



DON'T PANIC:

Talking with Your Middle
Schooler about Healthy
Relationships and Sexuality



RESPONSE
FOR TEENS

JCFS
CHICAGO 

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Welcome to this Guide!

We know that talking about sex and relationships can be uncomfortable and intimidating. At JCFS Response for Teens we believe that an open attitude about human sexuality sets the stage for healthy relationships and sexual expression.

We hope this guide will provide you with some basic information and simple tools so that you can provide your child with information that expresses your family's values and helps them make healthy choices and have healthy, loving, and satisfying relationships in their future.

MYTH: If parents/caregivers talk about sex and relationships with their young people, it will lead to their teens engaging in sexual activity at an early age.
REALITY: Research suggests that teens who report talking with their parents/caregivers about sex are more likely to delay having sex and to use condoms when they do have sex.

MYTH: All young people dread talking to their parents/caregivers about sex and relationships.
REALITY: You are more influential in your young people's lives than you realize. They need your guidance to sort through the mixed messages they get from pop culture and their friends.

Communicating with your young person about sex and relationships shouldn't be one, big dreaded "The Talk." Instead, we encourage you to have many small conversations as a way of engaging your young person and showing them that you care. This can keep the door open for them to come to you as they grapple with new experiences.

INCLUSIVE LANGUAGE

Response for Teens believes that people of all identities need and deserve sexual health education that reflects them. Language is an important tool for keeping the door to communication open between you and your child. Young people of all identities need to see themselves reflected in discussions about sexual health and relationships. "Inclusive language" means that we will refer to people in ways that don't leave anyone out. For example, we talk about people with vulvas and ovaries, and people with penises and testicles. You may choose to use male/female, but remember to keep an open mind about your own child. By using the inclusive language modeled in this guide, you will be affirming and supporting your child in who they are. Your acceptance will help them make healthier choices.

ACCURATE TERMINOLOGY

When we use made-up names or slang terms for sexual anatomy, we send the message that these parts of our bodies are shameful or embarrassing. By using accurate language to describe anatomy and sexual acts, Response for Teens hopes to help you take the shame and secrecy out of talking about sexual health. [To learn about anatomy go here.](#)

You are your child's most important teacher. While we encourage you to use this guide, we also hope that you infuse it with your family and cultural values. Each section of this guide will provide you with concrete information—What to Know—and some tips on What to Do/Starting the Conversation with your Middle Schooler. Hyperlinks within the pages will bring you to resources in English; on the **Resources** page you will find resources in your language.

Talking about Sex with Your Young Person

Many parents dread having to talk about sex and relationships. Talking about these aspects of health are important throughout your child's life. Other parts of this guide address specific elements of sexual health and relationships, but here are some general tips for using teachable moments to get started with your child.

HOW TO START THE CONVERSATION

- **Be prepared.** We have provided a list of resources— websites, books, and videos—that will strengthen your knowledge and support these conversations.
- **Listen** to what they have to say. Make sure your body language shows you are open.
- **Be curious.** “I’m wondering what have you heard about...?” “Would you like to know about...?”
- **You do not have to be an expert.** If you don't know the answer to something, don't be afraid to admit it!
- **Think about your values.** What's important to you? Love, kindness, listening, planning for the future? How do these beliefs translate into relationships and sexuality?
- **Find the Moments in the Margins.** TV, magazines, social media, and the news provide opportunities to start conversations about difficult topics with your children.
 - You can ask: “What would you do if someone you were dating behaved like that character on this TV show?” or “What do you think about...?”

THINGS TO REMEMBER

Your young person may not want to engage. That's OK! The more you're willing to talk about sex and relationships, the more likely they'll to come to you when they need to.

If your young person identifies as LGBTQ+, they may be confused or be afraid to talk to you about it. To fully support them, educate yourself as best you can.

They might ask you! Don't jump to conclusions about *why* they're asking. Keep your answers simple and explain new words that they might not know.

Don't make assumptions about your child's romantic interests. They may be very far from interest in sex and dating, or closer than you think. They may not know what kind of person they're attracted to, or if they're attracted to any kind of person at all, so use inclusive language as often as possible.

Challenge the media! A report from the National Center for Health Statistics found that only about half of U.S. teens have had sex by age 18. But TV, movies, and social media make it seem like *every* teen is ready to have sex. Share this information with your child when you watch a TV show or hear a lyric in a song.

A NOTE ABOUT PORNOGRAPHY

Pornography isn't real sex. Even young teens may see it and it can give a false, and sometimes disturbing idea of how people have sex. It is essential to talk about pornography so you can make sure that it doesn't have negative consequences for your child's future relationships.

WHAT TO DO:

- Open with curiosity: “Have you ever seen pornography?” “Maybe online or from friends?”
- If they've seen porn, ask them if there's anything they are curious about or anything that was confusing.
- Porn is full of misinformation about how real people look and what they do. Be prepared to explain how it is different from real sex and relationships.
- Compare it to something they might understand – you do not learn to drive from watching *Fast & Furious*; you should not try to learn about sex from watching porn.



Puberty and Adolescent Development

During adolescence, young people are awash in social, emotional, and physical changes. At the same time, they must navigate many cultural influences about growing up from family, friends, and society. Your young person may not be the baby they once were, but you need to listen and support them through these changes.

WHAT TO KNOW

Social & Emotional Development

Part of the work of being a teenager is to develop their own values, think about their future self, and determine what makes a good partner. They may roll their eyes at you, disagree with you, and push boundaries, but they are also watching you for clues about your values. Having open, clear discussions about what you value and modeling positive behavior is key at this stage in their lives.

While many of the social and emotional changes that a young person experiences are influenced by brain development and hormones, they are also influenced by social and cultural expectations about what it means “to be a man” and what it means “to be a woman.” However, no one person ever fits neatly into these definitions of gender. Now, more than ever, young people are striving to be their unique selves, but the expectations to fit a strict definition can be harmful. It is important to see the changes that your young person is experiencing, validate what they are going through, and support them.

Physical Development

Puberty is the time when a child’s body transitions into its adult form. For most children, these changes begin at 9 or 10 years old, but puberty can start as early as 8 or as late as 14. For some, the changes will start so early that families might wish to slow down the process with medication. For others, puberty will not feel right for their gender, and medication can be used to pause it.

For transgender, non-binary, and gender diverse young people, the physical changes of puberty can be especially troubling when their developing body highlights parts of themselves that they don’t connect with. For example, a boy who was assigned female at birth may feel extreme distress over growing breasts and might want larger clothes or a breast binder to make their outward appearance affirm their gender identity.

During this time, your young person needs reassurance: that their body is growing in its own time, and they will grow fully into a grown-up body; that what they’re going through is “normal;” that they can ask you questions; and that you love them!

Common aspects of physical development

- Growing hair – underarms, legs, the areas of their genitals.
- Growing very rapidly - gaining height and weight faster than at any time since they were a baby.
- Breasts begin to grow. This can happen for people with vulvas or penises. In people with penises, this is called gynecomastia. It is totally normal and will go away once hormone levels adjust.
- Body odor develops.
- Voices deepen.
- External genitals – the penis and the vulva – will grow.



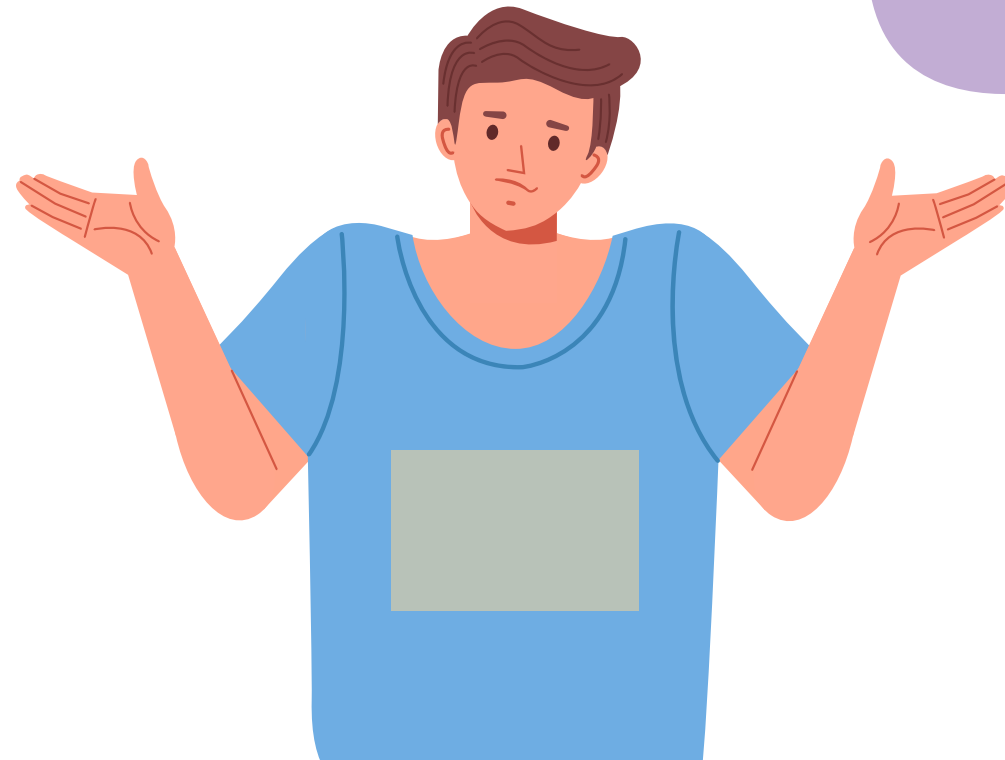
Sexual Development

During this period, the brain and other organs increase hormone production to prepare young people’s bodies for adulthood. These hormones – along with social norms and pressures—create curiosity about sexual activities. Younger teens may be curious about other people’s bodies – especially bodies that don’t look like theirs. They may test out using slang words for body parts and sexual activities. And they may begin to be curious about or even exploring romance.

This time can be very stressful. Because development happens differently for different people, they may worry that they’re behind—or ahead of—their friends. Access to social media and other media outlets give them ample material to compare themselves to society’s “ideals”—the images of people who are held up as beautiful, handsome, or sexy. Don’t dismiss their worries but remind them that development happens over time and different young people hit milestones at different times.

The information in this chart shows some **typical developmental changes** of early adolescence (10–14-year-olds), **what behavior you might see**, and **how you might support your young person**. We will go into more detail with how to support them in other sections of the guide.

Through these changes, it is important not to assume anything about your youth’s gender identity or sexual orientation.



What’s Going On?	What You Might See/Hear	What You Can Do/Starting the Conversation
<ul style="list-style-type: none"> Rapid physical and emotional changes brought on by puberty. 	<ul style="list-style-type: none"> Being self-conscious and even critical. Hiding physical signs of development if their body isn’t congruent with their gender identity. 	<ul style="list-style-type: none"> Straightforward discussion of what is happening to them. Listening to understand. Help find positive coping strategies for negative feelings. Provide books, pamphlets or websites that they can explore (see our Resources).
<ul style="list-style-type: none"> Getting used to their changing body. Thinking about their role in the world. 	<ul style="list-style-type: none"> Wanting more privacy. Questioning your authority or disobeying you. Change in friends. Having opinions on social issues. 	<ul style="list-style-type: none"> Create opportunities for privacy. Allow them to disagree with you but remain respectful.
<ul style="list-style-type: none"> Feelings of attraction and curiosity about sexual activity. 	<ul style="list-style-type: none"> Seeking information about sex or viewing sexual content. Masturbation. Flirting with, hugging, or kissing people they are attracted to. Sexual jokes may be a way of expressing growing interest in sex. 	<ul style="list-style-type: none"> Discuss what makes a relationship healthy and what does not. Talk about pornography. Help them think about what it means to “like” someone and how to handle it. Talk about relationships or crushes using all possible pairings.
<ul style="list-style-type: none"> Beginning to think about, “Who am I?” Worry about being judged by others. 	<ul style="list-style-type: none"> “Trying on” new looks with clothes and style. Expressing worry that they are not “normal” or that no one understands them. Negative self-talk. 	<ul style="list-style-type: none"> Encourage them to explore new interests. Talk about internet and social media use. Help them to focus on what they can do, not just how they look.

Gender Identity and Sexuality

Understanding their *gender identity* and *sexual orientation* helps middle schoolers figure out who they are and how they relate to others. This is often the time when feelings of sexual attraction start. Young teens may have their first crush and begin thinking about their sexual orientation. This can be scary because fitting in and peer acceptance are so important at this age. Love and support from a parent/caregiver are essential.

It may seem strange, but science now shows us that sex and gender are more complicated than many of us were taught. *Everyone* has a gender identity and sexual orientation. Talking about these topics with your child will show them that you believe all people deserve respect and compassion.

WHAT TO KNOW SEX & SEX ASSIGNED AT BIRTH

Sex refers to people's biology – their external genitalia, internal reproductive organs, chromosomes, and hormonal makeup. "Sex assigned at birth" refers to the labeling of a person as "male" or "female" by looking at their external genitals. Sometimes a baby may have genitals that don't easily fit into the typical male or female categories; this is called *intersex*. Some health care providers will decide to assign intersex babies as male or as female. However, we now know that there are more than two clearly-defined biological sexes. Remembering this fact when talking to your children is an important way to emphasize respect for all bodies.

GENDER IDENTITY

Gender identity is a person's innermost sense of being a boy or a girl, or something in between—or outside of—those genders. There are many gender identities. Gender identity is different than sex because gender doesn't have to do with what body parts a person has, it's about how they feel on the inside. Sometimes gender identity can correspond with sex assigned at birth and sometimes it can differ.

SOME LANGUAGE USED TO DESCRIBE GENDER IDENTITY:

Cisgender: Someone whose sex assigned at birth (male or female) matches their gender, or how they feel on the inside (boy or girl). For example, a person assigned female at birth who identifies as a girl is a cisgender girl.

Transgender: Someone whose sex assigned at birth differs from their gender. For example, a person assigned female at birth who identifies as a boy is a transgender boy.

Non-Binary: Someone whose gender identity doesn't fit into simple categories like boy/man or girl/woman.

Pronouns are a small but important way to support someone's right to self-identify. he/him; they/them.

Misgendering means referring to someone using language (especially pronouns) that does not correctly reflect their gender identity. This often happens when people use appearance to determine gender identity.

GENDER EXPRESSION

Gender expression is the way that people show and express their gender to the world. This is sometimes based on stereotypes and is usually through mannerisms, clothing, hairstyles, activities they enjoy, and how they talk. A few examples considered masculine gender expression are wearing a suit and tie, having facial hair, or playing with trucks. Some examples considered feminine gender expression are wearing makeup, wearing dresses, and taking dance classes. What is considered "masculine" or "feminine" is defined by society and culture and changes over time.

SEXUAL ORIENTATION

There are two different types of attraction: physical and emotional. It is common for people to experience both, but it's possible to experience one but not the other.

Physical attraction, or sexual attraction, is when someone finds the way a person looks to be attractive or sexually desirable.

Emotional attraction, or romantic attraction, is finding another person's personality attractive.

Some people only experience physical or romantic attraction towards people of one gender. Some people are attracted to multiple genders. And some people aren't attracted to anyone! Who someone is physically and/or emotionally attracted to describes their sexual orientation. Some examples of sexual orientations include:

- **Gay:** A man who is attracted to other men.
- **Lesbian:** A woman who is attracted to other women.
- **Straight:** A person who is attracted to the opposite gender.
- **Bisexual:** A person who is attracted to multiple genders.
- **Asexual:** A person who does not experience physical attraction toward anyone.

WHAT TO DO / START THE CONVERSATION:

- Try not to jump to conclusions about your child's identity.
- Look for **Moments in the Margins** – use TV, celebrities, or current events to ask your child what they think.
 - Ask your child what they know about gender and sexual orientation – they might educate you!
 - Wonder aloud: "I wonder how it might feel to be treated differently because of your gender identity."
 - Express your disapproval of slurs or jokes based on gender or sexual orientation when you encounter them.
- Use your pronouns when you meet your child's friends. It sends the message that you are open and accepting.
- Use gender inclusive language.
 - Ex. "dating someone" vs. "boyfriend/girlfriend"

MORE TO CONSIDER:

- People's gender identity, gender expression, and sexual orientation are not connected. For example, one should not assume that a boy who wears makeup is gay, or that a girl who prefers suits over dresses is lesbian.
- Do not label other people's identities for them.

IF YOUR CHILD COMES OUT AS LGBTQIA+:

- **Do not assume this is a phase** but allow your child to evolve. Affirm your child's identity now and communicate that you will accept them even if their identity shifts over time.
- **Protect your child's privacy**; let them decide who to tell.
- It's extremely important that young people have a **trusted adult** in their life who they can turn to if they are questioning their identity. According to a [study](#) by the Trevor Project, LGBTQ youth who report having at least one accepting adult in their life are 40% less likely to attempt suicide.

Healthy Relationships: Boundaries and Consent

Being treated with respect and kindness – and treating others that way – are important parts of any relationship. This is true for family, friends, romantic partners, and classmates. Helping your young person learn about **boundaries** and **consent** before they begin dating can give them tools to have healthy relationships throughout their lives.

Many of us were taught to be polite and simply ignore behavior we don't like. We have the opportunity to advocate for our children, so they have it better and *do* better.

In simple terms,

- **Boundaries** are personal limits of what a person likes and doesn't like or finds uncomfortable.
- **Consent** is getting permission, so you treat people the way they want to be treated.

Some examples of boundaries include,

- **Material** – lending or asking for money; sharing possessions.
- **Physical** – control over one's body. Deciding who gets to touch, hug, or kiss you.
- **Mental** – expressing thoughts and opinions. The right to disagree.
- **Emotional** – private thoughts and feelings.

For your middle-schooler, friendships and social life take center stage, which can make setting boundaries especially difficult. Your teen is in a tug of war between the value of friendship and being true to themselves; often, the need to be accepted by peers wins. This can lead young people to tolerate being treated poorly and can also make them

behave in ways that might not be in line with their values. If this pattern persists, it may show up in more dangerous ways within romantic relationships.

THINKING ABOUT CONSENT

Boundaries are personal limits and asking for **consent** is the way to find out what those limits are. “Can I borrow your pen?” “How about a high-five?” “Can we walk home from school together?” are common questions your child might ask or hear. Consent helps us all feel comfortable when interacting with others. Planned Parenthood developed a fun way to teach your teenager about consent: Talk about FRIES (and we know that everybody likes fries!).

Consent should be

- F Freely given.** No one should be pressured, coerced, or threatened to do what another person wants.
- R Reversible.** You get to change your mind. This time, or another time. *You asked for a pen every day this week; today the answer is no.*
- I Informed.** You get to know exactly what is being asked: *Do you want to borrow my pen just for a second, for class, or for the entire day?*
- E Enthusiastic.** If someone responds to a request with, “Well. Um. OK, I guess so...” that sounds like they might not really like the idea. It's important to listen.
- S Specific.** You have the right to consent to one specific thing, like borrowing a pen. *It doesn't mean that you will also loan your notebook, your textbook, and your notes from class!*



WHAT TO KNOW

- Boundaries are personal. Your child gets to decide what they're OK with and what they're not OK with.
- Boundaries can change depending on who your child is with or what they're doing. They may also change over time as your teen matures.
- We all have a right to private thoughts and feelings. Explain to your pre-teen the difference between privacy (things that may be personal, your own, or internal thoughts and feelings) and secrecy (hiding something, often because it may be unsafe, or they are afraid to be open about it).
- Who has power in a relationship can make it difficult to maintain boundaries. Teachers have more power than students and older youth have more power than younger kids. It can be hard to speak up to those with more power.
- Friendships have limits. Often, young people feel like they must do or be everything to every friend. Emphasize that boundaries are equally as important in friendships as they are in romantic relationships.
- This is the age where “touching games” may emerge—slapping behinds or pinching breasts without permission. Talk about the impact of those games on other people.

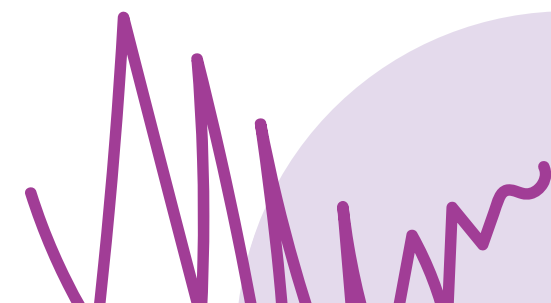
WHAT TO DO / START THE CONVERSATION:

- While romantic relationships are less likely in middle school, they still happen. Take your child's lead around whether you are talking about friendships or romantic relationships.
- Look for **Moments in the Margins** to start conversations: in the car, after a TV show, when you observe friends interacting.
 - When friendships or relationships are on TV ask, “What did you think of how the character handled that situation? Why do you think they acted that way? What would you have done differently?”

- Use open-ended questions to help your teen think about boundaries and relationships:
 - What might you do if a friend made you feel uncomfortable?
 - How can you tell if someone wants to hug or doesn't?
 - What makes you feel happy in a friendship/relationship?
 - When does teasing become too much?
- Talk about power dynamics in a way your child will understand:
 - Which friends do people listen to most?
 - What happens when someone doesn't do what that friend wants?
- Provide them with some phrases they might use when confronted with an uncomfortable situation: “Let me think about that and get back to you”; “No thanks. I'm not interested in that”; or “Let me talk to my parents and I'll let you know tomorrow.”

MORE TO CONSIDER

- Encourage your young person to trust their gut. If something doesn't feel quite right, it probably isn't.
- Allow your young person to say “no” to you. It's good practice.
- They don't need to defend their boundaries. A simple “no” with a brief explanation of what boundary is being crossed is plenty. Ex: “I don't like to tell others my grades.”
- Parents, too, should apologize when you cross your child's boundaries. You are modeling good communication.
- Set a positive example of healthy boundary setting in your own life!



Abstinence and Methods of Protection

Almost all people will eventually become sexually active. In order to help your child make healthy decisions as they grow, parents/caregivers should discuss safer sex. When we talk about birth control pills and condoms in the same way we talk about any aspect of taking care of ourselves, we dispel some of the secrecy that surrounds sex. Giving factual information about sex and protection **does not** encourage young people to have sex. It helps teach them how to make smart and healthy choices for their body.

Share your values with your child. You can say something like, “While I hope you to wait a little longer to have sex, it’s important for you to have this knowledge so that you know how to stay safe.” This will let your child know where you stand AND that you are there to help.

All young people need to learn about abstinence, non-barrier methods, and barrier methods, regardless of their gender or sexual orientation.

WHAT TO KNOW

Abstinence

Abstinence means not engaging in any sexual activity involving someone else’s genitals (vaginal, anal, oral, or touching with hands) and is the most effective way to prevent the transmission of sexually transmitted infections (STIs) and unwanted pregnancy. Someone can choose to be abstinent for any amount of time; it could a few months, years, until marriage, or forever! People can also choose to be abstinent at any point in their life, even if they’ve had sex before. Being abstinent is a personal and healthy choice that someone might make for cultural, religious, or other reasons. You may prefer that your child practice abstinence. Help your child understand your values by explaining why this is important to you.

PROTECTION FROM PREGNANCY AND SEXUALLY TRANSMITTED INFECTIONS (STIs)

If people choose to have sex, there are many options to stay safe.

Non-Barrier Methods

Non-barrier methods include medications (like “the pill”) and devices (like the IUD). They prevent pregnancy but do not provide any protection against STIs. The pill can also be used to regulate or lighten periods, lessen menstrual cramps, and treat acne. Non-barrier methods can only be accessed by visiting a doctor or clinic.

Emergency Contraception

Emergency contraception is used to prevent pregnancy after unprotected sex, if a condom breaks, or in cases of sexual assault. It is available over-the-counter at drug stores.

Barrier Methods

Barrier methods of contraception like condoms, latex dams, and latex gloves are used to prevent pregnancy and STIs. Barriers prevent the fluids of one person from getting into the body of another person. They can be purchased over the counter at places like drug stores and grocery stores and are often free at health centers and clinics.

WHAT TO DO / START THE CONVERSATION

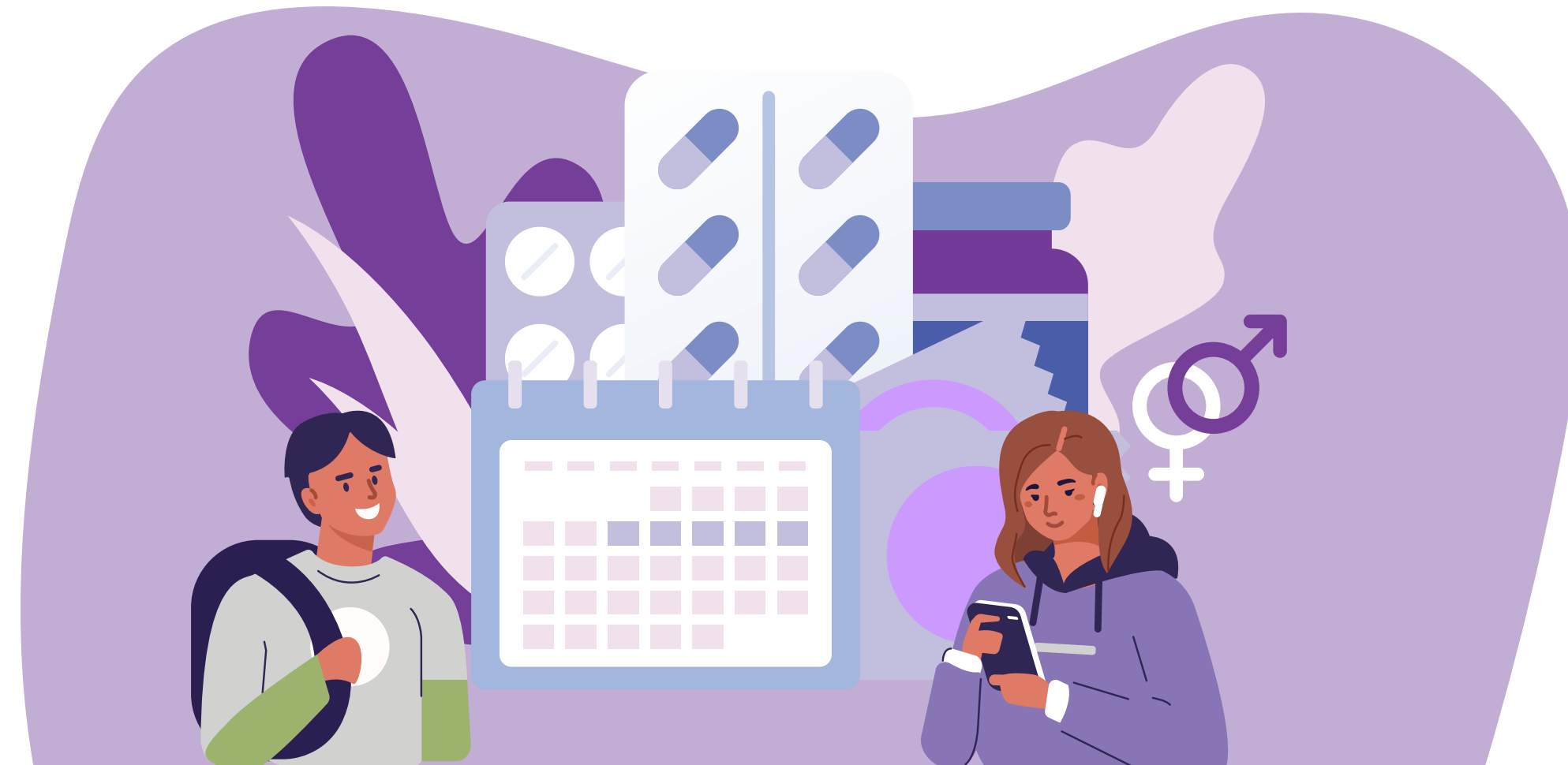
- When you think of abstinence, what do you really mean? Abstinence from any and all touching? Abstinence until a certain age? Ask your child what it means to them, and also share what you think.
- Be mindful of how you discuss abstinence so that your child doesn’t feel ashamed of what they choose to do with their body, but rather feels empowered to make the healthiest decision for them.

Remember the *Moments in the Margins*

- Popular culture, advertising, and news can help make conversations about abstinence, sex, and protection easier. For example, if a TV show has teenagers who are having sex or talking about sex, you can ask your child if they talked about protection, or how the characters decided they were ready.
- Passing the contraception section while walking through the drug store, grocery store, or gas station can make for a good conversation starter. Even if they rush to a different aisle, you showed you are open to the conversation.

MORE TO CONSIDER

- There are double standards that exist between genders about the ideas of sex, abstinence, and virginity—boys are often praised for having sex, whereas girls are encouraged to remain abstinent and are criticized if they “lose their virginity.” How do these differences impact discussions of staying safe?
- In Illinois, minors between the ages of 12 and 17 can consent to medical treatment for STIs or to receive contraceptives. To find information about the laws in your state, [view this chart](#).
- Minors of any age may purchase over-the-counter protection such as condoms.



Sexually Transmitted Infections

One important aspect of keeping your young person safe is eliminating the shame and fear around **Sexually Transmitted Infections (STIs)**. While no one wants an STI, contracting one does not make someone “dirty” or a bad person. STIs are more common than most people realize. According to the Centers for Disease Control, people ages 15-24 get STIs more than any other age group. Talking about STIs *before* your young person is sexually active will help them make safer decisions in the future. By discussing STI prevention like any other illness, you also help your young person be comfortable in talking to partners and getting help if they need it.

WHAT TO KNOW:

- STIs are transmitted through sex or intimate skin to skin contact.
- Like other infections, some STIs can be treated, and some can be completely cured with medication. However, left untreated, some can damage our health.
- Most STIs can be prevented by using a latex condom or latex dam every time someone has vaginal, oral, or anal sex.
- You CANNOT tell if someone has an STI by looking at them. STIs don't always have noticeable symptoms. Regular testing is the only way to tell.
- Talking about STIs and getting tested is an important parts of communication and consent in a healthy relationship.



WHAT TO DO / START THE CONVERSATION:

Talking about STIs might seem intimidating, but there are a few key moments when you can bring up the topic:

- Your teenager may want to begin seeing their doctor without you present. Encourage them to feel comfortable asking their doctor questions about sex.
- Between 9-12 years of age, young people of all genders can get the Human Papilloma Virus (HPV) vaccine from their doctor. HPV is extremely common in the US; around 1 in 4 Americans have it. The vaccine protects against strains that can cause cancer later in life. **This is a perfect time to open the discussion around STIs and safer sex.** Explain why they are getting the vaccine. Ask them what they know about HPV. You can then open the discussion to include other STIs.
- **Moments in the Margins:** When TV or music addresses sex, ask your teen, “What are some things that people need to think about before they engage in sexual activity?”

Keep the Door Open

As a caregiver, you want to raise healthy, happy children. But it's not always easy.

We are more likely to *react* when we are caught off guard, worried, or distracted. When we *respond*, we nurture the relationship with our young person so they will reach out to us when they need it most.

Here are some general tips for responding instead of reacting:

- Pause. Take a breath.
- Be the calm duck on the pond even if you are frantically “paddling” under the surface!
- Are you reacting emotionally? What are you reacting to?
- Saying something like, “Tell me more,” instead of, “What?!” will signal to your young person that you are concerned and interested.
- Really listen and ask questions – be curious!
- Try not to respond to the attitude or the eye rolling.
- If they come to you with a problem ask them, “What would you tell a friend?”
- Identify other safe adults your child can go to.
- It's OK to say you're uncomfortable or that you don't have all the answers.
- Be open to learning together.

MORE TO KNOW

- Set boundaries that grow with your child. Think about social media use, curfew, giving them more choices.
- Try creating behavior agreements together instead of assigning hardline rules.
- Discuss your values as a family.
- Encourage risk-taking that is individual to your child (trying out for a team or speaking up in class).

- Help them to feel confident about their culture, racial, ethnic, or gender identity.

MOMENTS IN THE MARGINS

Instead of one lecture, find opportunities to have smaller conversations with your teen.

- The car is a private space where your teen doesn't have to look at you but can hear what you have to say. Song lyrics during radio play also offer good entry points into conversations.
- Texting may be more comfortable than talking. While it may seem impersonal, it is an easy way to give your child the opportunity to talk without pressure.
- Use TV shows, movies, or social media to start conversations.



Resources

TALKING ABOUT SEX

Adults:

Websites:

[Planned Parenthood](#)
[CDC - “Teen Health Services and One-On-One Time with A Healthcare Provider”](#)

Apps:

[The Society for Adolescent Health and Medicine App - THRIVE](#)

Videos:

[Amaze.org - “The #AskableParent Guide to Porn”](#)
[Planned Parenthood - “Parenting Tips: A Tool for Talking About Sex”](#)
[Lurie Children’s Hospital, “Never Fear” Talks](#)

Youth:

Websites:

[Amaze](#)

Apps:

[Real Talk \(app\)](#)

ANATOMY

Websites:

[Planned Parenthood](#)
[InterACT – Intersex faq page](#)

LGBTQIA+

Adults:

Websites:

[Gender Spectrum - Parenting Resources](#)
[Planned Parenthood - “What should I teach my middle schooler about identity?”](#)
[GLSEN - “Pronoun Guide”](#)

Youth:

Websites:

[The Trevor Project - LGBTQ Youth Resources](#)
[GLSEN - “Coming Out”](#)
[Gender Spectrum - “Learn and Connect: Youth”](#)

Videos:

[Amaze.org - “Gender Identity: Being Female, Male, Transgender or Genderfluid”](#)
[Amaze.org - “What is Sexual Orientation? LGBTQ+”](#)

ABSTINENCE & PROTECTION

Adults:

Websites:

[ICAN! - “Birth Control Options”](#)
[Planned Parenthood - “Emergency Contraception”](#)
[Planned Parenthood - “Condom”](#)

Youth:

Websites:

[TeenSource - “Birth Control”](#)
[Planned Parenthood- Condoms](#)

Videos:

[Amaze.org - “What Is Abstinence?”](#)
[Amaze.org - “What Should You Do If You’ve Had Unprotected Sex?”](#)
[Amaze.org - “Condoms: How to Use Them Effectively”](#)

SEXUALLY TRANSMITTED INFECTIONS

Adults:

[CDC Fact Sheets](#)
[HPV Vaccine video](#)

Youth

Videos:

[Amaze.org - “STD Prevention Beyond Condoms”](#)
[Amaze.org - “STD Testing: Planned Parenthood’s Roo Chatbot Answers Your Questions”](#)

BOUNDARIES & CONSENT RESOURCES

Websites:

[Child Mind- ” How to talk to kids about consent and boundaries”](#)
[Love is Respect - “What Are My Boundaries?”](#)

Videos:

[Amaze.org - “Maybe Doesn’t Mean Yes”](#)
[Psych2Go - “5 Reasons to Set Healthy Boundaries with Toxic People”](#)

SEX & SOCIAL MEDIA RESOURCES

Adults:

Websites:

[Common Sense Media - “Talking About ‘Sexting’”](#)

Youth:

Videos:

[Amaze.org - “Sexting: What Should You Do?”](#)
[NetSmartz](#)
[Common Sense Media - “Teen Voices: Sexting, Relationships, and Risks”](#)

Spanish Resources

[Amaze videos in Spanish](#)

SEX TALKS

[Planned Parenthood](#)

ANATOMY & PUBERTY

[Amaze.org](#)

LGBTQIA+

GLAAD

[Amaze.org - “Explicando la orientación sexual: lesbiana, gay, heterosexual y bisexual”](#)
[Somos Familia](#)

ABSTINENCE/PROTECTION

[ICAN: \(Select “Spanish” at bottom\)](#)

[Planned Parenthood](#)

[Amaze.org – “Anticonceptivos: condones, píldora y parche”](#)

SEXUALLY TRANSMITTED INFECTIONS

[CDC Adolescents and testing](#)

[CDC Fact Sheets](#)

BOUNDARIES AND CONSENT

[Planned Parenthood](#)

[Love Is Respect](#)

SEX AND SOCIAL MEDIA

[Common Sense Media](#)

[NetSmartz](#)

[Amaze.org - “Pornografía: ¿realidad o ficción?”](#)

[Amaze.org - “Sexteando: ¿Qué debes hacer?”](#)

Arabic Resources

CONTRACEPTION

[Planned Parenthood](#)
[Video from Family Planning Victoria](#)

SEXUALLY TRANSMITTED INFECTION

[Healthy Living](#)
[HPV Vaccine](#)
[HPV explanation video](#)

BOUNDARIES AND CONSENT

[Respect Ends Gender Violence](#)

RELATIONSHIPS AND TEEN DATING VIOLENCE

[UCLA Health](#)

LGBTQIA+

[UCLA Health](#)

Urdu Resources

ONLINE SAFETY

[eSafety](#)
[iKeepSafe](#)

ANATOMY/ PUBERTY

[Menstruation](#)

SEXUALLY TRANSMITTED INFECTIONS

[FDA Fact Sheet](#)
[All Good](#)

CONTRACEPTION

[Video](#)
[Choices](#)
[Condoms](#)

BOUNDARIES AND CONSENT

[Teaching Respect to stop gender violence](#)
[Relationships and Teen Dating Violence](#)

LGBTQIA+

[UCLA Health](#)

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**RESPONSE
FOR TEENS**



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