Background and how we involved young people

What we found out:
A. Core Group

B. Young Refugees

C. Mum & Baby Group

D. Young People in Secure Care

Co-designed resources

Feedback so far

Roll the credits
BACKGROUND AND HOW WE INVOLVED YOUNG PEOPLE

The Sexual Health and Healthy Relationships Project ran from January – November 2022 and brought together 32 passionate Care Experienced people to co-design refreshed workforce guidance for NHS Greater Glasgow and Clyde (NHS GGC) Health Board on sexual health and healthy relationships.

In 2021, 55 Care Experienced people including Who Cares? Scotland members shared their views on sexual and reproductive health as part of our Annual Participation Programme 2021-22 (see the report here). We were told how they learn, that they want autonomy in making decisions about sexual health, and that they wanted services to stop stigmatising Care Experienced individuals for being Care Experienced, or for other parts of their identity. Our National Representative Body shaped recommendations for change, including on:

- Supporting carers and families
- Bridging the generational gap in kinship care
- Training the workforce
- Honest and open conversations with carers and families
- Accessibility of confidential resources and services
- Understanding care experience and harmful prejudices
In 2022, Who Cares? Scotland has worked with Corporate Parent NHS Greater Glasgow and Clyde (NHS GGC) Health Board to involve Care Experienced young people in co-designing refreshed workforce guidance about relationships and sexual health, taking into account the views gathered in 2021.

32 young people aged 13-26 living in the Glasgow area took part in this project over 25 meetings. They had varying experiences of care including Foster Care, Secure Care, Residential Care, Kinship Care and having a Social Worker at home. We met as a group in the National Office, and adapted the project to ensure we heard from more seldom-heard groups, including:

- Young refugees with the Scottish Guardianship Service
- Our Glasgow Mum and baby group
- Young people at the Good Shepherd secure care centre

The groups spent time building relationships and creating group agreements, reviewing the existing guidance and sharing experiences around conversations on sexual health and relationships. They then chose what resources they wanted to develop alongside workforce and carer feedback, designed and created a suite of resources. These will be built into an NHS GGC interactive toolkit for the workforce and carers to use with young people to support these conversations.

This project helps to uphold Care Experienced people’s rights to life, health, education, privacy, to be free from torture and discrimination.
Our members said they wanted:
“to be a part of the journey to help make things easier and better for young people and adults.”

Our core group of members meeting in the national office told us that due to living with older relatives or support workers, they did not get the chance to have open and honest conversations. They also told us that at school, they were not always able to attend important classes discussing the topic.

The important topics identified early in the project were:

- Understanding my body (looking at periods, discharge, better period education):
  “Girls only got taught about periods, and not in enough detail, just very limited detail. They should tell you about PMS, and how significantly your mood might be affected (and when it is out with this). Boys should get the period talk too!”

- Bodily autonomy – knowing appropriate touch from others:
  “being able to say ‘I don’t like that’ and ‘no means no’ no one ever tells you about that in care.”

- Understanding sexual urges, having curiosity and exploring my own body/masturbation:
  “Everyone should be taught about that, it’s not a shameful thing. Maybe if you grow up with your own family you have casual conversations about that, but not us.”
As the project advanced, the women thought more deeply about these topics and wanted to highlight that Care Experienced people need to learn about these Top 10 topics:

1. Healthy Relationships
2. Grooming
3. Boundaries
4. Puberty
5. Body Positivity
6. Masturbation (especially girls)
7. Pornography is unrealistic
8. Consent
9. Inappropriate touch
10. Knowing yourself
Throughout the discussion around these topics, we were told that Care Experienced children and young people should have age-appropriate and supportive conversations around early years trauma and the link that this may have with a need for love. They thought it was important to teach young people to sit with their emotions, and they should be supported to consider whether a person or a relationship fills a need for them, or if it is a distraction:

“Thinking about ‘is this something I am craving vs. is this something that is good for me?’ Like looking for sexual intimacy but then feeling empty/not feeling good afterwards.”

The women taking part agreed that this needs nurture to overcome, and that relationships are the baseline for this. This led on to conversations around ‘how can workers and carers create the conditions to enable these conversations to be held?’ There was lots of advice created, focusing around being honest, being non-judgemental, being genuine and being a good listener:
It was considered really important to be relatable, share a little of your own story and show you are human. Within this, it is important to not take things too seriously and have a bit of a laugh around the topic. One member reflected that when she lived with her Grandmother, things were easier due to her relationship: “Making jokes made it easier, but you need to have the relationship for that.”

It was suggested that if workers don’t feel comfortable with sharing, “if you are not the right person for the conversation then own it, don’t pretend you are (we pick up when you are uncomfortable!). If you can’t facilitate an open and honest conversation, then find someone else.” Similarly, the group felt it was important for workers to know that if you don’t want to share your own story, “talk about a friend, a sister, your younger self. Just make it relatable.”

Another important piece of advice we want to incorporate into the guidance is that, “workers and carers should have a conversation, and then follow up with a WhatsApp, with a link to a useful page, for example something about STDs or about Red Flags. Young people more likely to sit and have a look on their phone rather than talk about it for ages.”
To capture all this fantastic advice, and the understanding behind it, the group wanted to create different resources, for example (see here):

- 'How do you know?' interactive poster - An interactive design letting workers and carers know how they can convey all the values and ways of being that Care Experienced People need.
- Recs from a Friend poster: A signposting page with the websites, Instagram pages and support that the Core Group have identified as useful.
- ‘Red flag green flag’ conversation starter video: A resource with ‘pause points’ for discussion, to allow workers and carers to open up discussions around healthy relationships.
Our members said: “I liked learning as well as telling you what I think”, as well as “I wanted to make it very clear to the people who have never had any experiences about it.”

The young men we spoke to told us that they had not learnt about sexual health and relationships in their country of origin. They would be considered rude and disrespectful if they were to bring up the topic with teachers or family members. When asked who they would talk to about these topics, there was very few people they would feel comfortable doing this with, but they gave examples of friends, siblings or girlfriend.

The young men noted that in their culture, it would be typical for boys to talk to the father figure and girls the mother – but they both noted that this could be awkward, and they would be too shy.
“You would never talk about this to anyone, you would be kicked out of class if you asked a teacher. It is disrespectful to talk about sex in our country.”

“You would only talk about this when you were getting married and only with your elder brother, or maybe your cousin or an uncle.”

“There is no freedom to talk about sex or even relationships”

We recognised that because the young people had not had the chance to talk about, ask about or learn about sexual health and relationships, we would create resources around what they wanted to know, and how they would like to learn.

The most important topic was 'sex and the law' and “the rules and the laws in this country, so we don’t get in to trouble.”

Religion and cultural differences was also a common topic that the boys would like to explore with their carers or professionals supporting them; “we would never learn about that in our country, but it is important that we know here.” “LGBT ... in our country, it is prohibited. People are aggressive when you say that here.”
Workers and carers should also be able to talk to unaccompanied asylum-seeking young people about accessing services – “We don’t know where to go” – and what that looks like in Scotland.

The young people spent one of our sessions thinking about what they would need for someone who was hoping to explore this topic with them. There was a very common feeling amongst the boys that relationships are important, that they want someone to “take time to get to know me before talking about this stuff. It is very strange for me.” Everyone agreed this was the most important thing.

The boys had mixed views about whether they should learn in school, with all genders sharing the same class, or not. They decided that the best bit of advice they could give around that was “find out what I am comfortable with.”

The below poster shows the main pieces of advice that they think workers and carers should know:
After spending the last two sessions reviewing all the wonderful experiences, insight, and advice they shared, the young people had to decide on how to share this with the workers and carers who may access the Online Toolkit.

They did not want to make videos as they did not want to be on camera but agreed to recording audio clips. The young men wanted to make use of the Interpreter in these audio clips, so young people like them may hear someone talking about this in their own language, Farsi. The final session was spent learning about textual, environmental and contextual animation, and the young men shaped the following resources (see here):

- ‘Advice for Carers and Worker’s podcast series (3 episodes) with animations in English, with Farsi voice recordings.
- ‘Young refugees' advice for carers’. animated video in Farsi and English
- 'Important topics' for young refugees poster.
Our members said: “Everybody needs to stop pretending teenagers don’t have sex” and “For Care Experienced people, we search for romantic relationships, dependency. We want to fit in.”

The young women told us that they learned about sexual health and healthy relationships at school, the Sandyford and online. Many of the women commented that they went to Religious Schools and had very little education around safe sex and sexual health.

“At the mosque you’re celebrated for having kids but they don’t talk about the process.”

“Mum signed form so I would be excluded from sex education because I’m Muslim.”

“My guidance counsellor was a priest so I couldn’t talk to him about sex!”

In terms of learning in care, the experiences were mixed, some felt they could talk to workers in their residential home, and some feeling they couldn’t talk about it without being shamed.

“[I was] scared to ask as might be told it’s inappropriate. Aware they would only signpost anyway.”
“Staff were supportive and would give out condoms and pregnancy tests – they worried a lot but they supported you.”

We did a little digging and found out more about these experiences over the next few sessions, where we found out that all of the women had the same feelings around not being taught enough, and not finding out what would have been helpful for them:

“I think that schools don’t elaborate enough on stuff, like they just do the shortest input and don’t go on to detail about all other kinds of stuff, like they don’t really talk about what STDs are like, they don’t talk about what to do when you get it.”

We talked about how it felt to learn about these topics:

“I remember in hospital I was struggling with breast feeding and this woman came in with this fake doll trying to show me how to breast feed – it was humiliating and you are so vulnerable then. The baby had an eye missing and was so creepy I was like get that away from me! I’m not stupid it was just taking me some time.”

“Awkward and icky in School”

“Bonding with pals. Less embarrassed with them.”
As well as looking at what the learning experience should be like:

“Sex and relationships should be spoken about a lot more in home environments, groups, schools – that way people that go to religious schools might still learn!”

“School is the best place to learn but it shouldn’t just be one class, they should teach you about everything!”

“You need friendly staff, friendly pharmacist workers, who don’t judge you, speak kindly and offer space for you to talk about things. It shouldn’t be that you are forced to speak with a man or anyone you don’t feel comfortable with.”
We used these discussions to start thinking about how it should feel for Care Experienced children and young people to learn about relationships and sexual health. We thought about how workers should act, what the relationship should be like, what knowledge they should have and what steps they should take to support you:
“Find the right time and place. Not during dinner.”

“Couldn’t stay where I was after 7 months pregnant... I was scared I would be moved out so hid my pregnancy as long as possible.”

“Don’t say ‘I was like you when I was young’ – judgemental! Talking about regret.”

“Need worker to be there consistent ... be there.”

“I got slut-shamed when I asked for my pregnancy test – ‘close your legs!’”

“Somebody who knows me as trust is important”

“Conversations with workers should be easy and you should feel comfortable to reach out and have those conversations”

“Have the conversations. Don’t just send you off with leaflets!”
There were some common themes arising with the group:

Shame

“Asked me if I was seeing anyone then never bothered again – apart from to slut shame me when I needed a pregnancy test.” Discussion around they should have been teaching about healthy relationships at this point, using natural moments for conversation to do this.

Judgement

“They asked if I was ever in care or had a social worker. I was like ‘Why do they need to know that? What are they going to do with that? … They put me in the same category as people who have had their kids taken away or people who have had kids that have died suspiciously – just because I had a social worker!”

Support

“Healthy relationships and boundary setting. We need to teach about the importance of setting boundaries and being assertive enough to set them and keep them.”

“We are supposed to have one constant person but that never happens. I don’t even have my midwife’s number, I go through the hospital, so it’s triple digits the number of times I try to get through.” “It comes down to relationships. It’s not hard, put more into building relationships.”
The group came up with some advice for workers and carers in NHS Greater Glasgow and Clyde Health Board area, encompassing everything we talked about throughout the project:

- Everybody needs to stop pretending teenagers don’t have sex.
  - “A good worker is... Somebody who knows me as trust is important”
  - “Conversations with workers should be easy and you should feel comfortable to reach out and have those conversations”
  - “Have the conversations. Don’t just send you off with leaflets!”
  - “Don’t say ‘I was like you when I was young’ – judgemental! Talking about regret”
  - “Need worker to be there consistent ... be there.”

- For care experienced people, we search for romantic relationships, dependency. We want to fit in.

- Children’s Homes were actually more helpful about STIs - at least they would talk about it with us

- BUT choose the right time - not at the dinner table!

- DON’T shame or embarrass young people, it’s hard to open up and the way you react could change everything

- You should be able to request women workers.

- You should be offered some advice in lots of places, not just in school – like the doctor?

- After school clubs and other groups could do little inputs on it.

- Maybe in schools professionals could come in so its not pure embarrassing for the teacher.

- Teach us that it’s normal to have sexual urges, it’s normal to have sex and that everyone goes through things differently.

- Sex and relationships should be spoken about a lot more in home environments, groups, schools - that way people that go to religious schools might still learn!

- School is the best place to learn but it shouldn’t just be one class, they should teach you about everything!

- You need friendly staff, friendly pharmacist workers, who don’t judge you, speak kindly and offer space for you to talk about things. It shouldn’t be that you are forced to speak with a man or anyone you don’t feel comfortable with.
**WHAT WE FOUND OUT**

**MUM & BABY GROUP**

Using the group’s views, some members of the mum and baby group volunteered to develop the following resources: videos on 'what advice would you give' and 'body confidence'.

**YOUNG PEOPLE IN SECURE CARE**

All the young people who took part were all living in the Good Shepherd Centre at some point during the project, from May - November. We met six times with 1-4 classes per session.

The young people said: “It’s important for us, to keep us safe” and “it’s awkward to talk about this stuff.”

They had mostly learned about sexual health and healthy relationships through experience or online. Many of the young people told us they missed out on learning in school because they were not always there, and when they were, they often missed this class. Some spoke about being removed from class because they found it hard to sit down and take seriously:

“Would rather learn from google and their own research than ask a teacher or member of staff.”

“How can they put us in a class about this and expect us not to laugh?”
The young people told us how they wanted to learn:

“If you got to an appointment from residential they go ‘here’s another one’, like they just expect it. Like ‘let me guess, the morning after pill.’ It’s so rude.”
Young people also started to think about the important topics for them, what they think was important for Care Experienced children and young people to learn, some examples are below:

The top topics were:

**Healthy relationships** - “That attention doesn’t necessarily mean a healthy relationship”, “I always think someone wants something from me if they are nice.”

**Relationships in placements** - “Staff shut down my relationship and moved me completely – we are human.”

**Sexual Assault, Grooming and Exploitation:** “We should be taught about consent and inappropriate touching from a young age”; “Sometimes you don’t realise something is wrong.”

**Consent:** “Should be taught about, like if it’s okay for someone to touch you”; “It’s okay to say no”; “I didn’t know how to say no, I was brought up that if I said no I would get battered.”
The below picture shows emojis of how it felt to learn about a topic, in this case consent, and the young people told us what advice they would give to workers talking about this (written around the emojis).

Using all the experiences and advice the young people shared in previous sessions, we then moved on to create our ‘Important Advice’, where all the young people across the sessions told us what they think is some of the critical advice for workers, carers and supporters to keep in mind when it comes to talking about Relationships and Sexual Health. The young people agreed that these could be grouped in to four headings: “How to Be”, “Show Respect”, “Don’t Judge” and “Offer Support”.
WHAT WE FOUND OUT

YOUNG PEOPLE IN SECURE CARE

Most of the young people who shared this advice then moved on from the Good Shepherd, and most of the young people who had since moved in did not feel comfortable in using this advice to create an interactive resource for the Toolkit. However, one young person learned about textual, environmental and contextual animation with us and helped to shape the animation we developed with the young people’s advice:

- 'Young people in secure care's advice' animated video
CO-DESIGNED RESOURCES

The following resources (available [here](#)) were co-designed by the young people who took part in this project, and are to be used by the families, carers and the workforce in the NHS GGC area, with young people to support conversations about sexual health and healthy relationships.

- **Sexual Health & Relationships resources teaser video**
- **Rec's from a friend poster** – a resource with useful links to find out more info
- **For families/carers/workers to discuss with young people how they should be when talking about these topics:**
  - 'How do you know?' interactive poster
  - 'How an adult should be' interactive poster
- **'Red flag green flag' conversation starter video**
- **'Advice for Carers and Worker’s podcast series (3 episodes) with animations in English, with Farsi voice recordings**
- **'Young refugees' advice for carers’ animated video in Farsi and English**
- **'Important topics' for young refugees poster**
- **Mum & Baby group’s videos on 'What advice would you give?' and 'Body Confidence'**
- **'Young people in secure care's advice' animated video**
- **Reflective vlog on the project findings by Jo McLeod**

If you require any of these resources in an alternative format, please contact: [comms@whocaresscotland.org](mailto:comms@whocaresscotland.org). You can find out more about our wider Annual Participation Programme [here](#). Look out for relevant Corporate Training events on this topic [here](#).
FEEDBACK SO FAR

Young people engaged in interactive sessions, with fun activities to build relationships and break down barriers around talking about this sensitive topic, before using drawings, presentations, and other interactive methods to discuss the topic.

“I like the pure mad games!” (Young person in secure care)

“Funny, I liked it!” (Young refugee)

The young men from the Scottish Guardianship Service gave the following feedback: What went well?

“This made talking about these things normal”
“Loved the conversations, helpful and memorable”
“Talking about the other languages”
“It was good to talk about who to speak to. I learned lots of new words in English”
“A little embarrassing but it was really nice and entertaining”
“I learned a lot”
“I enjoyed everything with Jo and Laura”
“You were nice people and very helpful”
What could have been better?

“It would be good if there were more people in the group”
“It would be good to have time to discuss just us before [Interpreter] tells you our answers”
“Having a male person talk to us.”

Stefan Smith who works for the Scottish Guardianship Service and supported the young men to take part in the project gave the following feedback:

“The young people we support in Guardianship have advised that many have grown up in countries where discussions around sex are seen as inappropriate, especially in school. This, as well as many young people not having a formal school education, means that there are often gaps in young people's knowledge of sex and relationships. In addition, moving to a new country and culture, means there is a lot to learn. This includes; age of consent, what services exist and how to access them.

I think the young people gained some useful skills and experience as well as building their knowledge of the topic. The young people who took part seemed to learn a lot about sex, relationships and the law. They also built an understanding of how to produce a resource and some experience around this. To an extent, I also feel the young people gained a bit of an understanding of care in Scotland and some of the different forms of care outwith their experience.

I think it will be really useful to have the young people's voices on the video, to hear directly from them. It is also really important that supporting adults get to see a conversation from the perspective of the young people.”
Charlene Donaldson who works for the Good Shepherd Centre and supported the young people in secure care to take part in the project gave the following feedback:

“It was a great experience and very worthwhile project. I think it’s crucial to include our young people and have an opportunity for them to have their say as these are real life matters that affect them daily. These discussions can not only be difficult for young people to have but can also be embarrassing due to the nature of the topics and some of the stigma that surrounds sexual health. These discussions can also have an impact both positively and in some instances negatively depending on the approach of workers and or services they have received. So in order to move forward and make positive changes in future it’s been imperative that young people themselves can be involved in developing resources for workers as ultimately, their experiences mean they are best placed to know what’s helpful or not.

They were listened to, respected, and offered a safe space to speak openly – all of which makes them feel valued and effective contributors. They too learned skills such as assertiveness, communication, groupwork and the ability to challenge each other’s views in a respectful manner as well as to challenge some of the stigma that exists. Speaking in this forum gave them increased confidence to share views, develop further understanding of some of the issues and really encouraged them to develop a resource that will then benefit workers and more importantly other young people.

These resources will provide workers with an updated knowledge base, some of the language that can be used and guidance on what’s helpful and or not. It will also hopefully increase workers’ confidence too and provide them with a good toolkit they can turn to when offering support and advice to young people they work alongside. I thoroughly enjoyed working alongside you both as did the young people here at GSC. Keep up the great work.”
Thanks to all the young people involved in this project for sharing your experiences, thinking about how things could be made better for Care Experienced children and young people, and creating advice for professionals and carers who will be supporting them around their relationships and sexual health.

Thanks to NHS GGC for funding the project and to Jill Wilson, Health Improvement Lead in Sexual Health at Sandyford for all your support. Thanks also to Aberlour’s Scottish Guardianship Service, Tola Ahmad for his interpretation and The Good Shepherd for helping to facilitate this project.

A big thanks to Jo McLeod, National Development Officer, and the many Who Cares? Scotland colleagues who made this project happen.