

# SEXUAL DEVELOPMENT

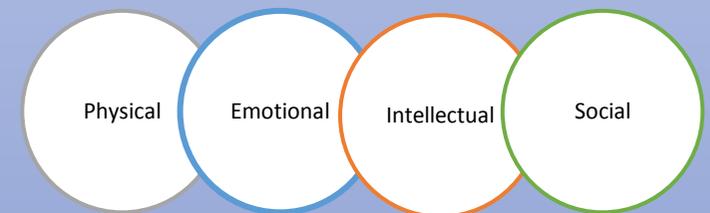
The follow information is meant to help parents to better support children and adolescents on their journey to becoming healthy adults. While the information provides a general guideline for each stage of sexual development, parents must remember that not all children experience this in the same way, i.e. age for onset of puberty differs.

Developmental stage	Developmental Tasks	What's going on and Responses
Ages 0-1 babies <b>Discovering</b>	Basic trust Attention Soothing themselves	<b>WHAT'S GOING ON:</b> Sexual development begins at birth. Babies learn through their senses: touching, listening, tasting, looking, and smelling. Genital erection common in boys. Handles genitals when clothes are off. <b>RESPONSES:</b> Build trust, listen to baby's feelings, treat your baby with kindness and provide caring touches. Naming body parts. Model healthy relationships in the home.
Ages 2-3 toddler <b>Exploring</b>	Early Autonomy Exploration Self-Control	<b>WHAT'S GOING ON:</b> Toddlers become aware of themselves and their bodies. Gender identity develops ("I am a boy" or "I am a girl"). Interested in theirs and other peoples' bodies. Body exploration with peers is common (e.g. playing doctor). Start to learn social norms, the "do's and don'ts". They may touch their genitals for pleasure. <b>RESPONSE:</b> Don't over react, teach about privacy. Teach simple self-care tasks such as washing hands and brushing teeth. Teach boundaries. They still need physical contact (cuddles).
Ages 4-6-years-old <b>Learning rules, playing, and initiating friendships</b>	Initiative Testing limits Gaining competence	<b>WHAT'S GOING ON:</b> Children increasing learn how they "should" behave ( <b>social rules</b> ) discovering their boundaries. They learn adults disapprove if they expose themselves in public. Mild sex play or exhibitionism, "mummies and daddies". May show curiosity in regard to adult bodies, e.g. touching women's breasts. Deeper understanding of gender roles (girls wear dresses). May ask questions about sexuality or reproduction, such as, "Where babies come from?" <b>RESPONSE:</b> Provide simple information, e.g. babies grow in a uterus. Explain about privacy and the difference between wanted and unwanted touches. Help child understand about boundaries. Answer questions simply and truthfully. Create a home were child feels free to ask about their bodies, health, and sexuality.
Ages 7-9 -years-old <b>Shame</b>	Absorbing learning Socialization Reality vs fantasy	<b>WHAT'S GOING ON:</b> Becomes more introverted and prudish. Sexuality is dormant, and their moral development fosters a growing sense of shame about their sexuality. May have noticed that sex is a "loaded" topic, and ask fewer questions about sex. Boys' and girls' groups are formed, "sounding out" the others. May tell one another sexual jokes. Often, they do not understand what they are saying. May talk about sex information with same sex friends. The first feelings of being in love may also be experienced at this age. Children fantasise a lot and reality often get mixed up. <b>RESPONSE:</b> Look for teachable moments, share what you believe in. Give truthful information about physical changes, talk about feelings, relationships and how they affect other people. Be approachable.

## Sexual Learning and Development

In everyday life children learn about Relationships and sexuality. A child's curiosity is a key aspect in this process. Children have a natural desire to learn about their bodies, their emotions and those of other people.

Parents responsibility includes providing information and guidance to feel good about themselves. **Good parenting includes:** Accepting the role of supporting your childs understanding of sex and sexuality. Remember, you don't need to be an expert, but **become informed**. You need to provide accurate, factual, age appropriate information as needed. Accept that it may be awkward and embarrassing at times. Its get easier. Talk about feelings, relationships and how other people can be affected. Answer questions directly, honestly, and without judgement. **Listen, provide opportunity for your teen to voice their thoughts and feelings.**



**SEXUAL HEALTH** "is the integration of the physical, emotional, intellectual and social aspects of sexual being, in ways that are enriching and that enhance personality, communication and love"

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## A CONTINUUM OF SEXUAL BEHAVIOUR

**NORMAL:** Developmentally expected; Socially acceptable; Consensual, mutual, and reciprocal; Shared decision

**INAPPROPRIATE:** Single instances of inappropriate sexual behaviour, Socially acceptable behaviour within peer group, Generally consensual and reciprocal

**PROBLEMATIC:** Problematic and concerning behaviours; Developmentally unusual and socially unexpected; No overt elements of victimisation; Consent issues may be unclear; Lack reciprocity/power; shows compulsivity

**ABUSIVE:** Victimising intent/outcome; misuse of power; coercion & force to ensure victim compliance; intrusive; informed consent lacking; elements of violence

**VIOLENT:** Physically sexual abuse; highly intrusive; instrumental violence which is physiologically, sexually arousing to the perpetrator

Developmental Stage	Developmental tasks	What's going on and Responses
Ages 10-14-years old <b>Early adolescence</b>	Rapid physical growth Body image Gender differences Self-Concept Peer Pressure	<b>WHAT'S GOING ON:</b> Physical changes occur. This is also a time of emotional and relationship development. The adolescent has an increase need for independence. More critical of adults. Sensitive to criticism. Greater interest in sexuality – may experience sexual fantasies. Increase need for privacy. May masturbate. Concerned about being “normal”. May have sexual attraction or experience with someone of the same sex. This is not necessarily an indication of a same-sex orientation, but could be. Interacting with peers is very important. <b>RESPONSES:</b> Parents should continue to provide facts, talk about feelings, relationships and promote teens ability to take responsibility for their actions. Highlight the diversity in personal traits, positive messages about body image and self-acceptance. Talk about the continuum of intimate behaviours from holding hands, hugs, and kissing to intercourse. Share your family values about age appropriate behaviour. Help teen to separate fact from fiction in media, such as pornography. Ask questions and most importantly, listen.
Ages 15-17-years old <b>Middle adolescents</b>	Rebellion Sexuality Parent conflict Morals	<b>WHAT'S GOING ON:</b> Continued physical, social, and emotional change. Explores independence and personal identity. Tries out different clothes, friends, and interests. Peers remain important. Separation from parents and caregiver's is normal. Increased concern in being seen as physically and sexually attractive. Emerging sex drive. Homosexuals understand their sexuality. The management of sexual intimacies is very important. <b>RESPONSES:</b> Accurate information is vital regarding relationships, personal boundaries, consent, body image, sexual orientation, gender identity, contraception's, intercourse, pregnancy, and STI's. Communicate your expectations your teen will act responsibly. The message is that sexuality has consequences. Talk about the continuum of intimate behaviours from holding hands, hugs, and kisses to intercourse. Share family values about age appropriate sexual behaviour. Make sure your teen knows where they can access credible information and/or medical help if needed.
Ages 18-21-years old <b>Late adolescence</b>	Identity Autonomy Values Leaving home	<b>WHAT'S GOING ON:</b> Physical and reproductive changes are slowing down. Youth is becoming a young adult, often with a romantic and sexual relationships. Formation of clear sexual identity. Sexual activity is common. Romantic relationships are typically of high importance. The young adult begins to balance their independence with family and friends. Exploration of identity continue, although decisions and values are based more on their own beliefs and less on those of peers. Thinks more about the future. <b>RESPONSES:</b> Continue to provide information and about rights and responsibilities in relationships. Intervening and providing guidance when characteristics of unhealthy relationships and/or sexual violence occur. Encourage them to be positive role models among their peers. Refer youth to resources for sexual health care when needed. Discuss using condoms, as well as other methods to protect against both STIS and unplanned pregnancies. Parents should continue to share the family's values about sexuality and be sure to ask your children about their developing values. Keep the lines of communication open. Avoid being judgemental.