?
- What do you think about encouraging teenagers to abstain from sex?
- What do you think about teenagers using contraception?

### 2. Talk with your children early and often about sex, and be specific.

Kids have lots of questions about sex, and they often say that the source they'd most like to go to for answers is their parents.

Here are the kinds of questions kids say they want to discuss:

- How do I know if I'm in love?
- How will I know when I'm ready to have sex?
- Will having sex make me popular?
- Will it make me more grown-up and open up more adult activities to me?
- How do I tell my partner that I don't want to have sex without losing them or hurting their feelings?

- How do I manage pressure from my partner to have sex?

**3. Supervise and monitor your children and adolescents.**

Establish rules, curfews, and standards of expected behavior, preferably through an open process of family discussion and respectful communication.

**4. Know your children's friends and their families.**

Friends have a strong influence on each other, so help your children and teenagers become friends with kids whose families share your values. Some parents of teens even arrange to meet with the parents of their children's friends to establish common rules and expectations.

**5. Discourage early, frequent, and steady dating.**

Group activities among young people are fine and often fun, but allowing teens to begin steady, one-on-one dating much before age 16 can lead to trouble.

**6. Take a strong stand against your daughter dating a boy significantly older than she is. And don't allow your son to develop an intense relationship with a girl much younger than he is.**

Older guys can seem glamorous to a young girl - sometimes they even have money and a car to boot. But the risk of matters getting out of hand increases when the guy is much older than the girl.

**7. Help your teenagers have options for the future that are more attractive than early pregnancy and parenthood.**

The chances that your children will delay sex, pregnancy, and parenthood are significantly increased if their futures appears bright. This means helping them set meaningful goals for the future, talking to them about what it takes to make future plans come true, and helping them reach their goals.

**8. Let your kids know that you value education highly.**

Encourage your children to take school seriously and to set high expectations about their school performance. School failure is often the first sign of trouble that can end in teenage parenthood.

**9. Know what your kids are watching, reading, and listening to.**

The media (television, radio, movies, music videos, magazines, the Internet) are chock full of material sending the wrong messages. Sex rarely has meaning, unplanned pregnancy seldom happens, and few people having sex ever seem to be married or even especially committed to anyone

**10. These first nine tips for helping your children avoid teen pregnancy work best when they occur as part of strong, close relationships with your children that are built from an early age.**

Strive for a relationship that is warm in tone, firm in discipline, and rich in communication, and one that emphasizes mutual trust and respect. There is no single way to create such relationships.

A final note: it's never too late to improve a relationship with a child or teenager. Don't underestimate the great need that children feel--at all ages--for a close relationship with their parents and for their parents' guidance, approval, and support.

# Families Are Talking

## Adolescents Would Prefer Parents as Primary Sexuality Educators

Virtually everyone agrees that parents and caregivers should be the primary sexuality educators of their children—even children themselves.

Facts show, however, that most parents have abdicated their responsibility. Instead, peers and the media have been the primary sources of sexuality information for America's children since the 1940s.<sup>1</sup>

Recent statistics show that just half of adolescents feel they had one "good talk" about sexuality during the past year with their mothers—and only one third with their fathers.<sup>2</sup>

Equally disturbing, a recent survey shows that 72 percent of mothers claimed they had talked with their teens about sex while only 45 percent of the teens felt their mothers had done so.<sup>3</sup> Clearly, parents and teens do not agree on the meaning of a "good talk."

Most of today's parents have little information upon which to develop a "good talk" about sexuality. While growing up, most did not have sexuality education programs

in their schools and most did not discuss sexuality at home with their parents. In fact, most probably learned about sexuality from their peers, a situation leading either to inaccurate or inadequate information.<sup>4</sup>

As part of our work to educate people about sexuality issues, we hope to provide parents and caregivers with information and guidance to help them communicate more effectively with their children about this important subject.

### Sources

1. B.M. King and J. Lorusso, "Discussions in the Home about Sex: Different Recollections by Parents and Children," *Journal of Sex & Marital Therapy*, vol. 23, pp. 52–60.
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3. J. Jaccard and P. Dittus, "Parent-adolescent Communication about Premarital Pregnancy," *Families in Society*, vol. 74, pp. 329–43.
4. W. Kyman, "Sexuality Education for Parents," *Journal of Sex Education and Therapy*, vol. 21, pp. 153–57.

Adapted from "Parents As First Sexuality Information Sources: Do They Make a Difference in Daughters' Sexual Attitudes and Behavior?," by N.B. Moore et al., *Journal of Sex Education and Therapy*, vol. 24, no. 3.

### FROM THE EDITOR

*Families Are Talking* is a newsletter containing information to help all parents and caregivers talk to their children about sexuality and related issues.



Illustration © 2000 Dominic Cappello

# But Parents Don't Know When to Start Talking, Much Less What to Talk About

When it comes to talking about sexuality with their children, most parents don't even know when to start talking, let alone what they should talk about. Nearly half of parents of 10 to 12 year olds have not discussed peer pressure and sex with their children. A similar percentage have not even considered when it is appropriate for their children to become involved in sexual activity.

—Deborah Roffman, M.S., sexuality educator  
Sex & Sensibility: The Thinking Parent's Guide to Talking about Sex

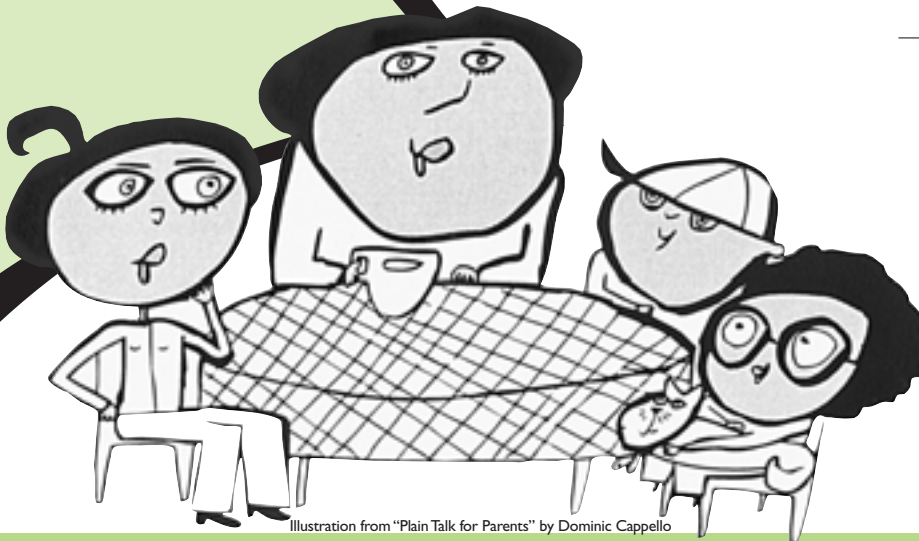


Illustration from "Plain Talk for Parents" by Dominic Cappello

## What Is Family?

Families are as diverse as the world around us. Mothers and fathers head some households. Grandparents head others. Some homes have one parent. Some have two mommies. Others have two daddies. The fact remains that all these people are the primary sexuality educators of their children.

## Tips For TALKING to PARENTS

1. **Approach your parents at a good time.** If they're not in a particularly good mood or are real busy, find a better time. You might even want to set up an "appointment."
2. **Start with more general subjects.** Instead of, "I'm thinking about

- having sex with Jenny," you might say something like, "Do you think teenagers should wait until they're married to have sex?"
3. **Use a TV show, a book, or an article as a starting point.** You can even print a story from the SEX, ETC.

Web site and show it to your parents. Say something like, "I ran across this story and was wondering what you think about it."

4. **Listen.** Your parents are more than likely to help you if you listen to what they have to say.
5. **Do not yell or argue.** You might disagree

with them, but you should respect them.

6. **If they start lecturing, remind them that you're just asking questions.** You want to be informed and you figure they're the best source of solid info. Hopefully, that'll do the trick. Good luck!

—SEX, ETC. Web site.

# COMMUNICATION GUIDELINES FOR PARENTS AND CAREGIVERS

## PEOPLE Talk

"Parents educate infants and toddlers about their sexuality when they talk to them, dress them, cuddle with them, and play with them. Older children continue to learn about sexuality as they develop relationships within their families and observe the interactions around them."

*Debra Haffner, M.P.H., author  
from Diapers to Dating:  
A Parents Guide to Raising  
Sexually Healthy Children*

"I go to my mom for advice whenever I need it because I have confidence in my mom and I trust her. She wouldn't laugh or tell anyone else. I can talk to my parents about any problems that I have."

*Ann Blair, 15, New Jersey*

"I come from a family where I have learned about sex from my friends. My mother didn't mention it to me. And I still don't know what most of sex and love is all about. So I would like to know because I'm only 14 years of age. And I've seen my friends get pregnant. I'd like to know what it's all about."

*Julie, 14, South Carolina*

"Just as I have advocated ending the legacy of silence about sex in our home, I call on community leaders across America, with all their divergent opinions, to end the legacy of silence in society. Teens need conversations about sexuality in its largest context at school, doctors' offices, clubs, and places of worship so that they can acquire the right facts to care for themselves, and the confidence and judgment to make their own decisions."

*Nathalie Bartle, Ed.D., author  
Venus in Blue Jeans:  
Why Mothers and Daughters  
Need to Talk about Sex*

"For advice, I usually go to my parents, teachers, and friends. I'm comfortable talking to my parents. We have open communication. Some of my teachers give me an unbiased perspective and I've grown to trust some of them."

*Blair Silver, 18, Pennsylvania*

— Excerpts from recent books and current Web sites.

**1. You are the primary sexuality educator of your children.** They want to talk with you about sexuality and to hear your values.

**2. Find "teachable moments."** Make use of TV shows even if you believe they send the wrong message. Say, "I think that program sent the wrong message. Let me tell you what I believe."

**3. Remember that it is okay to feel uncomfortable.** It is often hard to talk about sexual matters. Relax and tell your children you are going to talk to them because you love them and want to help them.

**4. Don't wait until your children ask questions.** Many never ask. You need to decide what is important for them to know and then tell them before a crisis occurs.

**5. Be "ask-able."** Reward a question with, "I'm glad you came to me." It will teach your children to come to you when they have other questions.

**6. Become aware of the "question behind the question."** The unspoken question, "Am I normal?" is often hiding behind questions about sexual development, sexual thoughts and sexual feelings. Reassure your children as often as possible.

**7. Listen, listen, listen.** Ask them why they want to know and what they already know. That may help you prepare your answer.

**8. Remember that facts are not enough.** Share your feelings, values, and beliefs. Tell your children why you feel the way you do.

**9. Talk about the joys of sexuality.** Tell your children that loving relationships are the best part of life and that intimacy is a wonderful part of adult life.

**10. Remember that you are telling your children that you care about their happiness and well-being.** You are also sharing your values. This is one of the real joys of parenthood.

**11. Know what is taught about sexuality in your schools, faith communities, and youth groups.** Other groups can help. It is often helpful when professionals lead talks.

— *Now What Do I Do?  
How to Give Your  
Pre-Teens Your  
Messages*

SIECUS

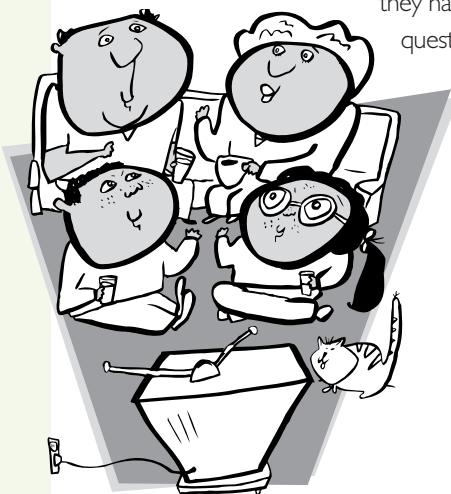


Illustration © 2000 Dominic Cappello

## FAMILIES ARE TALKING

*SIECUS Report Supplement*

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### VISIT THE SIECUS WEB SITE

We invite you to regularly visit the "For Parents" and "For Teens" section of the SIECUS Web site (<http://www.siecus.org>) for more information and resources.

### VISIT THESE PARENT EDUCATOR SITES

"Can We Talk?"

"¿Conversamos?"

information on the National Education Association's parent-child communication trainings on self-esteem, sexuality, puberty, and peer pressure  
<http://www.canwetalk.org>

### Ten Talks

information on parent-child communication trainings on sexuality, character, violence and drugs  
[www.tentalks.com](http://www.tentalks.com)

Illustrations, except where noted, are from *Ten Talks Parents Must Have with Their Children about Sex and Character* by Pepper Schwartz, Ph.D., and Dominic Cappello.

# Web Sites <sup>Let's Talk</sup> with Information for Parents and their Children on Talking About Sexuality

### Birds and Bees

information on birth control, pregnancy, STDs, and links to other sites  
<http://www.birdsandbees.org>

### Campaign for Our Children

information for both parents and teens on talking about sexuality  
<http://www.cfoc.org>

### Coalition for Positive Sexuality

information for teens who are sexually active or who are thinking about becoming sexually active  
<http://www.positive.org>

### Go Ask Alice!

q&a site including information on relationships, sexuality, and sexual health  
<http://www.goaskalice.columbia.edu>

### gURL

information on issues that affect the lives of girls 13 years of age and older  
<http://www.gurl.com>

### It's Your (Sex) Life

information for older teenagers about pregnancy, contraception, and STDs  
<http://www.itsyoursexlife.com>

### Iwannaknow

a safe and fun place for teenagers to learn about sexual health and for parents to receive guidance  
<http://www.iwannaknow.org>

### National Parent Information Center

research-based information on parenting and family involvement in education  
<http://www.npin.org>

### Outproud

information for gay, lesbian, bisexual, and transgender youth  
<http://www.outproud.org>

### Planned Parenthood Federation of America

information on "How to Be a Good Parent," "How to Talk with Your Child About Sexuality," "How to Talk with Your Teen About the Facts of Life," and "Human Sexuality: What Children Should Know"  
<http://www.plannedparenthood.org/library/SEXUALITYEDUCATION/DEFAULT.HTM>

### Scarleteen

advice, articles, and information addressing sexuality and sexual health issues for children and parents  
<http://www.scarleteen.com>

### Sex Ed Mom

advice, live monthly chats, teaching tips, and video clips for parents  
[http://thriveonline.oxygen.com/sex/experts/sex\\_ed\\_mom/index.html](http://thriveonline.oxygen.com/sex/experts/sex_ed_mom/index.html)

### SEX, ETC.

information, advice, and resources by teens for teens (and parents, too)  
<http://www.sexetc.org>

### Sex Sense

advice and quizzes for and by teens  
<http://www.ppsp.org/tpe.html>

### Sextalk

information on safer sex, self exams, and sexual orientation  
<http://www.sextalk.org>

### SIECUS

starting place for teens to learn about sexuality issues  
<http://www.siecus.org>

### Talking With Kids about Tough Issues

encouragement for parents to talk with their children early and often about sexuality issues  
<http://www.talkingwithkids.org>

### Teen Advice Online (TAO)

information on teen problems through a worldwide network of peers 13 years of age and older  
<http://www.teenadvice.org>

### Teen Scene

information from the Advocates for Youth Web site  
<http://www.advocatesforyouth.org/corner.htm>

### Teenwire

sexuality and sexual health information for teens  
<http://www.teenwire.com>

### Youth Resource

information and peer support for gay, lesbian, bisexual, and transgendered youth  
<http://www.youthresource.org>



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## Are You an Askable Parent?

# From Research to Practice

As a parents or caregiver, it is very important for you to be *askable*. What does that mean? How do adults become *askable*?

To be *askable* means that young people see you as approachable and open to questions. Being *askable* about sexuality is something that most parents and caregivers want but that many find very difficult. Adults may have received little or no information about sex when they were children. Sex may not have been discussed in their childhood home, whether from fear or out of embarrassment. Or, adults may worry about:

- Not knowing the *right* words or the *right* answers;
- Being *out of it* in the eyes of their young people;
- Giving too much or too little information; or
- Giving information at the wrong time.

Being *askable* is important. Research shows that youth with the least accurate information about sexuality and sexual risk behaviors may experiment more and at earlier ages compared to youth who have more information.<sup>1,2,3,4,5</sup> Research also shows that, when teens are able to talk with a parent or other significant adult about sex and about protection, they are less likely to engage in early and/or unprotected sexual intercourse than are teens who haven't talked with a trusted adult.<sup>6,7,8,9</sup> Finally, youth often say that they want to discuss sex, relationships, and sexual health with their parents—parents are their preferred source of information on these subjects.<sup>10,11</sup>

Because being *askable* is so important and because so many adults have difficulty initiating discussions about sex with their children, adults may need to learn new skills and become more confident about their ability to discuss sexuality. Here are some tips from experts in the field of sex education.

### Talking with Young People about Sexuality

- 1. Acquire a broad foundation of factual information from reliable sources.** Remember that sexuality is a much larger topic than sexual intercourse. It includes biology and gender, of course, but it also includes emotions, intimacy, caring, sharing, and loving, attitudes, flirtation, and sexual orientation as well as reproduction and sexual intercourse.
- 2. Learn and use the correct terms for body parts and functions.** If you have difficulty saying some words without embarrassment, practice saying these words, in private and with a mirror, until you are as comfortable with them as with non-sexual words. For example, you want to be able to say “penis” as easily as you say “elbow.”
- 3. Think through your own feelings and values about love and sex.** Include your childhood memories, your first infatuation, your values, and how you feel about current sex-related issues, such as contraceptives, reproductive rights, and equality with regard to sex, gender, and sexual orientation. You must be aware of how you feel before you can effectively talk with youth.
- 4. Talk *with* your child.** Listen more than you speak. Make sure you and your child have open, *two-way* communication—as it forms the basis for a positive relationship between you and your child. Only by listening to each other can you understand one another, especially regarding love and sexuality, for adults and youth often perceive these things differently.
- 5. Don't worry about—**
  - Being “with it.” Youth have that with their peers. From you, they want to know what you believe, who you are, and how you feel.
  - Being embarrassed. Your kids will feel embarrassed, too. That's okay, because love and many aspects of sexuality, including sexual intercourse, are highly personal. Young people understand this.

- Deciding which parent should have this talk. Any loving parent or caregiver can be an effective sex educator for his/her children.
- Missing some of the answers. It's fine to say that you don't know. Just follow up by offering to find the answer or to work with your child to find the answer. Then do so.

## Talking with Young Children

- 1. Remember that if someone is old enough to ask, she/he is old enough to hear the correct answer and to learn the correct word(s).**
- 2. Be sure you understand what a young child is asking.** Check back. For example, you might say, "I'm not certain that I understand exactly what you are asking. Are you asking if it's okay to do this or why people do this?" What you don't want is to launch into a long explanation that doesn't answer the child's question.
- 3. Answer the question when it is asked.** It is usually better to risk embarrassing a few adults (at the supermarket, for example) than to embarrass your child or to waste a teachable moment. Besides, your child would usually prefer it if you answer right then and softly. If you cannot answer at the time, assure the child that you are glad he/she asked and set a time when you will answer fully. "I'm glad you asked that. Let's talk about it on the way home."
- 4. Answer slightly above the level you think your child will understand,** both because you may be underestimating him/her and because it will create an opening for future questions. But, don't forget that you are talking with a young child. For example, when asked about the differences between boys and girls, don't get out a textbook and show drawings of the reproductive organs. A young child wants to know what is on the *outside*. So, simply say, "A boy has a penis, and a girl has a vulva."
- 5. Remember that, even with young children, you must set limits.** You can refuse to answer personal questions. "What happens between your father and me is personal, and I don't talk about it with anyone else." Also, make sure your child understands the difference between values and standards relating to his/her question. For example, if a child asks whether it is bad to masturbate, you could say, "Masturbation is not bad; however, we never masturbate in public. It is a *private* behavior." [values *versus* standards] You should also warn your child that other adults may have different *values* about this subject while they will hold to the same *standard*; that is, they may believe it is wrong and a private behavior.

## Talking with Teens

- 1. Recall how you felt when you were a teen.** Remember that adolescence is a difficult time. One moment, a teen is striving for separate identity and independence, and the next moment urgently needs an adult's support.
- 2. Remember that teens want mutually respectful conversations.** Avoid dictating. Share your feelings, values, and attitudes *and* listen to and learn about theirs. Remember that you cannot dictate anyone else's feelings, attitudes, or values.
- 3. Don't assume that a teen is sexually experienced or inexperienced, knowledgeable or naive.** Listen carefully to what your teen is saying and/or asking. Respond to the teen's actual or tacit question, not to your own fears or worries.
- 4. Don't underestimate your teen's ability to weigh the advantages and disadvantages of various options.** Teens have values, and they are capable of making mature, responsible decisions, especially when they have all the needed facts and the opportunity to discuss options with a supportive adult. If you give your teen misinformation she/he may lose trust in you, just as he/she will trust you if you are a consistent source of clear and accurate information. Of course, a teen's decisions may be different from ones you would make; but that goes with the territory.

Being *askable* is a lifelong component of relationships. It opens doors to closer relationships and to family connections. It's never too late to begin!

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# The Cost of Raising A Baby

Becoming a parent is a big deal; babies require a lot of love and attention but they also have other basic needs that parents have to pay for. Raising a child might be a bigger expense than you think! Bills start to add up before the baby is even born. In fact, they start as soon as someone learns they are pregnant.

**INSTRUCTIONS:** Take some time to fill out this worksheet to find out how much it costs to raise a baby through his/her first year. Give it your best guess. The answers will be given to you when you are finished and we'll give you some hints along the way.

## Before the Baby Arrives

When someone finds out they are pregnant they have to pay for monthly prenatal care check-ups, prenatal vitamins, a visit to the hospital to deliver the baby and a car seat to take the baby home in. Some of these expenses will be paid for if you have insurance, but it depends on the insurance and how much they will cover. Assume for this exercise that you have insurance.

**Prenatal & Birth Total:** \$

---

## Nursery Items

You will need a crib, changing table, etc in the nursery along with the materials that go with them. Remember for some items, you may need to buy more than one.

- Crib
- Crib mattress
- Crib sheets (3)
- Crib mattress pads (2)
- Receiving blankets (5)
- Changing table
- Changing table pads (2)
- Changing table pad cover (3)

### Optional Items:

- Crib mobile
- Crib activity center
- Cradle or Bassinet

**Nursery Total:** \$

---

## Health/Safety Items

Babies need a lot of things to keep them clean, healthy and safe. Below is a list of those things.

- Soft hairbrushes
- Combs
- Thermometer
- Toothbrushes
- Baby monitors
- Baby bathtub
- Baby washcloths
- Baby towels
- Soap
- Lotion
- Powder
- Baby oil
- Bathtub rings & faucet protectors
- Laundry detergent for washing baby's clothes
- Baby gates
- Drawer latches & outlet covers

### If baby gets sick you will need:

- Humidifier
- Nasal aspirator
- Medicine droppers

**Health/Safety Total:** \$

---

## Diapers

You will need a ton of diapers for your baby. Calculate the cost of diapers and supplies for one year.

- Diaper pail
- Diaper bag (2)
- Diapers (remember to calculate for one year)  
Hint: You will use about 75 diapers a week (52 weeks in a year).
- Baby wipes (remember to calculate for one year)  
Hint: You will use about 2 packages of wipes a month.

**Diaper Total:** \$

---

## Feeding Baby

You will need to decide if the baby will drink breast milk **OR** formula for the first six months.

### Breastfeeding

If you plan on breastfeeding the baby (most women breastfeed for 6-12 months):

- Breast milk
- Breast pump
- Nursing pads (21 per week)
- Nursing bras (3)
- Breast milk storage bags/ bottles (10)
- Burp cloths (12)
- 4 oz feeding bottles for pumped breast milk (10)
- 8 oz feeding bottles for pumped breast milk (10)
- Bottle brushes (4)
- Additional bottle nipples (10)

**Breastfeeding Total:** \$

---

### OR Formula Feeding

If you plan on using formula (hint: baby will be on formula exclusively for 6 months)

- 38 oz cans of formula (60)
- Pacifiers (10)
- 4 oz feeding bottles (20)
- 8 oz feeding bottles (20)
- Bottle brushes (4)
- Additional bottle nipples (20)
- Bottle liners (48)
- Burp cloths (12)

**Formula Feeding Total:** \$

---

### Baby Food

Baby is 6 months old and is starting to eat baby food along with formula:

- High chair
- Bibs (5)
- Infant spoons (10)
- No spill cups (5)
- Childproof plates & bowls (15)
- Baby food (500)

**Baby Food Total:** \$

---

### Clothing

- Sleepers/Swaddlers
- Gowns
- Hats
- Booties
- Jackets
- Outfits
- Socks
- Shoes
- Shirts
- Pants
- Onesies

**Clothing Total:** \_\_\_\_\_ \$

### Extras

The following items aren't necessities, but they make life with a baby much easier so you decide to buy them!

- Carrier/Sling
- Stroller
- Baby swing
- Baby jumper/Bouncer
- Toys/Stuffed animals
- Teething rings
- Books
- Professional pictures
- Rocking chair

**Extras Total:** \_\_\_\_\_ \$

### Add it all together

<b>Prenatal &amp; Birth Total</b>	\$
<b>Nursery Total</b>	\$
<b>Health/Safety Total</b>	\$
<b>Diaper Total</b>	\$
<b>Feeding Total</b> Breastfeeding OR Formula	\$
<b>Baby Food Total</b>	\$
<b>Clothing Total</b>	\$
<b>Extras Total</b>	\$
<b>Grand Total</b>	\$
<b>Actual Cost</b>	\$



### How did you compare?

# BABY can wait .com

Connecting Milwaukee's Youth with Sexual Health Resources  
Website provided by United Way of Greater Milwaukee



United Way  
of Greater Milwaukee

# The Cost of Raising A Baby

**INSTRUCTIONS:** The boxed Facilitator sections are to be read out loud to the students. Other facilitator instructions are in italics.

**FACILITATOR:** The United States has the highest teen pregnancy rate of any other industrialized nation. Teen pregnancy is associated with poverty and low graduation rates. In fact, babies born to teen parents are at a higher risk for going to jail, not graduating, and becoming teen parents themselves. While some teen parents are able to beat the odds, it's a lot more difficult for them.

On top of all of that, it is very expensive to raise a baby. We're going to go through a list of things a parent would need to get in the baby's first year of life, and some things that aren't necessary, but nice to have.

You will work individually (or in a group) and write down your best guess on how much these items cost. We will go through each section together. When you're finished, add up all the sections on the last page to find out how much money you'd need for one year. If you have questions – don't be afraid to ask.

Assume that you do not have hand-me-downs and no baby shower, so you're starting from scratch.

**FACILITATOR INSTRUCTIONS:** *Pass out the worksheets and go through each section as a class. Read the boxed facilitator notes before they begin the section. Give them a few minutes to complete each section individually or in a group.*

*The youth are given guidelines for what needs to be purchased in each section, but they will have to guess the total for each section and then add up each of the totals for the grand total. At the completion of the worksheet reveal the cost ranges for each section and the grand total range.*

*Remember that the cost of baby items is different depending on where the item is purchased and whether it is a bargain brand or name brand.*

## Before the Baby Arrives

**FACILITATOR:** Depending on insurance coverage, hospital birthing out-of-pocket costs can range anywhere from \$1,000 to over \$6,000. With no insurance they can be upwards of \$30,000. These costs include the hospital room, doctors/obstetrician, nurses, anesthesiologist, drugs, and more. Costs can go up with longer hospital stays, complications during pregnancy and having a caesarean section rather than vaginal birth. In addition to the hospital costs on the day of the baby's birth, there are costs throughout the entire 9 months of pregnancy including monthly prenatal care check-ups, prenatal vitamins, and a car seat to take the baby home in.

When someone finds out they are pregnant they have to pay for monthly prenatal care check-ups, prenatal vitamins, a visit to the hospital to deliver the baby and a car seat to take the baby home in. Some of these expenses will be paid for if you have insurance, but it depends on the insurance and how much they will cover. Assume for this exercise that you have insurance.

**Prenatal & Birth Total:** **\$2,500-\$8,500**

## Nursery Items

**FACILITATOR:** Babies need a safe place to sleep. Babies are prone to suffocation, strangulation, or Sudden Infant Death Syndrome (SIDS) when their sleeping environments are not safe.

Some parents sleep with babies in their bed and it is very common in some countries and cultures. Safe sleeping with a baby is possible, but it takes a lot of education to understand what precautions must be in place for this practice to be safe, including types of mattresses, bedding, and sleep patterns. Babies should never be placed in the same bed as parents who have been drinking, parents who smoke, or placed in bed with other children. In Milwaukee, unsafe sleep practices are a top reason for babies dying within their first year of life.

In this scenario, you have decided that your baby will sleep in a crib, whether that is in your bedroom or in their own.

You will need a crib, changing table, etc in the nursery along with the materials that go with them. Remember for some items, you may need to buy more than one.

- Crib
- Crib mattress
- Crib sheets (3)
- Crib mattress pads (2)
- Receiving blankets (5)
- Changing table
- Changing table pads (2)
- Changing table pad cover (3)

### Optional Items:

- Crib mobile
- Crib activity center
- Cradle or Bassinet

**Nursery Total:** **\$575-\$2,000**

## Health/Safety Items

**FACILITATOR:** Babies need special bathtubs, soft washcloths, towels, no-tear shampoo, gentle soap, lotion to keep their skin from getting dry, powder to keep them from getting bacterial infections and diaper rash, and special gentle detergent for their clothes. On top of that the baby will start moving around and they are prone to accidents if their home isn't safe for them.

Babies need a lot of things to keep them clean, healthy and safe. Below is a list of those things.

- Soft hairbrushes
- Combs
- Thermometer
- Toothbrushes
- Baby monitors
- Baby bathtub
- Baby washcloths
- Baby towels
- Soap
- Lotion
- Powder
- Baby oil
- Bathtub rings & faucet protectors
- Laundry detergent for washing baby's clothes
- Baby gates
- Drawer latches & outlet covers

**If baby gets sick you will need:**

- Humidifier
- Nasal aspirator
- Medicine droppers

**Health/Safety Total: \$450 - \$750**

**Diapers**

**FACILITATOR:** Babies will use 10-14 diapers per day. Some people use cloth diapers to cut on costs and reduce the impact on the environment, but they have to figure in extra time and money for laundry and extra diaper covers. Most people use disposable diapers simply because the baby will go through so many in the first few years. In addition to diapers, the baby needs to be cleaned and dried every time the diaper is changed.

You will need a ton of diapers for your baby. Calculate the cost of diapers and supplies for one year.

- Diaper pail
- Diaper bag (2)
- Diapers (remember to calculate for one year)  
Hint: You will use about 75 diapers a week (52 weeks in a year).
- Baby wipes (remember to calculate for one year)  
Hint: You will use about 2 packages of wipes a month.

**Diaper Total: \$1,200-\$1,500**

**Feeding Baby**

**FACILITATOR:** Breastfeeding has many benefits for the child as well as the mother. Babies who are breastfed are protected from a variety of illnesses and disorders, have less risk for becoming overweight (even as adults), have been shown to have higher IQ's, and are less likely to develop allergies. Breast milk is easier to digest and protects babies from ear infections and may reduce their risk for childhood cancers. Breastfeeding is also a protective factor against babies dying before their first birthdays.

Mothers who breastfeed also see the benefits. Their uterus shrinks to its pre-pregnancy size faster and it reduces the amount of blood lost after delivery. Mothers who breastfeed lose weight faster – they burn up to 500 additional calories a day! Breastfeeding reduces a mother's risk for breast cancer, ovarian cancer and osteoporosis.

Some women are not able to breastfeed for a variety of reasons. Formula can never replace the benefits of breast milk, but is designed to meet the needs of any baby, from those that have sensitive stomachs to those that are lactose intolerant and anything in between.

For the purposes of this activity choose either to breastfeed or formula feed, but not both.

Eventually the baby will be able to start eating baby food in addition to breast milk or formula. There are many varieties and flavors of baby food, and sometimes it takes trial and error to know what your baby likes and doesn't like. In addition to breast feeding/formula feeding, calculate 6 months of baby food.

You will need to decide if the baby will drink breast milk **OR** formula for the first six months.

**Breastfeeding**

- Breast milk
- Breast pump
- Nursing pads (21 per week)
- Nursing bras (3)
- Breast milk storage bags/bottles (10)
- Burp cloths (12)
- 4 oz feeding bottles for pumped breast milk (10)
- 8 oz feeding bottles for pumped breast milk (10)
- Bottle brushes (4)
- Additional bottle nipples (10)

If you plan on breastfeeding the baby (most women breastfeed for 6-12 months):

**Breastfeeding Total: \$300-\$500**

**OR Formula Feeding**

If you plan on using formula (hint: baby will be on formula exclusively for 6 months)

- 38 oz cans of formula (60)
- Pacifiers (10)
- 4 oz feeding bottles (20)
- 8 oz feeding bottles (20)
- Bottle brushes (4)
- Additional bottle nipples (20)
- Bottle liners (48)
- Burp cloths (12)

**Formula Feeding Total: \$2,000 - \$3,000**

**Baby Food**

Baby is 6 months old and is starting to eat baby food:

- High chair
- Bibs (5)
- Infant spoons (10)
- No spill cups (5)
- Childproof plates & bowls (15)
- Baby food (500)

**Baby Food Total: \$1,000-\$2,000**

**Clothing**

**FACILITATOR:** Babies go through a lot of clothing within their first year (and every day) because of accidents during feeding, changing diapers, and because they grow quickly. It is also important to have plenty of different types of clothes within the first year because of changing seasons. Most young babies also like to be swaddled - it helps calm them down and they feel protected.

- Sleepers/Swaddlers
- Gowns
- Hats
- Booties
- Jackets
- Outfits
- Socks
- Shoes
- Shirts
- Pants
- Onesies

**Clothing Total: \$1,000-\$1,500**

**Extras**

**FACILITATOR:** The following items aren't necessities, but they make life with a baby much easier so you decide to buy them!

- Carrier/Sling
- Stroller
- Baby swing
- Baby jumper/Bouncer
- Toys/Stuffed animals
- Teething rings
- Books
- Professional pictures
- Rocking chair

**Extras Total: \$500-\$1,000**

**FACILITATOR:** Now that you've made your best guess in each section, add it all together.

**FACILITATOR INSTRUCTIONS:** Go through each section and tell them the actual costs.

**Prenatal & Birth Total \$2,500-\$8,500**

**Nursery Total \$575.00-\$2,000**

**Health/Safety Total \$450-\$750**

**Diaper Total \$1,200-\$1,500**

**Breastfeeding Total \$300-\$500**

OR

**Formula Feeding Total \$2,000-\$3,000**

**Baby Food Total \$1,000-\$2,000**

**Clothing Total \$1,000-\$1,500**

**Extras Total \$500-\$1,000**

**FACILITATOR:** Now that you've made some good guesses as to how much it costs to raise a baby, and I have given you the price range for each section - I'm going to tell you the approximate cost for one year. The cost of baby items is different depending on where it's purchased, the brand and if it is a basic model or something more.

**Grand Total Breastfeeding \$7,525-\$17,750**

**Grand Total Formula Feeding \$9,225-\$20,250**

**FACILITATOR:** These are approximate costs for only ONE year of raising a baby. How did you compare?

**FACILITATOR INSTRUCTIONS:** Let the youth respond, acknowledge their reactions.

**FACILITATOR:** Now let's talk about the costs involved in not becoming a teen parent.

**Cost of Abstinence \$0.00**

Abstinence is the best way to prevent pregnancy. If/when you choose not to remain abstinent, there are other ways to prevent pregnancy.

**Cost of Condoms Free - \$15.00 (36)**

No Condom No Way sites and MPS Nurses have free condoms available for teens.

**Birth Control (hormonal) \$5-\$50 per month**

It is safer for a teen girl to be on birth control than for her to be pregnant. Hormonal birth control methods come in all shapes, sizes, and costs. A doctor would be the best one to talk to about which one is the best for the individual. Some birth control has to be taken every day; some have to be remembered once a week, once a month, once every three months, or once every 5 years.

As you can see, it is much more cost effective to practice abstinence; or if you are sexually active, protect yourself and your partner from pregnancy. Having a baby is expensive, not to mention, teen parents are less likely to complete high school. Without a high school education it is more difficult to find a job that pays enough to support a family.

All of these things are why it is important to think twice before you have unprotected sex.

**For more information check out these websites:**  
[babycanwait.com](http://babycanwait.com)  
[city.milwaukee.gov/nocondomnoway](http://city.milwaukee.gov/nocondomnoway)

# BABY CAN WAIT .COM

Connecting Milwaukee's Youth with Sexual Health Resources  
 Website provided by United Way of Greater Milwaukee



United Way  
of Greater Milwaukee

# Talking about Sexuality and Values

## Parents' Sex Ed Center

**Teens and parents:** Before you do this exercise, please read the notes at the bottom of this page.

**Teens:** Complete this form by writing in the appropriate column the age at which you would feel comfortable engaging in the behavior. Later, ask your parents to fill in the parent column, and discuss the responses.

**Parents:** Complete this form by writing in the appropriate column the age at which you would feel comfortable if your preteen or teen engaged in the activity. Later, ask your teen/preteen to fill in the ages at which he/she thinks the behavior is appropriate. Discuss the responses.

When is it okay to ...		
	Preteen/Teen	Parent
Hold hands		
Kiss on the lips		
French kiss		
Participate in petting		
Go out in a group of friends		
Date		
Undress in front of a boyfriend/girlfriend		
Have sexual intercourse		
Live with someone without being in a committed relationship		
Enter a committed relationship with someone		

### Notes to Teens and Parents

As you do this exercise and discuss your responses, please listen to each other. Ask the other person to talk about why he/she feels that an age is appropriate or acceptable for the particular behavior. Remember that these are individual values, not eternal truths; so, you can be open to different views and avoid being critical or judgmental.

**Parents:** It is important that you share your values. However, remember that as your teen moves into young adulthood, he/she will make private decisions about sexuality. You will have no control over those decisions.

**Teens:** It is important to listen to your parents and consider their opinions carefully, even as you express your own values. Their experiences and wisdom may help you to make difficult decisions; but in the end, the decisions are yours to make.

Compiled by Barbara Huberman, RN, MEd, Director of Education and Outreach  
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# Attitudes and Beliefs

This activity will help parents share their attitudes and beliefs with their sons or daughters.

**Directions:** With pen in hand, fill out the worksheet. Ask your son or daughter at the same time to fill out the worksheet. When you're both finished, exchange and discuss the answers with each other. What similarities do you notice? What differences?

### ABOUT LOVE ...

My mother would say \_\_\_\_\_  
 My father would say \_\_\_\_\_  
 I believe \_\_\_\_\_

### ABOUT MARRIAGE ...

My mother would say \_\_\_\_\_  
 My father would say \_\_\_\_\_  
 I believe \_\_\_\_\_

### ABOUT SEX ...

My mother would say \_\_\_\_\_  
 My father would say \_\_\_\_\_  
 I believe \_\_\_\_\_

### ABOUT BIRTH CONTROL AND CONDOMS ...

My mother would say \_\_\_\_\_  
 My father would say \_\_\_\_\_  
 I believe \_\_\_\_\_

### ABOUT PREGNANCY ...

My mother would say \_\_\_\_\_  
 My father would say \_\_\_\_\_  
 I believe \_\_\_\_\_

### ABOUT HIV/AIDS ...

My mother would say \_\_\_\_\_  
 My father would say \_\_\_\_\_  
 I believe \_\_\_\_\_

### ABOUT SEX EDUCATION ...

My mother would say \_\_\_\_\_  
 My father would say \_\_\_\_\_  
 I believe \_\_\_\_\_

*Compiled by Barbara Huberman, RN, MEd, Director of Education and Outreach  
 October 2002 © Advocates for Youth*

Parents' Sex Ed Center



# Parents' Sex Ed Center

## Tips for Talking with Sexually Active Teens about Contraception

According to the Centers for Diseases Control and Prevention, each year in the United States nearly 850,000 teens experience pregnancy, mostly unintentionally.<sup>1</sup> U.S. teens also experience about three million sexually transmitted infections (STIs) each year.<sup>2</sup> A critical issue in reducing these numbers is encouraging teens to use contraception consistently and correctly.

Parents can play an important role in helping young people to utilize their own values, aspirations, and expectations in deciding the appropriate time in life for initiating sexual intercourse. Parents can also provide teens with important information about contraception and encourage them to use contraception correctly and consistently. The following tips can help parents to talk with young people about contraception and to support youth in using contraceptives effectively and consistently.

- Educate yourself about the specifics of contraception and STIs. Learn about contraception, including emergency contraception, and about condoms. Learn how contraceptives work, the cost of various methods, side effects, pros and cons of each method, and where teens can go for information and services. Learn also about STIs—gonorrhea, syphilis, herpes, genital warts, and HIV—including ways they are transmitted, symptoms, risks, and treatment options.
- Carefully explain your own feelings and values about sexual intercourse and contraceptive use. Include personal memories and values. Values that are related to contraceptive and condom use include respect for self and partner, responsibility, and trust. Other values pertinent to discussing contraception may include, but are not limited to, those related to life, children, and future aspirations.
- Listen carefully. Only by listening to your teen's feelings and values will you understand how he/she approaches decisions, including sexual decisions. When you understand your teen's values, you can ask questions that help the teen clarify how to act consistently with those values. For example, a teen might say, "I believe that too many children need homes and there are too many people in the world." This is an opportunity to ask what actions related to preventing pregnancy would be consistent with that value.
- Avoid assumptions.
  - Do not assume that your teen knows everything he/she needs to know about contraception and condoms. Assure your teen that knowledge is power and that you want him/her to have the power that comes from knowledge. Assure your teen that you will not make assumptions based on the teen's questions or concerns.
  - Do not make assumptions about the teen's sexual orientation or about his/her sexual behavior based on that orientation.
  - Do not assume that there is only one kind of sexual intercourse. Many teens are having oral and/or anal intercourse, believing that this is not "sex." Be clear with your teen that all these types of intercourse are sexual intercourse and are behaviors that necessitate protection.
- Arm your teen with information. Talk with your teen about what you have learned about contraception, including condoms and emergency contraception (EC). Encourage your teen to seek out further information and to decide what method would be right for him/her. Say that being prepared in advance is always the intelligent, mature choice. Make sure your teen knows where he/she can go for confidential sexual health services, including contraception and STI testing and treatment.



- Be sure that your teen has information about contraception and condoms regardless of his/her sexual orientation. Gay and lesbian teens sometimes have sexual intercourse with members of the opposite gender in order to hide their sexual orientation. Any young person may experiment. Regardless of sexual orientation, all youth need to know how to prevent pregnancy as well as STIs.
- Discuss using condoms as well birth control. Teens need to know that contraceptive methods, such as birth control pills, Depo-Provera, and the IUD, don't protect against STIs. Teens need to know that they can contract STIs, including HIV, from unprotected vaginal, anal, or oral intercourse. For best protection, a teen and his/her partner need to use both condoms and another form of birth control. Consider making condoms available in your home.
- Make sure your teens knows know about emergency contraception—which can be taken to prevent pregnancy up to 120 hours (five days) after unprotected intercourse or when a contraceptive method fails.
- Encourage your teen to take equal responsibility with a partner for using condoms and birth control. Just as a male should not be the only one responsible for providing condoms, so a female should not be the only one responsible for providing for other forms of contraception. Protection is a mutual responsibility within a caring relationship.
- Discuss being “swept away.” Many teens say they did not use condoms or contraception because they “just got swept away.” Be clear that this is not okay. Anyone who is mature enough to have sexual intercourse is mature enough to use protection.
- Discuss sexual coercion and dating violence with your teen. Make sure that your teen knows she/he has the right to say no and the right to be safe. Make sure your teen knows that he/she can come to you or another trusted adult if a relationship involves or threatens to involve coercion or violence. Make sure your teen knows that it is both illegal and contrary to your family's values to use coercion or violence against anyone else. Help teens identify ways to avoid/get away from sexual situations that feel uncomfortable or dangerous.
- Identify with your teen the names of other adults to whom he/she can go if unable or unwilling to come to you. This could be a relative, clergy member, health care provider, or friend, but identify the person as someone your teen can trust for confidential guidance and support. Give your teen permission to confide in someone else and say that these conversations will remain confidential although the other adult may encourage the teen to involve you.
- Consider incorporating the Rights. Respect. Responsibility.<sup>®</sup> philosophy into your value system, especially in relation to talking about sexual health and contraception with your teen.
  - RESPECT your young person's RIGHT to confidential sexual and reproductive health services. Share with your teen what to expect at his/her first visit for sexual health services. Then, ensure that your teen has private sessions with the health care provider. Private sessions empower teens to discuss issues honestly with the provider and to go for care when they need it.
  - Encourage your teen to take RESPONSIBILITY for her/his personal sexual and reproductive health needs. Provide support so teens can make and keep appointments for annual medical exams and other needed health care.

#### References

1. Centers for Disease Control and Prevention. Teen Pregnancy. [Fact Sheet]. Atlanta, GA: The Centers, 1999.
2. Alan Guttmacher Institute. Facts in Brief: Teen Sex and Pregnancy. New York, NY: The Institute, 1998.

# What Parents of Preteens/Adolescents Should Know About the HPV Vaccine

Let's Talk

There is now a three-dose vaccine that protects against four common types of genital human papillomavirus (HPV), which cause most cervical cancers and genital warts. This HPV vaccine has been licensed by the Food and Drug Administration (FDA) as safe and effective for females, ages 9 to 26 years.

## What is HPV and What are its Health Effects?

HPV is a common virus that is passed on during sex. There are about 40 types of HPV that can infect the genital areas of men and women. Most sexually active adults get HPV at some time in their lives, although most never know it because HPV usually has no symptoms and goes away on its own. But:

- Some types of HPV can cause cervical cancer in women.
- Other types of HPV can cause genital warts.

The American Cancer Society estimates that in 2006, over 9,700 women were diagnosed with cervical cancer, and 3,700 women died from it in the United States.

It is estimated that about 1 million sexually active people in the United States have visible genital warts at any point in time.

- The HPV vaccine is recommended for 11- to 12-year-old girls, and can be given to girls as young as 9. The vaccine also is recommended for 13- to 26-year-old girls/women who have not yet received all three doses.
- Ideally, girls should get the vaccine before they become sexually active, since this vaccine is most effective in girls/women who have not yet acquired any of the HPV vaccine types.
- In girls/women who have not been infected with any of the four HPV types, the vaccine has been shown to be about 100% effective in preventing precancers of the cervix, vulva, and vagina, and genital warts caused by those HPV types.
- The vaccine is given through a series of three shots over a six-month period. Your daughter will need to come back for the second and third shots two and six months (respectively) after the first shot. It is very important that she receive all three shots, since it is not yet known how much protection she would get from receiving only one or two shots of the vaccine.
- The vaccine causes no serious side effects. The most common side effect is soreness at the injection site.
- The HPV vaccine costs about \$120 per dose (\$360 for the series). You may be able to get it for free or at low-cost through your health insurance plan or federal or state programs. More information about these programs is available from your doctor's office or the local health department.

## Keep in mind...

When vaccinated girls are older, they will still need to get regular Pap tests within three years of becoming sexually active (or by age 21), since the vaccine does not protect against all cervical cancers. Also, once they become sexually active, they will still need to practice protective sexual behaviors, since the vaccine will not prevent all cases of genital warts, nor will it prevent other sexually transmitted infections (STIs).

## Other ways to prevent HPV and related diseases

- The vaccine protects against the types of HPV that most commonly cause cervical cancer and genital warts. But the only sure way to prevent all types of HPV is to abstain from all sexual activity.
- Condoms may lower a person's chances of getting HPV and developing HPV-related diseases, when used all the time and the right way. But condoms may not *fully* protect against HPV, since HPV can infect areas that are not covered by a condom. Even people with only one lifetime sex partner can get HPV, if their partner has been infected with HPV.
- Regular Pap tests and follow-up treatment can prevent most, but not all, cases of cervical cancer.

## What about a vaccine for boys, men, or women over age 26?

We do not yet know if the vaccine is safe and effective in boys/men, or in women over 26 years of age. Research is now being done with males and older women. The FDA will consider licensing the vaccine for these other groups when there is proof that it is safe and effective for them.

If you have questions, please write them down and ask about them during your next doctor's visit. You can also call:

### The Centers for Disease Control and Prevention (CDC)

1-800-CDC-INFO (1-800-232-4636); 1-888-232-6348 TTY

Operators can answer your questions in English or Spanish 24 hours a day, 7 days a week.

### The National Cancer Institute's Cancer Information Service (CIS)

1-800-4-CANCER (1-800-422-6237); 1-800-332-8615 TTY

Information specialists can answer your questions in English or Spanish from 9:00am to 4:30pm in your time zone.



# **Understanding Youth: Sexual Orientation and Gender Identity**

**[babycanwait.com](http://babycanwait.com)**

## Talking to Teens about Sexual Orientation

During adolescence, teens learn to relate to their peers as friends and potential romantic or sexual partners. This is a normal part of adolescent development. The sexual thoughts can be intense or confusing. This may be true for young people who are having sexual thoughts and feelings about someone of the same sex.

### What is sexual orientation?

Sexual orientation refers to the gender (male or female) that a person is attracted to. Teens have a sexual orientation even if they aren't yet sexually active. People usually consider themselves in 1 of 3 ways:

- **Heterosexuals** are attracted mainly to people of the opposite sex. Heterosexual males are attracted to females, and heterosexual females are attracted to males. Heterosexuals are sometimes called "straight."
- **Homosexuals** are attracted mainly to people of the same sex. Females who are attracted to other females are known as lesbians. Males who are attracted to other males are known as gay. The term "gay" is sometimes used to describe homosexuals of either gender.
- **Bisexual** people are attracted to are romantically and physically attracted to both males and females.

### How can I help my teen feel more comfortable talking about sexuality?

- The most important thing is to let your teen know that you love him.
- Some teens will tell a sibling or cousin before they tell a parent, and often they will choose one parent to tell first. It's important that you respect that your teen will tell someone he feels comfortable with.
- Be available and open-minded if your teen wants to talk about sexual orientation, but don't force the issue.
- Consider talking about sexuality after watching a television show or reading a book with a homosexual theme. This can be a helpful way to let your teen know that she's loved no matter what her orientation.
- Encourage your teen to talk about sexual health with a pediatrician, family doctor, other health care provider or trusted adult. They may also be able to help her find ways to deal with any peer pressure, harassment, and bullying she faces.

### Are there health issues I should worry about if my teen is homosexual?

Just being homosexual does not have any health risks. However, gay and lesbian teens are at a higher risk of depression and suicide.

- All sexually active teens should be routinely tested for sexually transmitted infections (STIs).
- Anyone who has unprotected anal sex has a high risk of STIs. Safer sex practices, such as using a condom, help reduce the risk of other infections.
- Girls between 9 and 13 years of age should get the [human papillomavirus \(HPV\) vaccine](#). To work best, the vaccine needs to be given before any sexual

activity starts. The HPV vaccine is approved for use in boys in Canada. Speak to your health care provider for more information.

- Although lesbian teens are less likely to get STIs than heterosexual teens, they may have sex with males (for many reasons), which increases their risk.
- All females who have had sex with males or who have shared sex toys with someone who has sex with males should have a Pap test. Pap tests are recommended for females 21 years of age and over, or three years after becoming sexually active. During a Pap test, cells are collected from the cervix and then examined to make sure they are normal and healthy. A sexually active lesbian who has not had sex with a male should still have a Pap test done in her early 20s.
- Encourage your teen to talk to a trusted health care provider about all options for safer sex.

Thinking sexually about both the same sex and the opposite sex is quite common as teens sort through their emerging sexual feelings. This type of imagining about people of the same or opposite sex doesn't necessarily mean that a person fits into a particular type of sexual orientation.

## **Do People Choose Their Sexual Orientation?**

Most medical professionals, including organizations such as the American Academy of Pediatrics (AAP) and the American Psychological Association (APA), believe that sexual orientation involves a complex mixture of biology, psychology, and environmental factors. A person's genes and inborn hormonal factors may play a role as well. These medical professionals believe that — in most cases — sexual orientation, whatever its causes, is not simply chosen.

Not everyone agrees. Some believe that individuals can choose who they are attracted to — and that people who are gay have chosen to be attracted to people of the same gender.

There are lots of opinions and stereotypes about sexual orientation. For example, having a more "feminine" appearance or interest does not mean that a teen boy is gay. And having a more "masculine" appearance doesn't mean a girl is lesbian. As with most things, making assumptions just based on looks can lead to the wrong conclusion.

It's likely that all the factors that result in someone's sexual orientation are not yet completely understood. What is certain is that people, no matter their sexual orientation, want to feel understood, respected, and accepted — particularly by their family. That's not always easy in every family.

## **What's It Like for Gay Teens?**

For teens who are gay or lesbian, it can feel like everyone is expected to be straight. Because of this, some gay and lesbian teens may feel different from their friends

when the heterosexual people around them start talking about romantic feelings, dating, and sex. They may feel like they have to pretend to feel things that they don't in order to fit. They might feel they need to deny who they are or that they have to hide an important part of themselves.

These feelings, plus fears of prejudice, can lead teens who aren't straight to keep their sexual orientation secret, even from friends and family who might be supportive. Kids and teens who are gay are likely to face people who express stereotypes, prejudices, and even hate about homosexuality.

## **Coming Out**

Some gay or lesbian teens tell a few accepting, supportive friends and family members about their sexual orientation. This is often called **coming out**. Many lesbian, gay, and bisexual teens who come out to their friends and families are fully accepted by them and their communities. They feel comfortable about being attracted to someone of the same gender and don't feel particularly anxious about it.

But not everyone has the same feelings or good support systems. People who feel they need to hide who they are or who fear rejection, discrimination, or violence can be at greater risk for emotional problems like anxiety and depression.

Some gay teens without support systems can be at higher risk than heterosexual teens for dropping out of school, living on the streets, using alcohol and drugs, and even in some cases for attempting to harm themselves.

## **Where can I get support in or near Milwaukee?**

### **AIDS Resource Center of WI**

820 North Plankinton Avenue  
Milwaukee Wisconsin 53203  
414-273-1991  
<http://www.arcw.org>

### **Diverse & Resilient**

2439 N. Holton St.,  
Milwaukee WI 53212  
414-390-0444  
<http://www.diverseandresilient.org>

### **Gay Youth Milwaukee**

414-265-8500  
<http://gayyouthmilwaukee.tripod.com/>

### **The LGBT Center of Southeast Wisconsin**

1456 Junction Ave.  
Racine, WI 53403  
262-664-4100  
<http://lgbtsewisc.org/>

### **Milwaukee LGBT Community Center**

252 E. Highland Ave.  
Milwaukee, WI 53202  
414-271-2656  
<http://mkelgbt.org/>

### **Parents, Families & Friends of Lesbians and Gays (PFLAG) Milwaukee**

315 Court Street, Suite 101,  
Room 112  
Milwaukee WI 53212  
414-299-9198  
<http://www.milwaukee-pflag.org/>

### **UWM LGBT Center**

UWM Union WG-89 Street level, between the Women's Resource Center and  
Neighborhood Housing Office at the west end of the Terrace Cafe.  
414-229-4116  
<http://www.aux.uwm.edu/lgbt/>

Adapted from <http://www.caringforkids.cps.ca/teenhealth/sexualorientation.htm>

And <http://kidshealth.org> Sexual Attraction and Orientation (June 2009)



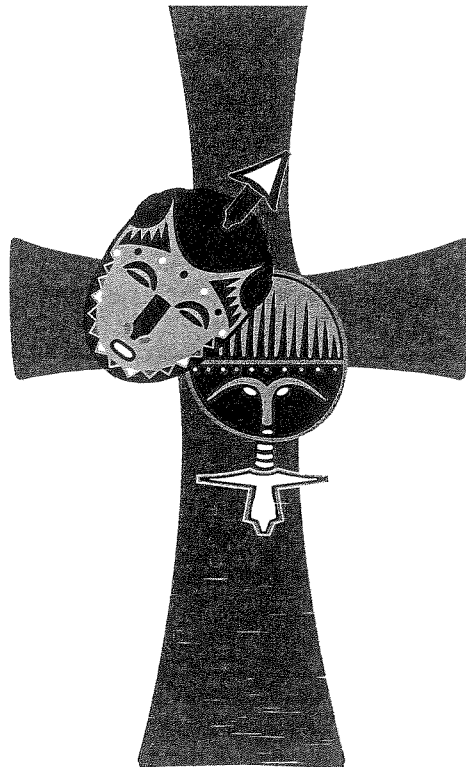
# Faith

**[babycanwait.com](http://babycanwait.com)**

## Handout WHAT IS SEXUALITY?

It is a God-given basic and natural part of being human that includes:

- The body (body image, body sensations, attractions)
- Identity (how we see ourselves as male and female; how we express our sense of masculinity or femininity; and our sexual orientation)
- Relationships (liking, loving, trusting, communicating, making commitments)
- Sexual behavior and its consequences (health and hygiene issues, reproduction, sexually transmitted diseases, etc.)



## **Handout COMMUNICATION TIPS FOR GROWTH ASSIGNMENTS**

### **Ways to Encourage Your Child to Communicate**

**"In all thy ways acknowledge God and he shall direct your path."  
(Proverbs 3:5-6)**

- Enter into the conversation with an open heart and mind
- Be enthusiastic
- Recognize that the learning can go both ways (your teens can learn from you and you can learn from your them)
- Use two-way communication (be ready to listen as well as talk)
- Avoid overreacting or jumping to conclusions
- Remember three important aspects of communication about sexuality – VIF – Values, Information, Feelings
- Pay attention to your tone and don't forget the "music" that is underneath your words (It's not what you say but how you say it.)
- Try to see things from your teenagers' point of view (it will help them do the same for you)
- Send the message that it is OK to come to you with any question or concern

### **Growth Assignment Questions – Session 2: It's a Family Affair**

sexual

1. How did you get your sex education?
2. When you were growing up, what messages did you get from church about sexuality? How easy was it to have open dialogue about sexuality in church when you were my age?
3. How comfortable were you talking with your parents about sexuality?
4. What lessons do you wish your parents had given you about sexuality?
5. What lessons do you wish your church had given you about sexuality?

**"My child, never forget the things I have taught you. Store my commands  
in your heart."  
(Proverbs 3:1)**

**"Keeping It Real!" A Faith-Based Sexuality Education Dialogue Model for African American Teens™**

**"KEEPING IT REAL!"  
PROGRAM VALUE CHART**

Session	Program Value
1: Sexuality: A Spiritual Gift from God	Sexuality is a gift from God.
2. It's a Family Affair	Open and honest dialogue about sexuality across the generations is healthy for families and communities. Adults and youth must accept and connect with each other where they are and form mutually respectful relationships that enable such dialogue to occur.
3. Connecting with Spirit: Healthy Relationships	God created each of us as sexual beings and we each have a responsibility to express our sexuality in ways that honor and affirm ourselves, God, our partners, our families, and our communities.
4. In Your Face: Critiquing Media Messages about Sexuality	All young people should have access to medically accurate and age-appropriate sexuality information offered in a confidential and nonjudgmental manner. The goal of this sexuality information is to help youth grow up to be sexually healthy adults and avoid negative consequences such as teen pregnancy, sexually transmitted infections and HIV.
5. The Freedom to Choose: Making Decisions about Sexuality	A sexual relationship requires thoughtfulness and should be a commitment between partners on a physical, emotional, and spiritual level. Making a decision to engage in sexual behavior requires one to be willing to accept any and all consequences that result.
6. Not in Our Community: Combating Sexual Violence	Sexual relationships should never be coercive or exploitative.
7. Doing the Right Thing: Promoting Justice	Oppression or exclusion of people on the basis of their age, gender, sexual orientation, race, background, or physical and mental ability is unjust.
8. The Influence of the Church	The church is a valuable resource for the education of its members and the larger community. Black and Latino churches are called to support young people in understanding what it means to be healthy sexual beings created in God's image.

# FAITH MATTERS

**How African-American Faith  
Communities Can Help Prevent  
Teen Pregnancy**



## INTRODUCTION

Religious organizations, faith leaders, youth ministers, and pastors' spouses are in a unique and powerful position to make a difference in preventing teen pregnancy. That's because many teens, like adults, make decisions about their sexual behavior based on religious beliefs, moral values, and their own understanding of family, children, love, and commitment. Research and surveys both show that religious faith and a strong moral sense play important roles in protecting young people from sexual activity and pregnancy in the teen years.

African-American congregations are already working hard to help shape the character of young people and to strengthen families and communities. To enhance these efforts and to highlight the strong connection between faith and preventing teen pregnancy, the National Campaign to Prevent Teen Pregnancy and the National Coalition of Pastors' Spouses have worked together to develop this pamphlet.

✦ **One third of African-American teens has had sex by age 15.** ✦

Rates of teen pregnancy and birth have been declining since the early 1990s. These declines have been particularly dramatic among African-American teens. Still, despite this good news, African-American girls are more likely than their White or Hispanic counterparts to become pregnant as a teen. In fact, African-American teens still have the highest teen pregnancy rate of any group. In part because teen pregnancy rates remain stubbornly high in the African-American community, it is our hope that this resource will help African-American congregations, in particular, do more to address the issue of teen pregnancy directly in the context of their rich and diverse religious beliefs.

✦ **Rates of teen pregnancy and birth in the African-American community are declining more steeply than U.S. rates overall. In fact, between 1991 and 2002, the African-American teen birth rate dropped 42 percent. Still, nearly six in ten African-American teens get pregnant at least once by age 20.** ✦

## WHY PREVENTING TEEN PREGNANCY MATTERS

Teen pregnancy affects overall child and family well-being. In fact, teen pregnancy is closely linked to a host of other critical social issues that burden the African-American community heavily, including welfare dependence, poverty, out-of-wedlock childbearing, education problems, and limited workforce readiness. Consider the following facts:

- ❖ Some 34 percent of African-American teens report they have had sex before age 15 compared to 14 percent of whites and 19 percent of Hispanics.
- ❖ Two-thirds of teen mothers never finish high school and teen fathers are far less likely to complete high school compared to those who delay childbearing until at least age 21.
- ❖ At age 27, 72 percent of African-American girls who first gave birth at age 15 or younger were living in poverty, as were 59 percent of those who first gave birth at ages 16 or 17, compared to 45 percent of those who first gave birth at ages 20-21.
- ❖ Children of teen mothers are 50 percent more likely to repeat a grade, less likely to finish high school, and have lower performance on standardized tests.
- ❖ Nearly all (96 percent) of African American teens aged 15 to 19 who gave birth were unmarried in 2001. Teen mothers who do get married are less likely to stay married than women who wait until they are older to start their families.
- ❖ Children of teen mothers are at great risk for a number of economic, social, and health problems. For example, compared to children with older mothers, they are twice as likely to be abused and neglected, 22 percent more likely to become teen mothers themselves, and 50 percent more likely to have children out-of-wedlock.
- ❖ Those who have sex at an early age are also far more likely than virgins to smoke, drink, and to use drugs. In addition, sex that begins at an early age is associated with more lifetime sexual partners and an increased risk for teen pregnancy and sexually transmitted diseases.

❖ **Teens cite morals, values, and/or religious beliefs as the factors that *most* affect their decisions about sex.** ❖



## YOU MAY BE SURPRISED TO KNOW

Many adults feel powerless to help teenagers, particularly when it comes to the difficult issues of sex, love, and relationships. Parents especially often fear they have already lost their children to the influence of friends and popular culture, and faith leaders are often hesitant to address these issues directly. When asked who most influences their decisions about sex, only six percent of teens said ministers, rabbis, or other religious leaders.

This does not mean that teens and their parents do not want faith leaders involved in this issue—just the opposite is true. Consider the following:

- ❖ An overwhelming majority of teens (72 percent) and adults (75 percent) want *more* involvement from churches and other houses of worship in teen pregnancy prevention.
- ❖ A significant percentage of Americans (39 percent) believe that religious organizations are best suited to address teen pregnancy, with African-American Protestants expressing particular confidence in the role and power of religious organizations.

*If you're a virgin, more power to you! I'm a virgin and it's not because I'm unpopular or unpretty. I just know how to put my self-respect, morals, and values before short-term satisfaction.—girl, 17*

❖ **Over 90 percent of teens and adults believe that young people should receive a strong abstinence message.** ❖





## WHAT TO DO?

**Send a clear message.** Faith leaders should not be afraid to address sex, love, and relationships directly and in the context of their specific faith traditions. If teen pregnancy is a problem in your community, it needs to be talked about openly and directly. If your local media carries a story about teen pregnancy, faith leaders should address it.

❖ **Teens want other teens to know: "You can always say 'no,' even if you've said 'yes' before."** ❖

ingly sharing messages on sex, love, and relationships from the pulpit and through youth-serving ministries and activities. Faith traditions can have a strong impact on helping teens avoid sexual activity and pregnancy before marriage, but messages need to be consistent, direct, and precise. In other words: Tell it like it is!

**Recommending no is not enough.** If you believe that young people should delay sexual activity, you need to let them know *why*. For example, make sure that young people know that abstinence is the only certain way to avoid sexually transmitted diseases and teen pregnancy. Clearly explain how sex at an early age can lead to pregnancy and parenthood, which can get in the way of future goals. Other reasons to delay sexual involvement include increased time for spiritual and emotional development and to complete education.

**Set high standards.** Working together, faith leaders, families, and communities should set high standards and expectations for teens, allowing them the opportunity to rise to the challenge.

**Help teens find answers to their questions.** It is during the teenage years that many young people first struggle with some of the most important questions of life, and the intensity and urgency of these questions can be very powerful to them. Many teens hunger for a framework of values and faith that can help them make moral decisions and manage the everyday pressures from friends that can be so stressful in these transition years. Teens want help in seeing beyond the present moment. Faith leaders, youth ministers, pastors' spouses and others are uniquely able to provide the spiritual guidance so many teenagers crave with

**Let them know where you stand.** Young people need to know and emphatically understand where your faith tradition stands on matters such as sex, abstinence, and families. Most faith traditions advocate abstinence until marriage. If yours does, say that to your youth. Faith leaders are increas-

*I don't really care what people say; right now, sex just isn't worth it.—girl, 17*

energy, conviction and commitment. For example, faith leaders can provide support to those young people who make a commitment to resist pressure and remain abstinent, understanding how hard it is in modern America to say “no” and stick to it.

✦ **Nearly two-thirds of young people aged 12–19 who have had sex wish they had waited.** ✦

**Get parents involved.** Many parents are uncomfortable talking with their children about sex. This is not unusual, but it is unfortunate since parents are children’s first and most significant teachers about values and moral expectations. The church is an ideal place to encourage parents to talk with their children about sex, love, relationships, and values, specifically, and to be closely connected with their children more generally. Use the power of the pulpit to deliver a “parent power” message or consider sponsoring workshops for parents about how to talk with their children about critical topics such as abstinence and the importance of conveying clear values and expectations.

**Get others in the faith community to help.** Teenagers develop character and personal values through interacting with respected and empathetic adults. Sometimes faith leaders themselves are available to work directly with teenagers, but often they carry so many responsibilities that they need help from others. If this is the case, ask highly trusted and knowledgeable adults in your faith community for help. Whether the adults create an organized mentoring program or something more informal, be sure they understand teenagers and can talk about values and relationships within the context of your faith’s principles.

### **L.I.S.T.E.N.**

**L**earn about the contemporary youth culture and the influence of the entertainment media. **I**nvestigate what young people are reading, and watching. Know their music and its lyrics. **S**top and observe what youth are doing and who they are doing it with. **G**et to know their friends and their friends’ parents. **T**alk to teens—they want to hear from you and it helps you better understand their concerns. **E**ncourage young people to ask questions—both at church and at home—and discuss the sexual feelings and pressures they face. **N**ever condemn adolescents for their ideas or opinions. Instead of lectures, offer young people two-way, respectful conversations and let them know you are an “askable” adult. Also, don’t be afraid to let them know what you think and why. Have a point of view.

**Give youth something to say “yes” to.** Research supports what common sense suggests—now more than ever, teens need to be involved in constructive, supervised activities. Religious communities should provide wholesome activities for youth to say “yes” to, especially when we are asking them to say “no” to

sexual activity and pregnancy. The activities that you sponsor for young people—from “rites of passage” programs to prayer circles to field trips—are all excellent opportunities for fostering fellowship and supportive friendships.

**Don't forget those young people *not* in church.** Reach out to other neighborhood teens by offering structured youth programs in your church. These young people may be seeking answers and guidance on spiritual issues and need only for someone to reach out and provide them with support. Encourage youth ministry leaders to host discussions or “speak outs” with young people on a regular basis. Add topics such as abstinence, sexual behavior, consequences, prevention, and healthy relationships as part of the curriculum.

**Celebrate achievement and excellence.** Encourage educational achievement by organizing tutoring, homework assistance, and opportunities for community service. Encourage or offer scholarships for college and vocational training.

**Celebrate spiritual and non-academic achievement as well, like volunteer work or excellence in the arts.** Consider recognition ceremonies during regular worship services or designate specific days each year to honor teenagers for their accomplishments in a wide range of areas. Give the teenagers in your faith community a place to shine—no matter what their abilities or interests.

❖ **Eight out of ten young people aged 12–19 believe that sex should only occur in a long-term, committed relationship.** ❖

**Partner with other faith communities and organizations that serve youth.** Partnerships can make a real difference in preventing teen pregnancy. Collaborate with other faith communities, churches, neighborhood organizations, and institutions such as the NAACP, National Urban League, YMCAs and YWCAs, National Coalition of 100 Black Women, Boys and Girls Clubs, Jack and Jill, fraternities and sororities, libraries, and recreation centers that work with young people. Consider coordinating with other youth ministries in your area to send a strong and consistent message about the importance of preventing teen pregnancy.

**Boredom may not be the best reason, but it is probably one of the most common reasons. . . . If towns had more things to do and places to go for teens, then I am sure that the sexual activity rates would go down.—girl, 17**

## FINALLY

As noted previously, there is much good news to report. Teen sexual activity is on the decline, as are rates of teen pregnancy and birth. The news is particularly encouraging in the African American community where rates of teen pregnancy and birth are decreasing faster than U.S. rates overall. For example, the African-American teen birth rate dropped *42 percent* (between 1991 and 2002) compared to 27 percent for the entire population.

Clearly, progress can be made on what many considered to be an “unfixable” problem. Still, despite these encouraging statistics, rates of teen pregnancy in this country remain unacceptably high — and among African-Americans, the rates are highest of all. Continued progress is unlikely if we begin to believe that the problem of teen pregnancy has been solved. Pastors, youth leaders, pastors’ spouses and other faith leaders are on the front line: **activate your church and community!**



This guide is a collaborative effort of the *National Campaign to Prevent Teen Pregnancy and the National Coalition of Pastors’ Spouses*. The National Campaign gratefully acknowledges Vivian Berryhill, President of the National Coalition of Pastors’ Spouses for making this project possible. Special thanks also to each contributor to this guide: Carolyn Beechum, Denver, CO; Freda Bush, MD, Jackson, MS; Phyllis E. Carter, Freeport, NY; Fannie Charles, Kalamazoo, MI; Arleen Divens, Greensboro, NC; Ora Easley, Nashville, TN; Bridget Plair, PhD, Starkville, MS; Dovie Ross, Washington, DC; Sylvia Stewart, DVM, Jackson, MS; Linda Vinson, Atlanta, GA; and Patricia Ware, Arlington, VA.

### About us:

The National Coalition of Pastors’ Spouses is a nonprofit, nonpartisan network of multi-denominational pastors’ spouses committed to addressing health and social disparities that disproportionately affect African American communities.

The National Campaign to Prevent Teen Pregnancy is a nonprofit, nonpartisan organization whose mission is to improve the well-being of children, youth, and families by reducing teen pregnancy.

### For more information:

For more information, please visit our websites: [www.pastorspouses.com](http://www.pastorspouses.com), or [www.teenpregnancy.org](http://www.teenpregnancy.org) or call NCPS at 866.35-GO-MRS (866.354-6677) or NCPTP at 202.478-8500. This pamphlet is based, in part, on the National Campaign publication, *Nine Tips to Help Faith Leaders and Their Communities Address Teen Pregnancy*. To read or order copies of *Nine Tips*, please go visit [www.teenpregnancy.org](http://www.teenpregnancy.org).

# Resources

**[babycanwait.com](http://babycanwait.com)**

## ***Milwaukee Sexual Health and Violence Prevention Resources***

Updated: September 2012

- For non-emergencies or for general information and referrals, call 2-1-1  
(Cell phone: 414-773-0211; Pay phone: 866-211-3380 toll free)

### **24-Hour Crisis Help Lines**

**Bureau of Milwaukee Child Welfare  
(24-hour)**  
414-220-SAFE (7233)

**Emergency Contraception Hotline**  
888-668-2528

**Gay and Lesbian National Hotline**  
888-THE-GLNH (843-4564)

**Milwaukee Women's Center Shelter and  
24-hour Crisis Line - 414-671-6140**

**Milwaukee County Psychiatric  
and Suicide Prevention Hotline**  
414-257-7222

**MPOWER: Under 21 Alcohol  
and Drug Crisis**  
866-661-6797 or  
Text: 30300  
Keyword: MPOWER

**National Domestic Violence Hotline**  
800-799-7233

**Bureau of Milwaukee Child Welfare**  
414-220-SAFE (7233)

**Domestic Violence Hotline (A program of  
Sojourner Family Peace Center)**  
414-933-2722

**Hmong Domestic Violence Helpline**  
1-877-740-4292 (Hmong Speaking)

**Safe Path (Questions about youth sexual  
violence) - 414-271-9523**

**Sexual Assault Treatment Center**  
414-219-5555

### **Shelters**

**Casa Maria**  
1131 N 21st St  
Milwaukee, WI 53233  
414- 344-5745

**The Guest House of Milwaukee**  
1216 North 13th Street  
Milwaukee, WI 53205  
345-3240  
[www.guesthouseofmilwaukee.org](http://www.guesthouseofmilwaukee.org)

**La Causa Crisis Nursery**  
522 W. Walker Street  
Milwaukee, WI  
647-5990

**Hope House**  
209 W. Orchard St.  
Milwaukee, WI 53204  
414-645-2122  
[www.hopehousemke.org](http://www.hopehousemke.org)

**Milwaukee Women's Center Shelter and  
24-hour Crisis Line**  
728 North James Lovell Street  
Milwaukee, WI 53233  
414-671-6140 | [www.mwcinc.org](http://www.mwcinc.org)

**Milwaukee Rescue Mission**

830 North 19th Street  
Milwaukee, WI 53233  
414-344-2211

**SafePath Youth Sexual Abuse Hotline  
& Pathfinders Youth Shelter**

Kids Matter Inc  
1850 N. Dr. Martin Luther King Drive Suite  
202, Milwaukee, WI 53212  
414-271-9523 or 866-212-SAFE (7233) or  
414-271-1560

**Salvation Army**

1730 N 7th St  
Milwaukee, WI 53205  
414-265-6360 [www.usc.salvationarmy.org](http://www.usc.salvationarmy.org)

**Sojourner Family Peace Center**

414-933-2722 (24-hour)  
[www.familypeacecenter.org](http://www.familypeacecenter.org)  
Offers support groups, emergency shelter  
from domestic violence, case management,  
and court advocacy

**Walkers Point Youth and Family Center**

414-647-8200  
<http://walkerspoint.org>

***Adolescents***

**Pathfinders (Programs for Youth: Hand-  
in-Hand for Survivors and Step 5 for  
offenders)**

4200 North Holton Street - Suite 400  
Milwaukee, WI 53212  
414-964-2565  
<http://pathfindersmke.org/hand-in-hand>

**Project Q**

Contact information: 414-223-3220

**The Teen Clinic at Sixteenth Street  
Medical Center**

414-672-1353 ext 3011

**New Concept for Self Development Center**

1531 W Vliet St  
Milwaukee, WI 53205  
414-444-1952 | <http://ncsdc-inc.org>

**Mobile Urgent Treatment Team  
(mobile crisis team for teens)**

414-257-7621

**Wraparound Milwaukee**

9201 W Watertown Plank Rd  
Milwaukee, WI 53226  
414-257-7611

**Sojourner Family Peace Center (teen  
support)**

Germania Building  
135 W. Wells St., 4th Floor  
Milwaukee, WI 53203  
414-933-2722 [www.familypeacecenter.org](http://www.familypeacecenter.org)

***Child Abuse and Neglect***

**Bureau of Milwaukee Child Welfare**

414-220-SAFE  
[www.dcf.wisconsin.gov/bmcw](http://www.dcf.wisconsin.gov/bmcw)

**Children's Hospital of Wisconsin**

9000 W. Wisconsin Avenue  
Wauwatosa, WI 53226  
Urgent Care 266-2280  
Child Protection Center 277-8980  
[www.chw.org](http://www.chw.org)

**La Causa Family Resource Center  
(Emergency respite care)**

Call for program locations  
414-647-8750 | [www.lacausa.org](http://www.lacausa.org)

**Milwaukee County Children's Court Center**

10201 W Watertown Plank Road, Milwaukee,  
WI 53226  
414-257-7710 | [www.wicourts.gov](http://www.wicourts.gov)

**The Parenting Network**

7516 W. Burleigh St.  
Milwaukee, WI 53210  
414-671-5575  
[www.theparentingnetwork.org](http://www.theparentingnetwork.org)



**Parent Helpline**

7516 W Burleigh St.  
Milwaukee, WI 53210  
414-671-0566  
<http://www.theparentingnetwork.org/programs-and-services/parent-helpline>

***Counseling/ Support***

**American Indian Task Force on Domestic Violence and Sexual Assault**  
414-690-5254

**Asha Family Services**

3719 W Center St.  
Milwaukee, WI 53210  
414-875-1511 [www.ashafamilyservices.com](http://www.ashafamilyservices.com)

**Aurora Family Service of Milwaukee**

3200 W. Highland Blvd.  
Milwaukee, WI 53208  
414-342-4560  
[www.aurorahealthcare.org](http://www.aurorahealthcare.org)

**Beacon Support Group  
(Victims of Sexual Assault)**

414-282-4414

**Catholic Charities**

1919 N 60th St.  
Milwaukee, WI 53208  
414-771-2881  
[www.catholiccharitiesusa.org/](http://www.catholiccharitiesusa.org/)

**The Healing Center**

611 W. National Ave., 4<sup>th</sup> Floor  
Milwaukee, WI 53204  
414-671-HEAL (4325)  
[www.thehealingcenter.org](http://www.thehealingcenter.org)

**Independence First**

540 South 1st Street  
Milwaukee, WI 53204  
414-291-7520 [www.independencefirst.org](http://www.independencefirst.org)

**Jewish Family Services**

1300 N. Jackson St.  
Milwaukee, WI 53202  
414-390-5800 | [www.jfsmilw.org](http://www.jfsmilw.org)

**Latina Resource Center (UMOS)**

802 W. Mitchell St  
Milwaukee, WI 53204  
414-389-6500 | [www.umos.org](http://www.umos.org)

**Lutheran Social Services**

Call for program locations.  
414-671-5920 | [www.lsswis.org](http://www.lsswis.org)

**Milwaukee LGBT Community Center**

315 W. Court St., Suite 101  
Milwaukee, WI 53212  
414-292-3069 | [www.mkelgbt.org](http://www.mkelgbt.org)

**Milwaukee Women's Center**

728 North James Lovell Street  
Milwaukee, WI 53233  
414-449-4777 | [www.mwcinc.org](http://www.mwcinc.org)

**Aurora Health Care:**

Behavioral Health: Child & Adolescent Services  
Call for service locations.  
Confidential assessment, 24-hours a day  
414-454-6646  
Intake Services Department/information  
414-454-6777

**Heartlove Place Ministries**

3229 N. Martin Luther King Dr.  
Milwaukee, WI 53212  
414-372-1550 | [www.heartloveplace.org](http://www.heartloveplace.org)

**HOPE Network**

Call for program locations  
262-251-7333  
[www.hopenetworkinc.org](http://www.hopenetworkinc.org)

**COA Youth & Family Center**

909 E. North Ave.  
Milwaukee, WI 53212  
414-263-8383 | [www.coa-yfc.org](http://www.coa-yfc.org)



**Columbia St. Mary's: Blanket of Love**

Ebenezer Church of God in Christ  
3132 N. Martin Luther King Jr. Dr.  
Milwaukee, WI 53204  
Contact Julie Means for more information:  
414-840-8893  
[http://www.columbia-stmarys.org/Blanket\\_of\\_Love](http://www.columbia-stmarys.org/Blanket_of_Love)

**Northcott Neighborhood House**

2460 N Sixth St.  
Milwaukee, WI 53212  
414-372-3770  
[www.northcotthouse.org](http://www.northcotthouse.org)

**Project Ujima: Victim Assistance Program**

(In collaboration with CSSW, CHW, and the  
Medical College of Wisconsin)  
620 S. 76<sup>th</sup> St., Milwaukee, WI 53214  
414-266-2557 | [www.cssw.org](http://www.cssw.org)

***Legal***

**District Attorneys Office**

Sensitive Crimes Unit: 414-278-5019  
Victim Services: 414-278-4617  
[www.milwaukeecounty.org](http://www.milwaukeecounty.org)

**Sojourner Family Peace Center  
Restraining Order Clinic**

Milwaukee County Courthouse  
901 North 9th Street, Room 711  
Milwaukee, WI 53233  
414-278-5079 [www.familypeacecenter.org](http://www.familypeacecenter.org)

**Centro Legal**

614 W. National Ave., 2<sup>nd</sup> Floor  
Milwaukee, WI 53204  
4140384-7900  
[www.centrolegalwisconsin.org](http://www.centrolegalwisconsin.org)

**Child Support Enforcement**

John P. Hayes Center  
901 North 9th Street Courthouse, Room 101  
Milwaukee, WI 53233  
414-278-5160  
<http://county.milwaukee.gov/ChildSupportEnforcem7706.htm>

**Divorce Pro Se, Inc.**

5032 W. Forest Home Ave.,  
Milwaukee, Wisconsin 53219  
414-350-0091  
[www.wisconsin-divorceprose.com](http://www.wisconsin-divorceprose.com)

**Domestic Violence Advocates**

District Attorney's office  
949 N. 9<sup>th</sup> St. Room 110,  
Milwaukee, WI  
414-278-4978

**Milwaukee Bar Association, Inc.**

424 East Wells Street  
Milwaukee, WI 53202  
414-274-6760 | [www.milwbar.org](http://www.milwbar.org)

**Legal Action of Wisconsin (Low income legal services)**

230 W Wells Street  
Milwaukee, WI 53203  
414-278-7722 (Local)  
888-278-0633 (Toll free)  
[www.legalaction.org](http://www.legalaction.org)

**Milwaukee County Jail**

949 N 9th St  
Milwaukee, WI 53233  
414-226-7070

**Probation & Parole Division- Wisconsin Department of Corrections, Community Corrections**

4160 N. Port Washington Road  
Milwaukee, WI 53212  
414-229-0600

**Public Defender**

819 N 6th St. Room 908  
Milwaukee, WI 53203  
414-227-4130 | <http://wisspd.org/>

***Medical***

**Agape Community Center**

6100 N 42nd St  
Milwaukee, WI 53209  
414-464-4440  
<http://agape-center.org/>

**AIDS Resource Center of Wisconsin (ARCW)**

820 N. Plankinton Ave  
Milwaukee, WI 53203  
414-273-1991 ext. 1608  
<http://arcw.org/>

**Badgercare Member Services**

member services at 1-800-362-3002  
or email at  
[vedsrecipientservices@wisconsin.gov](mailto:vedsrecipientservices@wisconsin.gov)

**Children's Hospital of Wisconsin- Urgent Care**

Children's Hospital Clinics Building 2nd Floor  
9000 W. Wisconsin Ave.  
Milwaukee, WI  
414-266-2280

**Child Protection Center**

1020 N 12th St  
Milwaukee, WI 53233  
414- 277-8980

**City of Milwaukee Health Department**

Zeidler Municipal Building  
841 N. Broadway  
Milwaukee, WI  
414-286-3521

**Community Advocates**

Milwaukee Women's Center  
4906 W. Fond du Lac Ave.  
Milwaukee, WI 53216  
414-449-4777  
<http://mwcinc.org>  
[www.communityadvocates.net](http://www.communityadvocates.net)

**Gerald Ignace Indian Health Center**

1711 South 11th Street  
Milwaukee, WI 53204  
414-383-9526 | <http://gliihc.net>

**House of Peace Community Center**

1702 W. Walnut Street  
Milwaukee, WI 53205  
414-933-1300  
[www.houseofpeacemilwaukee.org](http://www.houseofpeacemilwaukee.org)

**Health Care for Homeless**

210 W Capitol Dr, Stop 2  
Milwaukee, WI 53212  
414-906-5306 | <http://hchm.com>

**Hispanic Medical Center**

3527 W National Ave  
Milwaukee, WI 53215  
414-384-8930

**Marquette Clinic for Women and Children**

1821 N. 16th St.  
Milwaukee, WI  
414-755-6970  
<http://www.marquette.edu/nursing/clinic-for-women-and-children>

**Milwaukee Health Services**

2555 N. Dr. Martin L. King Dr  
Milwaukee, WI 53212  
414-372-8080 | [www.mhcsi.org](http://www.mhcsi.org)

**Planned Parenthood of Wisconsin, Inc. (PPWI)**

302 N. Jackson Street  
Milwaukee, WI 53202  
414-271-8045  
<http://www.plannedparenthood.org/wisconsin>

**Sexual Assault Treatment Center (24-hours)**

Aurora Sinai Medical Center  
945 N. 12<sup>th</sup> St. Milwaukee, WI 53233  
OR  
Aurora West Allis Medical Center, 8901 W. Lincoln Ave. West Allis, WI 53227  
414-219-5555 (for either location)  
<http://www.aurorahealthcare.org/services/sexual-assault/index.asp>

**Sixteenth Street Community Center**

1032 S Cesar E Chavez Dr # 219  
Milwaukee, WI 53204  
414-672-1353  
Open 8am-5pm by appointment

**St. Bens Health Clinic**

1027 N. 9th St.  
Milwaukee, WI 53212  
414-765-0606  
[http://www.columbia-stmarys.org/St\\_Bens\\_Clinic](http://www.columbia-stmarys.org/St_Bens_Clinic)

**Jewish Family Services**

Helping Offenders Process Emotions  
(H.O.P.E.)  
1300 N. Jackson Street, Milwaukee, WI 53202  
414-390-5800

**Progressive Community Health Centers**

4738 W. Lisbon Ave  
Milwaukee, WI 53208  
414-934-9463

***Services for abusers***

**Alma Center, Inc.**

3628 W Wright St.  
Milwaukee, WI  
414-265-0100 | [www.almacenter.org](http://www.almacenter.org)

**Beyond Abuse**

414-276-1911  
<http://www.familypeacecenter.org/programs-and-services/for-offenders/batterers-intervention.htm>

**Pathfinders (Step 5: Problem Sexual Behavior Treatment & Prevention)**

414-964-2565 [www.pathfindersmke.org](http://www.pathfindersmke.org)

**HOPE Network**

Call for program locations  
262-251-7333 | <http://hopenetworkinc.org>

**Nevermore (A program of Community Advocates Women's Center)**

414-828-5190  
[www.mwcinc.org/whatwedo/batterers.php](http://www.mwcinc.org/whatwedo/batterers.php)

**Parent Helpline**

7516 W. Burleigh St.  
Milwaukee, WI  
414-671-0566

**The Parenting Network**

7616 W Burleigh St  
Milwaukee, WI 53222  
414-671-5575  
[www.theparentingnetwork.org](http://www.theparentingnetwork.org)







# SHE SHOULD BE SLEEPING WITH A STUFFED ANIMAL NOT A REAL ONE.



She thinks it's love. He has other ideas.  
Talk to your kids about healthy  
relationships. Before it's too late.

[BABYCANWAIT.COM](http://BABYCANWAIT.COM)

225 West Vine Street  
Milwaukee, WI 53212  
414.263.8100  
[UnitedWayMilwaukee.org](http://UnitedWayMilwaukee.org)



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