

Australian Research Centre
in Sex, Health and Society

National Survey of Australian Secondary Students and Sexual Health 2013

Anne Mitchell, Kent Patrick,
Wendy Heywood, Pamela Blackman
and Marian Pitts

April 2014

5th

Results of the
5th National Survey
of Australian
Secondary Students
and Sexual Health



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Executive Summary

The Fifth National Survey of Secondary Students and Sexual Health was carried out in 2013 and involved over 2,000 Year 10, 11, and 12 students from the Government, Catholic and Independent school systems and from every jurisdiction in Australia.

The key findings are as follows:

KNOWLEDGE

- HIV knowledge is relatively high.
- STI knowledge remains poor; including knowledge about chlamydia.
- Knowledge of the possible symptoms of STIs was somewhat better.
- Hepatitis knowledge remains relatively poor.
- HPV knowledge is very poor. In most cases more than half the sample reported being ‘unsure’ of correct answers to HPV knowledge questions.
- Only 52% of young women reported having been vaccinated against HPV.
- There were few gender differences in HIV knowledge; however young women demonstrated better knowledge compared with young men generally in terms of STIs, particularly for HPV.

SEXUAL BEHAVIOUR, BELIEFS AND PERCEPTIONS

- The majority of students (69%) have experienced some form of sexual activity.
- The proportion of students who had experienced sexual intercourse in the total sample was 34%.
- Almost one quarter of Year 10 students (23%), one third of Year 11 students (34%) and one half of Year 12 students (50%) had experienced sexual intercourse.
- Around 40% of students had experienced oral sex.
- Around six out of ten students (63%) believe that ‘most’ or ‘all’ of their peers use a condom when they have sex.
- The majority (59%) of sexually active students (those who answered ‘yes’ to having either vaginal or anal sexual intercourse) reported using a condom the last time they had sex.
- Of those sexually active students who reported that a condom was available the last time they had sex, 86% reported using it.
- Almost a quarter of sexually active students (23%) had sex with three or more people in the past year.
- Approximately one quarter of sexually active students reported an experience of unwanted sex.
- The majority of the sample reported sexual attraction only to people of the opposite sex (83% of young men and 76% of young women).
- Eight per cent of young men and 4% of young women reported sexual attraction only to people of the same sex. Five per cent of young men and 15% of young women were attracted to people of both sexes. Around 4% of young men and 5% of young women were unsure about their sexual attraction.

- One in eight (12%) of sexually active young men reported their most recent sexual encounter was with someone of the same sex. This compares with 5% of sexually active young women.
- Most sexually active students report positive feelings after having sex.
- Amongst sexually active students the most commonly used form of contraception was the condom (58%) and/or the contraceptive pill (39%).
- Thirteen per cent of sexually active students reported using no contraception the last time they had sex; while 15% used withdrawal.
- Around one half of non-sexually active students reported that they did not feel ready to have sex; that they were proud to say no and mean it, and that they thought it important to be in love the first time they had sex.
- Religious and cultural beliefs or parental disapproval were less frequently cited by non-sexually active students as reasons for not having had intercourse.
- Around 20% of non-sexually active students reported feeling ‘extremely’ happy, good and proud that they had not yet had sex. Large proportions reported that they did ‘not at all’ feel guilty (75%), regretful (63%) or embarrassed (51%) that they had not yet had sex.

FERTILITY

- The majority of students (78%) expressed a desire to have children at some stage of their life.
- The preferred age to have their first child was between 25 and 29 years. A further 16% desired their first child between the ages of 30 and 34 years.
- Only around one in ten students anticipated difficulties in conceiving children, but with a high percentage (52% of young women and 32% of young men) indicating they did not know whether they would experience difficulties.
- The majority of students correctly identified a family history of infertility (74%) and STIs (72%) as potential factors affecting infertility.

DRINKING AND DRUG TAKING

- Forty per cent of students reported never drinking alcohol.
- Around a third (36%) of all students reported drinking once a month or less.
- One in ten students (10%) reported drinking alcohol weekly or more frequently.
- Twenty-one per cent of young men (33% of male students who drank alcohol) and 11% of young women (19% of female students who drank alcohol) reported consuming ‘seven or more drinks’ on a day when they drank.
- The vast majority of students (81%) have never smoked cigarettes. Only 4% report smoking regularly.
- Similarly 83% of students report never having smoked marijuana, with only 3% reporting regular use of marijuana.
- There is a very strong association between cigarette and marijuana use.

INTERNET, TECHNOLOGY AND SOCIAL MEDIA

- Students reported frequent use of social media and technology.
- Ninety-three per cent use social networking sites at least once a week, 91% use instant messaging. Text messaging and mobile phones are used by 88% and 86% respectively.
- Social networking sites are used at least once a day by 87% of all students.
- Facebook was the most commonly used social networking site (91% of students). YouTube was regularly used by 82% and Instagram was regularly used by 49% of students.
- Over half of all students reported having received a sexually explicit text message.
- Just over a quarter of all students reported that they had sent a sexually explicit photo of themselves.
- Most sexually active students reported receiving (84%) and sending (72%) sexually explicit text messages.
- Half of all sexually active students reported sending a sexually explicit nude or nearly nude photo or video of themselves, while 70% reported receiving such a photo or video.
- Overall relatively low proportions of students reported frequent cyberbullying in the last couple of months.
- The most common cyberbullying behaviours ‘every few weeks or more’ were receiving prank mobile phone calls (10%) and being deliberately ignored or left out of things over the Internet (9%).
- For all the examples of cyberbullying provided, the vast majority of students reported that it had not happened to them in the last couple of months.

SEXUALITY AND RELATIONSHIP EDUCATION

- Students most commonly consulted their mother (36%) or a female friend (41%) about sex and relationships.
- The school health program and the Internet were nominated as sources of information for around 43% of students.
- Doctors and teachers were also nominated as fairly common sources of sexual health information (29% and 28% respectively).
- Only one in ten students reported having no sex education at school.
- Over three quarters reported the education had been in Health and Physical Education classes (80%).
- Teachers most commonly delivered sex and relationship education.
- Sexuality education was mainly taught between Years 7 and 10; 64% reported receiving sex education in Years 7 and 8, and/or 68% reported receiving sex education in Years 9 and 10.
- Nearly half (45%) of students found this education to be ‘extremely’ or ‘very’ relevant to them.
- Students offered commentary on the value of their sexuality education, what they thought was missing from it and its relevance to their lives.

Chapter 1 – Introduction

A national survey of the sexual health of Australian secondary students has been carried out approximately every five years since 1992, each survey wave funded by the Australian Government Department of Health. The first survey was completed by a team of researchers from the University of Queensland led by Beverly Raphael in 1992. The subsequent surveys carried out in 1997, 2002, 2008 (delayed because of funding issues) and 2013 were carried out by researchers at the Australian Research Centre in Sex, Health and Society (ARCSHS) at La Trobe University, led by Anthony Smith.

The survey was initiated in the early 1990s amid concerns about the vulnerability of young people to HIV infection and the sense that both health and education authorities needed a more realistic picture of the knowledge and behaviours of 16–18 year-olds if effective prevention was to be undertaken. Initially the sample was restricted to those in Government schools but in 2002 Catholic and Independent schools were invited to participate and have done so in all subsequent surveys. The first survey (1992) was carried out in schools with great trepidation about the impact of answering such questions on young people and the likelihood that they would not answer them truthfully. Educators from government sexual health units were present in every classroom when the survey was carried out in order to clear up misunderstandings and to alleviate any lingering concerns the students had at the end of the process. In the event they were largely redundant and the young people on the whole responded with honesty, enthusiasm and a worldliness that surprised their elders.

This was very much the beginning of a series of data sets which gave us, for the first time, an accurate picture of the sexual attitudes, knowledge and experiences of Australian young people. This is research which has been widely used and is relied upon to guide the work of health professionals, teachers, youth workers, service planners and policy-makers for the last twenty years. Since 2002 the five-yearly reports of the study have been made available for downloading on the ARCSHS website and have always been the most commonly downloaded of all the reports available there. For example, the 2008 report (which contains data now six years old) was downloaded 264 times in 2013 alone. It has been used as the basis for the development of classroom resources for sexuality education – the national *Talking Sexual Health* materials, the Western Australian *Growing and Developing Healthy Relationships* materials and the Victorian *Catching On* materials, to name a few. It was used as the basis of the *Keep It Simple Safe Sex Guide (KISS)* for young people, the most widely distributed Commonwealth health resource in its time. It has been used prospectively to provide an indicator of the success of the *Second National Sexually Transmissible Infections Strategy 2010–2013*, and as the basis of countless other state and territory policies and plans for supporting the sexual health of young people. It sits now beside the development of the new *Australian Curriculum in Health and Physical Education* as a reference point for schools and systems to gauge the value of their approach to the issues it documents. It has more than justified the courage and foresight of the 1992 initiators who felt it was worth treading new and contentious ground to make it happen.

It has documented some important changes in the social and sexual worlds of young people.

Some of the findings remain surprisingly consistent, rates of sexual intercourse is an example of a finding where little changes. Another is the number of young people reporting same sex attraction, an area explored from 1997 onwards. While concerns about HIV infection have abated over the years, the survey continues to test HIV knowledge in the context of other sexually transmitted infections and later, hepatitis and human papillomavirus. The findings about the knowledge of these viruses are almost always somewhat disappointing but are offset by surprisingly high and consistent rates of condom use, although always with room for improvement. In some cohorts we have seen an increasing number of sexual partners. Increases in alcohol use and its contribution to unwanted sexual encounters was well documented in the more recent surveys. Sources of sexual health information used and trusted have also been canvassed regularly with “mum” and “school programs” competing over the years for first place.

Care has always been taken to craft a survey that can be done in one timetabled period of a school day but to retain as many questions from previous surveys as possible while responding to new and emerging issues. The current survey once again integrates this combination of existing and new questions. Additional topics explore issues such as use of the Internet, technology, and social media; attitudes towards fertility; and experiences with sexuality and relationship education. In addition to Year 10 and 12 students, Year 11 students were also asked to participate for the first time since 1992, providing more detailed information about young people’s sexual practices between the ages of 16 and 19.

Despite the valuable data these surveys generate, they retain too their time-honoured capacity to alarm. The release of each new report frequently gives rise to publicity around the more negative aspects of the findings and to community concerns. It is therefore important to note that we have always found that young people, in the main, manage their sexual health very well. They generally make good decisions about their sexual behaviour. If they are sexually active, they generally participate in safe sexual encounters about which they are largely pleased and about which they are well-informed. This too has remained consistent over the years.

The funding to complete the current survey was given to Professor Anthony Smith whose outstanding scholarship and commitment to detail has ensured the integrity of these data at each survey wave since 1997. He reported the findings as a school “report card” for young people each time they were released, the good always outweighing the bad. Professor Smith died in the early planning stages of the current project and we intend this report to be a tribute and further example of the extraordinary contribution his work has made to the sexual health and wellbeing of young Australians.

Chapter 2 – Methodology, Survey Instrument and Sample

The methodology used for the 2013 survey was similar to the methodologies used for previous surveys but also adopted some additional strategies in order to respond to the increasing difficulties of recruiting young people through schools.

SURVEY INSTRUMENT

The 2013 questionnaire included most of the questions asked in the 2008 survey, but also included new items pertaining to use and experiences with new technologies and social media, attitudes towards fertility, and experience with sexuality and relationship education in school.

The 2013 questionnaire comprised eight sections (survey questions available on request). Section A covered demographics and student background and Section B comprised items measuring student HIV / AIDS knowledge and perceived risk of HIV infection. Section C comprised items relating to perceptions of peer condom use, sexual attraction, confidence in talking to parents/guardians about a range of sexual matters and whether the student had experienced sex. Section D included questions covering students' sexual behaviour and experience of sex (both in terms of the previous 12 months and the most recent sexual encounter), contraceptive use and sexually transmissible infection (STI) diagnoses history and, for the online survey only, experiences of not having sex. Section E of the questionnaire included questions addressing alcohol, cigarette and marijuana use, while Section F addressed students' use of the Internet, technology and social media. Section G comprised a set of knowledge questions relating to STIs, blood-borne viruses, human papillomavirus (HPV) and cervical cancer, and items pertaining to hepatitis and cervical cancer vaccination. Finally, Section H assessed sources of information used and trusted by students with respect to sexual health, and asked questions about student's experiences with sexuality / relationship education.

An addition for the 2013 study was the development of an online format for the questionnaire as well as the traditional paper-and-pencil version. This change occurred in response to feedback from educational stakeholders suggesting that schools may find this methodology easier to administer given the increasing use of technology in the educational sector. School principals and their staff were given the option of choosing the version that best suited their needs. In the past when only the paper survey was used, students who were not sexually active still completed the section that asked about sexual behaviour – they responded “I have never had sex” to each question in this section. The development of the online survey allowed non-sexually active students to skip these irrelevant questions. In order to provide a similar number of questions for both sexually active and non-active students in the online survey, a series of questions was developed asking non-sexually active students about their lack of sexual experience.

SAMPLING METHOD

Obtaining the necessary sample of students has been more difficult to achieve with each iteration of this research project. In the 2008 study, there were substantial difficulties obtaining the required sample, particularly of Year 12 students. As stated in the 2008 report: “The overall response or participation rate of schools was 26% which is significantly lower than the rate achieved in 1997 (68%) and 2002 studies (54%), and of the total sample of schools almost two in every five schools approached failed to provide a formal response to the invitation to participate.” In 2008 it was suggested that both increases in demand for student participation in research and the workloads of those appointed at the school level to administer the survey were thought to adversely affect school and student participation.

Given this trend towards lower participation rates, an alternative methodology was used for the current study in order to maximise the sample size and complete the survey in the required timeframe. First, schools that were drawn for the two sampling frames used in the 2008 study were approached again in late 2012 with an ‘expression of interest’ to participate in the 2013 study. This 2008 sampling frame was of schools that were randomly selected with a probability proportional to the size of the target population, although the smaller states/territories were over-sampled. A further sample had been drawn for the 2008 study in order to meet sample size requirements. It was considered that this random list of schools from 2008 would still be representative of the school population in 2013. In all there were 704 schools in this list from all states and territories in Australia, and from all school types (Government, Independent and Catholic) resulting in 686 ‘expression of interest’ letters being sent to school principals in late 2012 asking if they may be interested in receiving an ‘invitation to participate’ in early 2013. This resulted in 62 principals returning a signed document expressing interest, and these schools were subsequently sent further information of the study when relevant state or governing body ethical approval was given.

Secondly, we created a list of 33 other schools to which principals were sent information about the study. This list was created via informal networks, expressions of interest via the Ansell newsletter, and via targeting of schools with large populations of young men. Overall, 95 school principals were sent documentation throughout 2013 asking if they would agree to their schools’ participation and 41 principals sent back signed informed consent sheets agreeing to their schools’ participation. Fifteen schools withdrew from participating after consent was given.

A second methodological difference from previous survey waves was that participating schools were asked to invite all Year 10, Year 11, and Year 12 students at their school to take part in the study. This differs from the previous studies where two classes each of Year 10 and Year 12 students were randomly selected from all classes at each year level, and where, if a class size was less than 20, an additional class at that year level was randomly selected. The change was made because of the increasing difficulty obtaining cooperation from schools around Australia. It was felt that the maximum number of students should be sampled from participating schools in order to increase the total sample of students in the study.

The third difference to previous survey wave methodologies is that, in August of 2013, a decision was made to recruit additional Australian secondary students in Years 10 to 12 via a ‘recruited online survey’ (ROS) that was independent of school recruitment. This decision was made to ensure that the survey was promoted to as wide a range of potential participants as possible. New technologies have become ubiquitous in young people’s lives with many social networking sites and the Internet becoming a part of everyday life. Given the challenges of school-based recruitment, we considered it important to recruit young people via new technologies to increase

the reach of our study and provide a broader based sample of participants. A similar recruitment strategy had previously been used by La Trobe Human Ethics Committee (HEC) approved studies in which sensitive information was collected via an online survey of young people who completed it without parental approval. We used a multi-faceted approach to recruitment for the ROS. First, marketing material was distributed via targeted organisations that had an interest in the survey topic and engage with our target audience. These organisations were asked to distribute information of the survey via handing out of physical material, information about the study on wall posters, and using their websites and social media outlets. Second, Facebook advertising was used to target potential participants. Irrespective of the recruitment method potential participants were forwarded to a survey website set up for the study (whatsitlike.org.au).

The survey used for this online version was almost identical to the online survey used for the cohort recruited via schools. Additions included; the state or territory of their school, the type of school (Government, Catholic, Independent or other), whether their school was single sex or co-ed, and the name and postcode of their school.

We consider the use of multiple recruitment strategies and data collection methodologies as a strength because it enabled the study to have exposure to a wider range of participants. As to be expected, there are some differences between the findings for the samples recruited via different methods. By combining these two samples we provide a much broader representation of Australian school students than would be provided by a single method convenience sample. We acknowledge that both recruitment methods used for this study have particular sampling biases, but we would argue that combining them provides a broader, more representative sample. Consequently, for this report we have analysed all data collected as one sample, irrespective of recruitment method or method of data collection.

Given these methodological changes, the survey results have not been weighted because, although a proportional sampling frame was used initially, random sampling has not been used throughout. Thus, the final sample obtained should be considered a convenience sample and should be interpreted as such. It should be noted, however, that participation has been achieved from a reasonable cross-section of students from Government, Independent and Catholic schools from all states and territories, thus providing a representation of the school community nationally. The total number of schools and students surveyed is outlined in Table 2.1.

ETHICS APPROVAL

The study received ethics approval from La Trobe University on 1 February 2013 (Application No. 12-115). At this stage it was possible to approach each state or territory education department for approval to conduct the study in Government schools under their jurisdiction. In addition, approval was sought from relevant Catholic education bodies where specific Catholic schools had expressed an interest in participating. Participating Independent schools did not require ethics approval from centralised bodies.

A number of states and territories were slow to respond to these requests, slowing down the data collection process. State and territory ethics approvals were received between April 2013 and late October 2013. Ethics approval (modification to the original approval) for the ROS online recruitment was sought and granted by La Trobe University's Human Ethics Committee on the 16 September 2013.

SURVEY ADMINISTRATION

School recruitment

As described above, once the relevant ethics permission had been granted, school principals who had expressed interest in participating were sent a letter inviting their school to participate in the survey and asking them to nominate a school contact person. The contact letter contained a description of the survey and its background, and processes involved in its administration. The nominated school contact person, generally, was a teacher (often Health and Physical Education), a deputy principal, or a school nurse. Schools indicated whether they wished to use paper-and-pencil or online surveys. Once agreement was gained from each school, research staff sent survey information packs including parent and student consent forms and instructions for conducting the survey. School contacts arranged for consent letters to be sent home to parents, permission slips to be returned, and established the time and place for the survey.

Survey administration was undertaken by the school contact at each school. To protect confidentiality of the students, both the paper-and-pencil and online survey were designed to be completed under exam conditions. Students were required to be seated at separate desks and asked not to talk or discuss the questionnaire while completing the survey. Students were made aware that they could withdraw from the survey at any time should they wish. Students were requested not to put identifying information on their questionnaires and, for the paper-and-pencil version of the survey, students were supplied with a sealable envelope in which to place the completed questionnaires.

Students completing the survey online were provided with a school ID number which consisted of six random letters and numbers. This allowed us to identify the school while ensuring that the anonymity of the participants was maintained.

On completion of the survey, students were provided with an information sheet showing correct answers to true/false STI, HIV / AIDS, HPV, cervical cancer and hepatitis knowledge questions asked in the survey. Students were also given a pocket-sized card containing referral telephone numbers for the Kids Helpline and Life Lines.

Online recruitment

As described above, once La Trobe University HEC approval was granted for online recruitment, information about the online survey was distributed among existing contact networks and Facebook advertising began. First responses were received on 15 October 2013 and the survey was open until 16 December 2013. Potential participants visited a website that provided them with information about the study in language and design appropriate for their age. If they chose to proceed to the survey they clicked on a tab “Take the National Survey” which took them to the Information Statement that described the study in detail and clearly specified who was eligible to participate. Participants were unable to proceed to the next stage of the survey unless they agreed that they fell within our set inclusion criteria of being an Australian secondary student currently enrolled in Years 10, 11, or 12, and that they had read the Information Statement that described the study in detail. On completion of the survey students were provided with a link to an online information sheet showing correct answers to true/false STI, HIV / AIDS, HPV, cervical cancer and hepatitis knowledge questions asked in the survey. Students were also provided with referral telephone numbers for the Kids Helpline and Life Lines. Both of these were provided in html and pdf formats.

DATA MANAGEMENT AND ANALYSIS

Online surveys were automatically saved electronically. The responses from completed paper-and-pencil surveys were entered into the online survey system by La Trobe University research staff. Throughout the project procedures were in place to protect the confidentiality of participants. No student names were collected by La Trobe research staff.

The data analysis for the current report involved a detailed description of the 2013 data, analysed by gender. In addition to ‘male’ and ‘female’, for the first time students were given the option of ‘other’ when reporting their gender; 23 students chose the option of ‘other’. These students were not included in the sample for the report due to low cell size. Furthermore, a small number of students did not provide a valid answer when asked their gender. These students were also excluded from the sample ($n=36$). Three school-based responses were also excluded due to unusable responses. Data analyses were performed using the Stata 11.2 statistical package (StataCorp, College Station, TX).

The final sample for this report included 2,136 students. In total, 63.7% ($n=1,361$) completed the school-based survey. Of the students who completed the school-based survey, the majority completed the paper-and-pencil version of the survey (63.3%) with 36.7% of students completing the online schools based survey. The recruited online survey was completed by 775 students (36.3% of the final sample).

DEMOGRAPHIC CHARACTERISTICS OF THE SAMPLE

Table 2.1 shows the sample sizes achieved in each state and territory.

Table 2.1 – Sample size and participation rate in each state and territory

State	School-based survey		Recruited online survey		Total sample size
	Number of schools	Sample size	Number of schools*	Sample size	
ACT	1	52	9	20	72
NSW	5	245	124	181	426
NT	1	58	3	4	62
QLD	3	51	59	102	153
SA	2	98	48	126	224
TAS	1	24	19	34	58
VIC	8	558	122	259	817
WA	5	272	31	47	319
Unknown	-	3		2	5
Total	26	1,361	415	775	2,136

Key: *110 students did not provide the name of their school.

These students were still included in the sample size for their state if this was provided.

CHAPTER 2 – METHODOLOGY, SURVEY INSTRUMENT AND SAMPLE

In total the report is based on data collected from 18 Government schools, seven Independent schools and one Catholic school for school-based recruitment; and students from at least 227 Government schools, 94 Independent schools, 91 Catholic schools, and 3 TAFEs for ROS recruitment (110 students did not provide the name of their school). This resulted in a total number of 436 unique schools across both recruitment methods.

As has been the case in previous studies, in 1992, 1997, 2002 and 2008, more female (61%) than male (39%) students participated in the 2013 survey. (A similar pattern was seen in both recruitment method samples). The school based sample comprised more Year 10 students (50%) than Year 11 (29%) and Year 12 (21%) students. The ROS sample, however, comprised more Year 12 students (38%) than Years 10 (30%) and 11 (32%) students. Overall, 43% of students were in Year 10, 30% in Year 11 and 27% in Year 12. The median age of Year 10 students overall was 15 years (16 for ROS sample only), and was 16 and 17 respectively for Year 11 and Year 12 students.

Table 2.2 – Gender and year level

	School based survey		Recruited online survey		Total by gender		Total by year level (N=2,136) [#]
	Male (N=550)*	Female (N=811)*	Male (N=277)*	Female (N=498)*	Male (N=827)*	Female (N=1,309)*	
	% (n)	% (n)	% (n)	% (n)	% (n)	% (n)	% (n)
Year 10	42.7 (290/679)	57.3 (389/679)	45.7 (107/234)	54.3 (127/234)	43.5 (397/913)	56.5 (516/913)	42.8 (913/2,131)
Year 11	34.1 (133/390)	65.9 (257/390)	30.2 (75/248)	69.8 (173/248)	32.6 (208/638)	67.4 (430/638)	29.9 (638/2,131)
Year 12	43.3 (125/289)	56.7 (164/289)	32.3 (94/291)	67.7 (197/291)	37.8 (219/580)	62.2 (361/580)	27.2 (580/2,131)
Total*	40.4 (550/1361)	59.6 (811/1361)	35.7 (277/775)	64.3 (498/775)	38.7 (827/2,136)	61.3 (1,309/2,136)	100.0 (2,136)

Key: * Row percentages.

Column percentages.

+ Total sample may not equal year level total because some did not report their year level.

Base: All students.

This sample appears to be more culturally diverse compared with the sample obtained for the 2008 survey. For example, 16% of the students were not born in Australia (10% in 2008) and for 15% (9% in 2008), English was not the main language spoken at home. Furthermore, over one third of students indicated that their mother (36%) and father (39%) were born overseas. The most common overseas countries of origin for students were New Zealand, United Kingdom, Philippines, Vietnam, and China. Students born overseas reported, on average, that they had been living in Australia for seven years (median = six years). Two per cent of the sample reported being Aboriginal, Torres Strait Islander, or both.

CHAPTER 2 – METHODOLOGY, SURVEY INSTRUMENT AND SAMPLE

Table 2.3 – Percentage of students and parents born in Australia

Country		Student	Mother	Father
		%	%	%
Australia	Male	80.6	64.0	60.4
	Female	86.5	63.9	61.0
	Total	84.3	63.9	60.8
	Total males	820	800	797
	Total females	1,300	1,276	1,262

Questions: 'Were you born in Australia?'

'In which country was your mother born?'

'In which country was your father born?'

Base: All students.

Students were asked to indicate which religion or faith they follow (Table 2.4). Fifty-five per cent of students indicated 'no religion or faith' compared with 14% indicating they were Catholic and 13% 'other Christian religion'. The largest categories of non-Christian religions were Islam (5%) and Buddhism (3%).

Table 2.4 – Students' religion or faith

		Males (N=827)	Females (N=1,309)	Total (N=2,136)
		% (n)	% (n)	% (n)
Catholic		13.2 (107 / 809)	14.0 (182 / 1,296)	13.7 (289 / 2,105)
Anglican		4.5 (36 / 809)	4.4 (57 / 1,296)	4.4 (93 / 2,105)
Uniting Church		1.7 (14 / 809)	2.6 (34 / 1,296)	2.3 (48 / 2,105)
Other Christian religion		11.7 (95 / 809)	13.0 (169 / 1,296)	12.5 (264 / 2,105)
Buddhism		3.3 (27 / 809)	3.2 (41 / 1,296)	3.2 (68 / 2,105)
Islam		7.3 (59 / 809)	4.2 (54 / 1,296)	5.4 (113 / 2,105)
Hinduism		0.5 (4 / 809)	1.2 (15 / 1,296)	0.9 (19 / 2,105)
Judaism		0.4 (3 / 809)	0.6 (8 / 1,296)	0.5 (11 / 2,105)
Other non-Christian religion		2.0 (16 / 809)	1.9 (25 / 1,296)	2.0 (41 / 2,105)
No religion or faith		55.4 (448 / 809)	54.9 (711 / 1,296)	55.1 (1,159 / 2,105)

Question: 'What religion or faith do you follow?'

Base: All students.

LIMITATIONS OF THE SURVEY

This study has a number of limitations.

School-based recruitment

Despite alternative methodology in the current study, for school-based recruitment it was extremely difficult to obtain large numbers of schools willing to participate and students willing to complete the survey. This situation was exacerbated by the difficulties and delays in obtaining ethical approval from some of the state and territory government departments. This resulted in low participation rates because we could not approach school principals at government schools with invitations to participate until mid to late 2013. In the expression of interest forms, many principals requested the study to be conducted in the early part of the school year; however the delay in ethical approval by some government departments may have made participation for these schools more difficult. Additionally, some schools that agreed to participate had extremely low numbers of students returning completed consent forms and completing the survey.

Non-response can affect survey results systematically when the nature of research discourages participation of particular groups of people for personal and/or cultural reasons. In terms of this survey, the requirement of parental consent may have excluded some students with parents with limited English literacy skills, and those from communities where parental permission forms are not culturally appropriate. Also, students with parents who object to research on sexual health for religious or cultural reasons may have been less likely to participate. That said, the ethnic and religious diversity of this school-based recruitment sample was greater than for any previous survey administration. For those who did participate in the research, the questionnaire favoured students with good English literacy skills and those who could complete a relatively complex set of questions in a relatively short period of time in an examination-style setting.

Online recruitment

There are also a number of limitations unique to online recruitment. First, despite rigorous efforts to ensure that participants were Years 10, 11, or 12 students enrolled at an Australian secondary school (as described above), it is possible that not all completions were conducted by people in this cohort. Second, with unrestricted online methodology there was a lack of control over conditions in which the participant completed the survey. This is in contrast with school-based recruitment where schools were instructed to conduct the survey under exam-like conditions where students had minimal external influences. Therefore, it is possible when students completed the ROS that they were distracted by their environment or influenced by technology. Furthermore we cannot be certain that the survey was completed without the influence of other people.

Overall

Using convenience sampling for both recruitment methods rather than random sampling may have affected the generalisability of the results. As previously discussed, this decision was made because of the increasing difficulty of obtaining adequate numbers of participants using more traditional methods of sample acquisition.

Chapter 3 – HIV, STIs, Hepatitis and HPV

HIV

Knowledge about HIV transmission

Knowledge about HIV transmission remains generally high. Table 3.1 shows the percentage of students who provided correct answers to HIV knowledge items. The vast majority of this sample of students knew that HIV could be transmitted by sharing needles (93%), that a woman could get HIV from having sex with a man (95%) and conversely that a man could get HIV from having sex with a woman (90%), that hugging a HIV positive person could not transmit the virus (95%), that men could get HIV from having sex with men (85%), that the contraceptive pill offers no protection against HIV for women (85%) and that a pregnant woman with HIV could pass on the infection to her baby (73%). Similarly, most students were aware that using condoms during sex offered some protection from HIV (83%), that someone who looked healthy could still pass on HIV infection (82%) and that coughing or sneezing could not transmit HIV (74%). The poorest knowledge of HIV was related to the spread of the virus by mosquitoes with only a small proportion of the sample (31%) aware that the virus cannot be transmitted in this way.

Table 3.1 – Students answering HIV transmission knowledge items correctly

Knowledge item	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
1. Could a person get HIV (the AIDS virus) by sharing a needle and syringe with someone when injecting drugs?	93.0 (761/818)	93.5 (1,221/1,306)	93.3 (1,982/2,124)
2. Could a woman get HIV (the AIDS virus) through having sex with a man?	94.3 (772/819)	95.8 (1,248/1,303)	95.2 (2,020/2,122)
3. If someone with HIV coughs or sneezes near other people, could they get the virus?	71.5 (585/818)	76.0 (990/1,302)	74.3 (1,575/2,120)
4. Could a man get HIV through having sex with a man?	85.7 (703/820)	84.5 (1,099/1,301)	85.0 (1,802/2,121)
5. Could a person get HIV from mosquitoes?	29.7 (242/814)	32.1 (418/1,302)	31.2 (660/2,116)
6. If a woman with HIV is pregnant, could her baby become infected with HIV?	66.8 (546/818)	76.4 (994/1,301)	72.7 (1,540/2,119)
7. Could a person get HIV by hugging someone who has it?	93.5 (768/821)	96.0 (1,252/1,304)	95.1 (2,020/2,125)

Table 3.1– Students answering HIV transmission knowledge items correctly (continued)

Knowledge item	Males (N=827)		Females (N=1,309)		Total (N=2,136)	
	%	(n)	%	(n)	%	(n)
8. Does the pill (birth control) protect a woman from HIV infection?	81.8	(670/819)	87.4	(1,140/1,305)	85.2	(1,810/2,124)
9. Could a man get HIV through having sex with a woman?	91.4	(751/822)	89.6	(1,166/1,302)	90.3	(1,917/2,124)
10. If condoms are used during sex does this help to protect people from getting HIV?	84.5	(693/820)	82.0	(1,068/1,303)	83.0	(1,761/2,123)
11. Could someone who looks very healthy pass on HIV infection?	78.7	(641/815)	83.4	(1,085/1,301)	81.6	(1,726/2,116)

Base: All students.

Student perception of likelihood of getting HIV infection

Students were asked the degree to which they believed they might be at risk of becoming infected with HIV / AIDS. They had five response options available: ‘never’, ‘very unlikely’, ‘unlikely’, ‘likely’ or ‘very likely’. The majority of the sample did not believe that they were at risk of getting an HIV infection. Table 3.2 shows that only 5% of the young people in the sample felt that they were ‘likely’ or ‘very likely’ to become infected with HIV.

Table 3.2 – Students’ beliefs about how likely they are to get HIV infection

	Males (N=827)		Females (N=1,309)		Total (N=2,136)	
	%	(n)	%	(n)	%	(n)
Never	24.5	(200/818)	19.2	(249/1,295)	21.3	(449/2,113)
Very unlikely	41.4	(339/818)	49.3	(639/1,295)	46.3	(978/2,113)
Unlikely	28.9	(236/818)	27.3	(354/1,295)	27.9	(590/2,113)
Likely / Very likely	5.3	(43/818)	4.1	(53/1,295)	4.5	(96/2,113)

Question: ‘How likely do you think you are personally to get HIV infection?’

Base: All students.

SEXUALLY TRANSMITTED INFECTIONS (STIs)

Knowledge about STI transmission

Knowledge about STIs other than HIV was generally poorer. Highest levels of student knowledge regarding STIs were demonstrated about the potentially asymptomatic nature of many infections, and lower levels of knowledge were seen in relation to chlamydia and herpes (see Table 3.3). The majority of students knew that someone could still pass on a sexually transmissible infection without having any obvious symptoms (89%). Fewer students were aware that chlamydia affects both men and women (60%) and can lead to sterility amongst women (56%) and that once a person has genital herpes they will always have the virus (46%).

Table 3.3 – Students giving correct answers to STI knowledge questions

Knowledge item	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
1. Someone can have a sexually transmissible infection without any obvious symptoms	83.9 (670/799)	91.3 (1,184/1,297)	88.5 (1,854/2,096)
2. Chlamydia is a sexually transmissible infection that affects only women	54.1 (431/797)	63.5 (822/1,295)	59.9 (1,253/2,092)
3. Chlamydia can lead to sterility among women	49.7 (395/795)	60.3 (779/1,292)	56.3 (1,174/2,087)
4. Once a person has caught genital herpes, then they will always have the virus	42.0 (332/790)	49.0 (633/1,293)	46.3 (965/2,083)

Base: All students.

Knowledge about STI symptoms

When asked about the symptoms of STIs (see Table 3.4) the majority of students correctly indicated that ‘pain or discomfort when urinating’ (86%), ‘a rash in the genital area’ (84%), ‘lumps and bumps in the genital area’ (84%), ‘discoloured skin in the genital area’ (78%), and ‘discharge from the penis or vagina’ (75%) were possible symptoms. Fewer students incorrectly reported that ‘muscular soreness in the thighs’ (33%) and ‘severe headache’ (27%) were STI-related.

Table 3.4 – Student’s beliefs about possible symptoms of STIs

	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
Discharge from penis or vagina	73.9 (611/827)	75.9 (993/1,309)	75.1 (1,604/2,136)
Pain or discomfort when urinating	80.4 (665/827)	88.9 (1,163/1,309)	85.6 (1,828/2,136)
Muscular soreness in the thighs	38.1 (315/827)	29.3 (383/1,309)	32.7 (698/2,136)
Lumps and bumps in genital area	77.3 (639/827)	88.0 (1,152/1,309)	83.9 (1,791/2,136)
Severe headache	28.4 (235/827)	26.8 (351/1,309)	27.4 (586/2,136)
Discoloured skin in the genital area	75.5 (624/827)	80.1 (1,049/1,309)	78.3 (1,673/2,136)
A rash in the genital area	78.1 (646/827)	87.2 (1,141/1,309)	83.7 (1,787/2,136)

Question: ‘Which of the following are possible symptoms of sexually transmissible infections (STIs)?’

Base: All students.

Note: Multiple response questions.

Prevalence of STIs

A low proportion of sexually active students reported having ever had an STI. Table 3.5 demonstrates that 2% of young men and 3% of young women report that they have ever been diagnosed with an STI.

Table 3.5 – Sexually active students who have been diagnosed with an STI

	Males (N=273)	Females (N=440)	Total (N=713)
	% (n)	% (n)	% (n)
Ever diagnosed with an STI	2.2 (6/272)	2.7 (12/439)	2.5 (18/711)

Question: ‘Have you ever been diagnosed with a sexually transmissible infection (STI)?’

Base: Sexually active students.

HEPATITIS

Knowledge about hepatitis

Students generally demonstrated poor knowledge of hepatitis. Around two-thirds of students correctly identified the risk of hepatitis C posed by injecting drug use (66%) and that hepatitis C can be transmitted by tattooing and body piercing (64%) (Table 3.6).

Table 3.6 – Students giving correct responses to statements about hepatitis

Knowledge item	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
1. People who have injected drugs are not at risk for hepatitis C	62.4 (496/795)	68.3 (882/1,291)	66.1 (1,378/2,086)
2. Hepatitis C can be transmitted by tattooing and body piercing	61.9 (490/792)	65.6 (849/1,295)	64.2 (1,339/2,087)

Base: All students.

Hepatitis vaccination

As Table 3.7 shows, more students reported that they had been vaccinated against hepatitis B (54%) compared with hepatitis A (34%). There was a general lack of understanding of the disease with a considerable proportion of students incorrectly claiming they had been vaccinated against hepatitis C (36%) when no such vaccine exists. Students were also commonly unsure of whether they had been vaccinated for hepatitis A (51%), B (34%) or C (49%).

Table 3.7 – Students vaccinated against hepatitis

	Males (N=827)	Females (N=1,309)	Total (N=2,136)	
	% (n)	% (n)	% (n)	
Hepatitis A	Yes	31.1 (248/797)	35.1 (452/1,289)	33.6 (700/2,086)
	No	19.0 (151/797)	12.6 (162/1,289)	15.0 (313/2,086)
	Don't know	49.9 (398/797)	52.4 (675/1,289)	51.4 (1,073/2,086)
Hepatitis B	Yes	46.2 (368/797)	58.9 (760/1,291)	54.0 (1,128/2,088)
	No	17.1 (136/797)	9.0 (116/1,291)	12.1 (252/2,088)
	Don't know	36.8 (293/797)	32.2 (415/1,291)	33.9 (708/2,088)

Table 3.7 – Students vaccinated against hepatitis (continued)

		Males (N=827)	Females (N=1,309)	Total (N=2,136)
		% (n)	% (n)	% (n)
Hepatitis C	Yes	33.9 (270/796)	37.5 (483/1,288)	36.1 (753/2,084)
	No	19.1 (152/796)	13.0 (167/1,288)	15.3 (319/2,084)
	Don't know	47.0 (374/796)	49.5 (638/1,288)	48.6 (1,012/2,084)

Questions: 'Have you ever been vaccinated against hepatitis A?'

'Have you ever been vaccinated against hepatitis B?'

'Have you ever been vaccinated against hepatitis C?'

Base: All students.

HUMAN PAPILLOMAVIRUS (HPV)

Knowledge about HPV

Over half of the female students had heard of the HPV virus (63%) compared with 45% of the male students (Table 3.8).

Table 3.8 – Students' knowledge of HPV

		Males (N=827)	Females (N=1,309)	Total (N=2,136)
		% (n)	% (n)	% (n)
Yes		44.5 (355/797)	63.4 (814/1,284)	56.2 (1,169/2,081)
No		41.3 (329/797)	25.7 (330/1,284)	31.7 (659/2,081)
Don't know		14.2 (113/797)	10.9 (140/1,284)	12.2 (253/2,081)

Question: 'Have you heard of the HPV virus?'

Base: All students.

Across most of the HPV items, student knowledge of HPV was poor with, in most cases, the majority of students stating they were unsure of the correct answers to knowledge items (Table 3.9). Students exhibited better knowledge of HPV in understanding that condoms do not provide complete protection against HPV during sex (56%) and that the vaccine for HPV does not have the effect of giving the person the virus (51%). The poorest knowledge was demonstrated by students not being aware that the virus does not just affect, or mainly affects women (23%), that HPV is the virus that is associated with genital warts (24%), that the vaccine can be obtained free of charge from their GP (26%), and that HPV can cause cancers of the head and throat (8%). On most of the HPV knowledge items, young women demonstrated better knowledge than young men, undoubtedly reflecting the longer period of time that the vaccine has been offered to young women.

Table 3.9 – Students knowledge of HPV (all students)

Knowledge item	Males (N=827)		Females (N=1,309)		Total (N=2,136)		
	%	(n)	%	(n)	%	(n)	
1. HPV affects only or mainly men	Yes	6.0	(40 / 666)	2.3	(25 / 1,067)	3.8	(65 / 1,733)
	No*	24.0	(160 / 666)	40.5	(432 / 1,067)	34.2	(592 / 1,733)
	Don't know	70.0	(466 / 666)	57.2	(610 / 1,067)	62.1	(1,076 / 1,733)
2. HPV affects only or mainly women	Yes	11.1	(74 / 664)	21.6	(239 / 1,109)	17.7	(313 / 1,773)
	No*	19.9	(132 / 664)	24.9	(276 / 1,109)	23.0	(408 / 1,773)
	Don't know	69.0	(458 / 664)	53.6	(594 / 1,109)	59.3	(1,052 / 1,773)
3. HPV affects both men and women	Yes*	36.7	(280 / 764)	47.2	(583 / 1,234)	43.2	(863 / 1,998)
	No	6.2	(47 / 764)	6.1	(75 / 1,234)	6.1	(122 / 1,998)
	Don't know	57.2	(437 / 764)	46.7	(576 / 1,234)	50.7	(1,013 / 1,998)
4. HPV is virus that causes genital warts	Yes*	21.8	(171 / 783)	24.5	(314 / 1,283)	23.5	(485 / 2,066)
	No	9.1	(71 / 783)	10.9	(140 / 1,283)	10.2	(211 / 2,066)
	Don't know	69.1	(541 / 783)	64.6	(829 / 1,283)	66.3	(1,370 / 2,066)
5. HPV causes cervical cancer in women	Yes*	23.9	(188 / 786)	41.0	(526 / 1,284)	34.5	(714 / 2,070)
	No	5.6	(44 / 786)	3.8	(49 / 1,284)	4.5	(93 / 2,070)
	Don't know	70.5	(554 / 786)	55.2	(709 / 1,284)	61.0	(1,263 / 2,070)
6. HPV causes cancers of the head and throat	Yes*	7.4	(58 / 786)	8.2	(105 / 1,284)	7.9	(163 / 2,070)
	No	15.4	(121 / 786)	20.0	(257 / 1,284)	18.3	(378 / 2,070)
	Don't know	77.2	(607 / 786)	71.8	(922 / 1,284)	73.9	(1,529 / 2,070)
7. Using condoms when you have sex gives complete protection against HPV	Yes	21.0	(168 / 801)	19.3	(248 / 1,286)	19.9	(416 / 2,087)
	No*	49.7	(398 / 801)	60.2	(774 / 1,286)	56.2	(1,172 / 2,087)
	Don't know	29.3	(235 / 801)	20.5	(264 / 1,286)	23.9	(499 / 2,087)
8. You can tell if you have HPV	Yes	18.0	(143 / 794)	11.9	(152 / 1,283)	14.2	(295 / 2,077)
	No*	21.9	(174 / 794)	31.5	(404 / 1,283)	27.8	(578 / 2,077)
	Don't know	60.1	(477 / 794)	56.7	(727 / 1,283)	58.0	(1,204 / 2,077)

Table 3.9 – Students knowledge of HPV (all students) (continued)

Knowledge item		Males (N=827)		Females (N=1,309)		Total (N=2,136)	
		%	(n)	%	(n)	%	(n)
9. Being infected always leads to cervical cancer	Yes	7.0	(55/789)	7.0	(89/1,272)	7.0	(144/2,061)
	No*	30.4	(240/789)	39.5	(502/1,272)	36.0	(742/2,061)
	Don't know	62.6	(494/789)	53.5	(681/1,272)	57.0	(1,175/2,061)
10. Vaccinating young people against HPV would encourage them to become sexually active	Yes	13.5	(107/794)	7.4	(94/1,277)	9.7	(201/2,071)
	No*	36.8	(292/794)	60.6	(774/1,277)	51.5	(1,066/2,071)
	Don't know	49.8	(395/794)	32.0	(409/1,277)	38.8	(804/2,071)
11. The vaccination won't work if a person is already sexually active	Yes	6.2	(49/791)	5.0	(64/1,276)	5.5	(113/2,067)
	No*	34.6	(274/791)	46.0	(587/1,276)	41.7	(861/2,067)
	Don't know	59.2	(468/791)	49.0	(625/1,276)	52.9	(1,093/2,067)
12. The vaccine gives you HPV	Yes	7.9	(63/794)	6.0	(77/1,279)	6.8	(140/2,073)
	No*	40.9	(325/794)	56.6	(724/1,279)	50.6	(1,049/2,073)
	Don't know	51.1	(406/794)	37.4	(478/1,279)	42.6	(884/2,073)
13. My GP can give me the vaccine free of charge	Yes*	19.4	(154/792)	29.9	(382/1,276)	25.9	(536/2,068)
	No	13.0	(103/792)	11.7	(149/1,276)	12.2	(252/2,068)
	Don't know	67.6	(535/792)	58.4	(745/1,276)	61.9	(1,280/2,068)
14. If a women has had the vaccination she also needs to have regular pap tests	Yes*	24.2	(192/794)	46.7	(597/1,278)	38.1	(789/2,072)
	No	8.1	(64/794)	7.5	(96/1,278)	7.7	(160/2,072)
	Don't know	67.8	(538/794)	45.8	(585/1,278)	54.2	(1,123/2,072)

Base: All students.

Key: * Correct response.

The HPV knowledge items were also investigated only among those students who had heard of HPV (Table 3.10). In general, having heard of HPV substantially increased the proportion of correct responses. For example, almost two-thirds of those students who reported having heard about HPV, correctly reported that HPV affects both men and women (62%) compared with 43% of all students. Similar differences were found in knowledge that HPV does not only affect 'only or mainly men' (54% vs 34%), or 'only or mainly women' (34% vs 23%). Additionally a higher proportion correctly reported that the vaccine does not give you HPV (66% vs 51%) and that the GP can provide the vaccine free of charge (36% vs 26%). Once again, on most of the knowledge items, young women still demonstrated better knowledge than young men despite all reporting that they had heard of HPV.

Table 3.10 – Students’ (who had heard of HPV) knowledge of HPV

Knowledge item	Males (N=355)		Females (N=814)		Total (N=1,169)		
	%	(n)	%	(n)	%	(n)	
1. HPV affects only or mainly men	Yes	12.8	(35 / 273)	2.3	(15 / 649)	5.4	(50 / 922)
	No*	45.1	(123 / 273)	58.2	(378 / 649)	54.3	(501 / 922)
	Don't know	42.1	(115 / 273)	39.5	(256 / 649)	40.2	(371 / 922)
2. HPV affects only or mainly women	Yes	23.2	(63 / 272)	32.0	(221 / 690)	29.5	(284 / 962)
	No*	35.7	(97 / 272)	33.2	(229 / 690)	33.9	(326 / 962)
	Don't know	41.2	(112 / 272)	34.8	(240 / 690)	36.6	(352 / 962)
3. HPV affects both men and women	Yes*	62.0	(209 / 337)	62.4	(477 / 765)	62.3	(686 / 1,102)
	No	8.0	(27 / 337)	7.7	(59 / 765)	7.8	(86 / 1,102)
	Don't know	30.0	(101 / 337)	29.9	(229 / 765)	30.0	(330 / 1,102)
4. HPV is virus that causes genital warts	Yes*	40.1	(140 / 349)	32.7	(263 / 805)	34.9	(403 / 1,154)
	No	14.0	(49 / 349)	15.5	(125 / 805)	15.1	(174 / 1,154)
	Don't know	45.9	(160 / 349)	51.8	(417 / 805)	50.0	(577 / 1,154)
5. HPV causes cervical cancer in women	Yes*	44.6	(156 / 350)	57.1	(460 / 805)	53.3	(616 / 1,155)
	No	6.0	(21 / 350)	4.2	(34 / 805)	4.8	(55 / 1,155)
	Don't know	49.4	(173 / 350)	38.6	(311 / 805)	41.9	(484 / 1,155)
6. HPV causes cancers of the head and throat	Yes*	13.4	(47 / 350)	10.4	(84 / 807)	11.3	(131 / 1,157)
	No	24.9	(87 / 350)	26.4	(213 / 807)	25.9	(300 / 1,157)
	Don't know	61.7	(216 / 350)	63.2	(510 / 807)	62.8	(726 / 1,157)
7. Using condoms when you have sex gives complete protection against HPV	Yes	20.7	(73 / 353)	18.7	(150 / 803)	19.3	(223 / 1,156)
	No*	62.9	(222 / 353)	67.5	(542 / 803)	66.1	(764 / 1,156)
	Don't know	16.4	(58 / 353)	13.8	(111 / 803)	14.6	(169 / 1,156)
8. You can tell if you have HPV	Yes	28.9	(101 / 350)	14.5	(116 / 801)	18.9	(217 / 1,151)
	No*	30.3	(106 / 350)	38.5	(308 / 801)	36.0	(414 / 1,151)
	Don't know	40.9	(143 / 350)	47.1	(377 / 801)	45.2	(520 / 1,151)

Table 3.10 – Students' (who had heard of HPV) knowledge of HPV (continued)

Knowledge item		Males (N=355)		Females (N=814)		Total (N=1,169)
		% (n)		% (n)		% (n)
9. Being infected always leads to cervical cancer	Yes	8.7 (30/345)		8.2 (65/796)		8.3 (95/1,141)
	No*	49.9 (172/345)		53.0 (422/796)		52.1 (594/1,141)
	Don't know	41.5 (143/345)		38.8 (309/796)		39.6 (452/1,141)
10. Vaccinating young people against HPV would encourage them to become sexually active	Yes	18.5 (65/351)		7.6 (61/799)		11.0 (126/1,150)
	No*	51.6 (181/351)		74.1 (592/799)		67.2 (773/1,150)
	Don't know	29.9 (105/351)		18.3 (146/799)		21.8 (251/1,150)
11. The vaccination won't work if a person is already sexually active	Yes	8.9 (31/350)		4.9 (39/802)		6.1 (70/1,152)
	No*	49.1 (172/350)		58.7 (471/802)		55.8 (643/1,152)
	Don't know	42.0 (147/350)		36.4 (292/802)		38.1 (439/1,152)
12. The vaccine gives you HPV	Yes	12.5 (44/351)		7.6 (61/802)		9.1 (105/1,153)
	No*	57.6 (202/351)		69.6 (558/802)		65.9 (760/1,153)
	Don't know	29.9 (105/351)		22.8 (183/802)		25.0 (288/1,153)
13. My GP can give me the vaccine free of charge	Yes*	29.8 (104/349)		38.2 (306/802)		35.6 (410/1,151)
	No	16.3 (57/349)		13.2 (106/802)		14.2 (163/1,151)
	Don't know	53.9 (188/349)		48.6 (390/802)		50.2 (578/1,151)
14. If a women has had the vaccination she also needs to have regular Pap tests	Yes*	38.6 (135/350)		58.4 (468/802)		52.3 (603/1,152)
	No	11.4 (40/350)		9.7 (78/802)		10.2 (118/1,152)
	Don't know	50.0 (175/350)		31.9 (256/802)		37.4 (431/1,152)

Base: Students who have heard of HPV.

Key: * Correct response.

HPV (Cervical cancer) vaccination

Among all students surveyed, 52% of young women reported being vaccinated against HPV (Table 3.11) compared with 68% of those young women who had heard of HPV. There was a large degree of uncertainty surrounding the vaccination, with many young women (32% all; 19% heard of HPV) and men (53% all; 39% heard of HPV) unsure of whether or not they had been vaccinated against HPV.

Table 3.11 – Vaccinated against HPV

		Males		Females		Total	
		%	(n)	%	(n)	%	(n)
Among all students	Yes	10.3	(81/ 787)	51.6	(661/ 1,280)	35.9	(742/ 2,067)
	No	36.3	(286/ 787)	16.6	(213/ 1,280)	24.1	(499/ 2,067)
	Don't know	53.4	(420/ 787)	31.7	(406/ 1,280)	40.0	(826/ 2,067)
Among only students who have heard of HPV	Yes	18.9	(66/ 350)	67.5	(543/ 805)	52.7	(609/ 1,155)
	No	41.7	(146/ 350)	13.3	(107/ 805)	21.9	(253/ 1,155)
	Don't know	39.4	(138/ 350)	19.3	(155/ 805)	25.4	(293/ 1,155)

Question: 'Have you been vaccinated against HPV, also called the cervical cancer vaccine?'

This lack of knowledge about HPV, and uncertainty about vaccination status, is disappointing to see in these young people, the first cohort to be vaccinated against HPV-related cancers. Clearer information in both promoting and delivering the vaccine appears to be necessary.

Chapter 4 – Sexual Behaviours and Feelings

PEER SEXUAL BEHAVIOUR AND BELIEFS ABOUT CONDOM USE

Students were asked a question regarding their peers' condom use (Table 4.1). Over 60% of students surveyed believed that either 'most' or 'all' young people their own age use condoms when they have sex. This estimate of peer condom use is close to reported use (59% used a condom at the last sexual encounter) and slightly higher than the 43% who used a condom 'always' in the previous year.

Table 4.1 – Students' beliefs about their peers' condom use

	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
I don't think they have sex	7.5 (62/824)	4.4 (57/1,303)	5.6 (119/2,127)
None use condoms	1.0 (8/824)	0.5 (7/1,303)	0.7 (15/2,127)
A few do	14.6 (120/824)	13.7 (178/1,303)	14.0 (298/2,127)
About half do	15.4 (127/824)	16.9 (220/1,303)	16.3 (347/2,127)
Most of them do	57.3 (472/824)	60.8 (792/1,303)	59.4 (1,264/2,127)
All of them do	4.3 (35/824)	3.8 (49/1,303)	4.0 (84/2,127)

Question: 'Do you think that people about the same age as you mostly use condoms if they have sex?'

Base: All students.

When students were asked who they thought mostly suggests using a condom during sex, many thought that either young women (38%) or young women and men together (40%) suggest condom use (Table 4.2). Few students (9%) believed that young men alone take responsibility for suggesting condom use during sex. There was some variation in reporting by gender, with young men (14%) more likely than young women (6%) to believe that boys alone were responsible for suggesting condom use during sex. Conversely, young women (47%) were more likely than young men (25%) to believe that girls were solely responsible for condom use.

Table 4.2 – Students' beliefs about who mostly suggests using a condom

	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
Boys	13.8 (113/821)	5.5 (71/1,299)	8.7 (184/2,120)
Girls	25.0 (205/821)	46.6 (605/1,299)	38.2 (810/2,120)
Both	45.9 (377/821)	36.6 (475/1,299)	40.2 (852/2,120)
I don't know	15.4 (126/821)	11.4 (148/1,299)	12.9 (274/2,120)

Question: 'For young people who use condoms when having sex, who do you think mostly suggests using a condom?'

Base: All students.

SEXUAL ATTRACTION

The majority of the sample (79% overall: 83% boys, 76% girls) reported sexual attraction exclusively to people of the opposite sex (Table 4.3). Of the 21% of students who did not report an exclusive heterosexual attraction, a proportion (6% overall: 8% boys, 4% girls) reported being attracted exclusively to people of the same sex; more (11% overall: 5% boys, 15% girls) were attracted to people of both sexes and approximately 4% (4% boys and 5% girls), were unsure about their sexual attraction.

Table 4.3 – Students' sexual attraction

	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
Only to people of the opposite sex	83.2 (683/821)	76.0 (987/1,298)	78.8 (1,670/2,119)
People of both sexes	4.9 (40/821)	15.2 (197/1,298)	11.2 (237/2,119)
Only to people of my own sex	7.9 (65/821)	4.1 (53/1,298)	5.6 (118/2,119)
Not sure	4.0 (33/821)	4.7 (61/1,298)	4.4 (94/2,119)

Question: 'Which of these statements best describes your sexual feelings at the moment? I am attracted to...'

Base: All students.

These numbers are higher than in previous surveys and may indicate an increased number of young people prepared to come out as experiencing same sex attraction. However the recruitment of an online sample may also account for increased numbers of same sex attracted young people who are known to be experienced and frequent users of online sites.

CONFIDENCE IN COMMUNICATION ABOUT SEX

Students were asked a series of questions regarding how confident they felt talking to their parents (or an adult who looks after them) about sex-related matters. As Table 4.4 shows, approximately 42% of the sample reported that they felt either ‘confident’ or ‘very confident’ talking to their parents about contraception and sexually transmissible infections including HIV. Slightly fewer students (38%) thought they could discuss with their parents matters concerning sex with confidence. The general absence of gender differences is particularly striking.

Table 4.4 – Students’ confidence in talking to parents about sex related matters

		Males (N=827)	Females (N=1,309)	Total (N=2,136)
		% (n)	% (n)	% (n)
HIV and STIs	Very confident	19.7 (162/823)	19.6 (254/1,297)	19.6 (416/2,120)
	Confident	21.4 (176/823)	22.9 (297/1,297)	22.3 (473/2,120)
	A little confident	20.7 (170/823)	20.4 (264/1,297)	20.5 (434/2,120)
	Not very confident	21.1 (174/823)	20.9 (271/1,297)	21.0 (445/2,120)
	Not at all confident	17.1 (141/823)	16.3 (211/1,297)	16.6 (352/2,120)
Decisions concerning contraception	Very confident	15.8 (130/821)	19.6 (255/1,301)	18.1 (385/2,122)
	Confident	24.0 (197/821)	24.3 (316/1,301)	24.2 (513/2,122)
	A little confident	24.9 (204/821)	21.9 (285/1,301)	23.0 (489/2,122)
	Not very confident	19.4 (159/821)	19.4 (252/1,301)	19.4 (411/2,122)
	Not at all confident	16.0 (131/821)	14.8 (193/1,301)	15.3 (324/2,122)
Sex	Very confident	15.2 (125/822)	15.3 (199/1,300)	15.3 (324/2,122)
	Confident	25.2 (207/822)	20.3 (264/1,300)	22.2 (471/2,122)
	A little confident	20.2 (166/822)	24.0 (312/1,300)	22.5 (478/2,122)
	Not very confident	20.2 (166/822)	20.0 (260/1,300)	20.1 (426/2,122)
	Not at all confident	19.2 (158/822)	20.4 (265/1,300)	19.9 (423/2,122)

Question: ‘How confident are you that you could talk to one of your parents, or an adult who looks after you, about...?’

Base: All students.

Chapter 5 – Personal Experiences

SEXUAL EXPERIENCE

Most students in the sample (69%) had experienced some form of sexual activity (Table 5.1). Sixty-eight per cent of the sample had experienced deep kissing; approximately 50% sexual touching; and over one third of the sample had given or received oral sex. Thirty-three per cent of students reported having had sex with a condom and 24% without a condom. Finally, only 9% of the sample reported having had anal sex.

Table 5.1 – Students’ reported sexual activities

Activity	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
Deep kissing	68.6 (555/809)	67.3 (877/1,303)	67.8 (1,432/2,112)
Touching a partner’s genitals	54.8 (441/805)	49.6 (640/1,291)	51.6 (1,081/2,096)
Been touched on genitals	53.5 (432/808)	51.3 (663/1,293)	52.1 (1,095/2,101)
Giving oral sex	39.2 (315/804)	38.4 (498/1,297)	38.7 (813/2,101)
Receiving oral sex	42.5 (341/803)	36.9 (476/1,290)	39.0 (817/2,093)
Anal sex	11.6 (93/802)	7.0 (90/1,295)	8.7 (183/2,097)
Sex without a condom	23.6 (189/802)	24.3 (314/1,295)	24.0 (503/2,097)
Sex with a condom	34.8 (280/805)	32.5 (421/1,295)	33.4 (701/2,100)

Question: ‘How old were you when you first had an experience of...? Please tick/select one box for each type of experience’.

Note: Percentage refers to those who gave an age for the activity.

Base: All students.

CHAPTER 5 – PERSONAL EXPERIENCES

Table 5.2 shows the proportions of students reporting experience with the eight sexual activities assessed (see Table 5.1 for list). For example, if a student is placed in the category of '1', this indicates they have reported experience in one of the eight listed sexual activities.

Just under one third (31%) of the respondents did not report any form of sexual behaviour. Roughly 26% of students reported experience with between one and three sexual activities, while 31% indicated experience with six or more. A higher proportion of young men reported experience with four or more types of sexual activities (46%) compared with young women (41%).

Table 5.2 – Students' experience with types of sexual activities

Numbers of sexual activities	Males (N=827)		Females (N=1,309)		Total (N=2,136)	
	%	(n)	%	(n)	%	(n)
None	29.4	(239/813)	32.2	(420/1,306)	31.1	(659/2,119)
1	14.3	(116/813)	14.9	(194/1,306)	14.6	(310/2,119)
2 -3	10.8	(88/813)	12.0	(157/1,306)	11.6	(245/2,119)
4-5	14.0	(114/813)	10.7	(140/1,306)	12.0	(254/2,119)
6+	31.5	(256/813)	30.2	(395/1,306)	30.7	(651/2,119)

Base: All students.

Table 5.3 shows the proportions of those who have ever had sexual intercourse. Thirty-four per cent of young men and women reported ever having vaginal or anal sexual intercourse.

Table 5.3 – Students who have ever had sexual intercourse

	Males (N=827)		Females (N=1,309)		Total (N=2,136)	
	%	(n)	%	(n)	%	(n)
Yes	33.5	(273/814)	33.8	(440/1,303)	33.7	(713/2,117)
No	64.5	(525/814)	65.1	(848/1,303)	64.9	(1,373/2,117)
Don't know	2.0	(16/814)	1.2	(15/1,303)	1.5	(31/2,117)

Question: 'Have you ever had sexual intercourse (vaginal or anal)?'

Base: All students.

Table 5.4 shows the proportion of students in each year level to have had sexual intercourse. Overall, 23% of Year 10, 34% of Year 11, and 50% of Year 12 students reported sexual intercourse.

Table 5.4 – Students who have ever had sexual intercourse by year level

	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
Year 10	22.3 (87/390)	22.9 (118/515)	22.7 (205/905)
Year 11	35.8 (73/204)	33.6 (144/428)	34.3 (217/632)
Year 12	52.1 (113/217)	49.4 (177/358)	50.4 (290/575)

Question: 'Have you ever had sexual intercourse (vaginal or anal)?'

Base: All students.

SEXUALLY ACTIVE STUDENTS

For the purpose of this report sexually active students were considered to be those who responded 'Yes' to having sexual intercourse (vaginal or anal). This resulted in a sexually active cohort of 713 students: 273 young men and 440 young women.

Number of sexual partners in previous year

As Table 5.5 shows, the vast majority of sexually active students (95%) had experienced sexual intercourse with at least one person in the year prior to being surveyed. Although most (56%) sexually active students reported having only one sexual partner in the past year, a substantial proportion (39%) of students reported having sex with more than one person. A higher proportion of young men (28%) than young women (20%) reported having sex with three or more people in the past year.

Table 5.5 – Sexually active students' reported number of sexual partners in the previous year

	Males (N=273)	Females (N=440)	Total (N=713)
	% (n)	% (n)	% (n)
I have not had sex in the past year	6.7 (18/269)	4.1 (18/437)	5.1 (36/706)
1 person	48.3 (130/269)	60.2 (263/437)	55.7 (393/706)
2 people	17.1 (46/269)	15.3 (67/437)	16.0 (113/706)
3 or more people	27.9 (75/269)	20.4 (89/437)	23.2 (164/706)

Question: 'Over the last year with how many people have you had intercourse?'

Base: Sexually active students.

Unwanted sex

Approximately one quarter of the sexually active sample reported ever having experienced unwanted sex (Table 5.6). Young women were slightly more likely than young men to have experienced sex when they did not want to (28% vs 20%), however the numbers of young men are notable.

Table 5.6 – Sexually active students who have ever had unwanted sex

	Males (N=273)	Females (N=440)	Total (N=713)
	% (n)	% (n)	% (n)
Year 10	18.4 (16/87)	27.1 (32/118)	23.4 (48/205)
Year 11	19.2 (14/73)	28.7 (41/143)	25.5 (55/216)
Year 12	21.2 (24/113)	28.4 (50/176)	25.6 (74/289)
Total*	19.8 (54/273)	28.3 (124/438)	25.0 (178/711)

Question: ‘Have you ever had sex when you didn’t want to?’

Base: Sexually active students.

Key: *Total sample size may not equal year level total because some did not report their year level.

Of the students that reported having sex when they didn’t want to, 49% cited being too drunk as a reason for their unwanted sex (Table 5.7). Other reasons included being influenced by their partner (53%), and being frightened (28%). Higher proportions of young women reported being influenced by their partner (61% vs 37%) and being frightened (34% vs 15%), whereas a higher proportion of young men were influenced by their peers (22% vs 9%).

Table 5.7 – Sexually active students who have ever had unwanted sex: reasons

	Males (N=54)	Females (N=124)	Total (N=178)
	% (n)	% (n)	% (n)
Too drunk	53.7 (29/54)	46.8 (58/124)	48.9 (87/178)
Too high	24.1 (13/54)	17.7 (22/124)	19.7 (35/178)
My partner thought I should	37.0 (20/54)	60.5 (75/124)	53.4 (95/178)
My friends thought I should	22.2 (12/54)	8.9 (11/124)	12.9 (23/178)
I was frightened	14.8 (8/54)	33.9 (42/124)	28.1 (50/178)

Base: Sexually active students who have had unwanted sex.

Note: Multiple response questions.

Condom use in the past year

As Table 5.8 demonstrates, 43% of sexually active students reported ‘always’ using condoms when they had sex in the previous year. A considerable proportion (39%) of sexually active students reported they only used condoms ‘sometimes’ when they had sex, and a small (13%) but nonetheless notable proportion ‘never’ used condoms when they had sex in the previous year.

Table 5.8 – Sexually active students’ reported condom use in the previous year

	Males (N=273)	Females (N=440)	Total (N=713)
	% (n)	% (n)	% (n)
I didn’t have sex in the last year	6.6 (18/272)	3.2 (14/437)	4.5 (32/709)
Always used condoms	47.8 (130/272)	40.7 (178/437)	43.4 (308/709)
Sometimes used condoms	34.6 (94/272)	41.9 (183/437)	39.1 (277/709)
Never used condoms	11.0 (30/272)	14.2 (62/437)	13.0 (92/709)

Question: ‘When you had sex with people in the last year, how often were condoms used?’

Base: Sexually active students.

The most recent sexual encounter

Students were asked a series of questions relating directly to the last time they had sex.

For the majority of sexually active students (55%), their most recent sexual encounter was with their current steady girlfriend or boyfriend, with a smaller proportion (37%) reporting their last sexual partner was someone they had known for a while (Table 5.9). Eight per cent of students had sex with someone they had not met before. There were gender differences in students’ relationship to their last sexual partner. Young men were more likely to have sex with someone they had not met before (14% vs 4%) but less likely than young women to have sex with a current steady girlfriend or boyfriend (44% vs 62%) the last time they had sex.

Table 5.9 – Sexually active students’ relationship to their most recent sexual partner

	Males (N=273)	Females (N=440)	Total (N=713)
	% (n)	% (n)	% (n)
Someone you had met for the first time	14.2 (38/267)	3.7 (16/431)	7.7 (54/698)
Someone you had known for a while but had not had sex with before	21.4 (57/267)	18.1 (78/431)	19.3 (135/698)
Someone you had known for a while and had had sex with before, but not your current girlfriend / boyfriend	21.0 (56/267)	16.0 (69/431)	17.9 (125/698)
Your current girlfriend / boyfriend	43.5 (116/267)	62.2 (268/431)	55.0 (384/698)

Question: ‘Was the last person you had sex with...?’

Base: Sexually active students.

Gender of partner

As Table 5.10 outlines, although the large majority of students reported a sexual partner of the opposite sex at the last sexual encounter, a considerable proportion of students had sex the last time with someone of the same sex (young men 12% versus young women 5%).

Table 5.10 – The gender of sexually active students’ most recent sexual partner

	Males (N=273)	Females (N=440)
	% (n)	% (n)
Male	11.9 (32/268)	94.7 (412/435)
Female	88.1 (236/268)	5.3 (23/435)

Question: ‘Was the last person you had sex with...?’

Base: Sexually active students.

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Age of partner

Table 5.11 shows that young men (23%) reported a higher proportion of ‘under 16 years’ age of their last sexual partner compared to young women (9%). Furthermore, young women were more likely to have older sexual partners in the 18-19 age category (30% vs 16%).

Table 5.11 – The age of sexually active students’ most recent sexual partner

	Males (N=273)	Females (N=440)	Total (N=713)
	% (n)	% (n)	% (n)
Under 16 years	22.7 (60/264)	9.4 (41/437)	14.4 (101/701)
16-17	55.3 (146/264)	51.5 (225/437)	52.9 (371/701)
18-19	15.5 (41/264)	30.0 (131/437)	24.5 (172/701)
20+	5.3 (14/264)	8.7 (38/437)	7.4 (52/701)
Not sure	1.1 (3/264)	0.5 (2/437)	0.7 (5/701)

Question: ‘How old was the last person you had sex with?’

Base: Sexually active students.

When was the last sexual encounter?

Over half of the sexually active students had had sex within the previous three weeks while only approximately 13% reported that their last encounter was over six months ago (Table 5.12).

Table 5.12 – Length of time since sexually active students last had sex

	Males (N=273)	Females (N=440)	Total (N=713)
	% (n)	% (n)	% (n)
In the last week	31.3 (84/268)	34.9 (152/436)	33.5 (236/704)
1-3 weeks ago	22.0 (59/268)	23.2 (101/436)	22.7 (160/704)
1-3 months ago	19.4 (52/268)	19.5 (85/436)	19.5 (137/704)
4-6 months ago	10.8 (29/268)	11.7 (51/436)	11.4 (80/704)
7-12 months ago	8.2 (22/268)	6.4 (28/436)	7.1 (50/704)
Over 12 months ago	8.2 (22/268)	4.4 (19/436)	5.8 (41/704)

Question: ‘When did you last have sex with this person?’

Base: Sexually active students.

Location of last sexual encounter

Most students had sex the last time at their own (37%) or their partner's (35%) house (Table 5.13). However, almost one quarter of the sample (23%) had sex in a less controlled space ('a friend's house', 'outside', 'in a car').

Table 5.13 – Location of student's last sexual encounter

	Males (N=273)	Females (N=440)	Total (N=713)
	% (n)	% (n)	% (n)
Their house	40.1 (107/267)	35.6 (155/435)	37.3 (262/702)
A partner's house	30.7 (82/267)	37.9 (165/435)	35.2 (247/702)
A friend's house	13.5 (36/267)	12.6 (55/435)	13.0 (91/702)
Outside	6.0 (16/267)	4.8 (21/435)	5.3 (37/702)
In a car	4.5 (12/267)	4.4 (19/435)	4.4 (31/702)
Other	5.2 (14/267)	4.6 (20/435)	4.8 (34/702)

Question: 'The last time you had sex, where did this take place?'

Base: Sexually active students.

Sex-related issues discussed

Before they had sex, students were most likely to discuss having sex (81%), using a condom (69%), avoiding pregnancy (50%) and how to gain sexual pleasure without having intercourse (40%) (Table 5.14). Less frequently discussed by students before they had sex was how to avoid becoming infected by HIV (23%) and STIs (28%). Young women were more likely to report having discussed avoiding pregnancy than young men (55% vs 43%).

Table 5.14 – Sexually active students who discussed sex-related issues during the last sexual encounter

	Males (N=273)	Females (N=440)	Total (N=713)
	% (n)	% (n)	% (n)
Avoiding pregnancy			
Year 10	42.7 (35/82)	61.9 (73/118)	54.0 (108/200)
Year 11	49.3 (34/69)	50.7 (72/142)	50.2 (106/211)
Year 12	39.6 (44/111)	52.8 (93/176)	47.7 (137/287)
Total*	43.1 (113/262)	54.7 (239/437)	50.4 (352/699)

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Table 5.14 – Sexually active students who discussed sex-related issues during the last sexual encounter (continued)

	Males (N=273)	% (n)	Females (N=440)	% (n)	Total (N=713)
Avoiding HIV infection					
Year 10	28.4 (23/81)	32.8 (38/116)	31.0 (61/197)		
Year 11	23.5 (16/68)	24.1 (34/141)	23.9 (50/209)		
Year 12	16.8 (18/107)	17.1 (30/175)	17.0 (48/282)		
Total*	22.3 (57/256)	23.6 (102/433)	23.1 (159/689)		
Avoiding other STIs					
Year 10	30.5 (25/82)	39.0 (46/118)	35.5 (71/200)		
Year 11	27.5 (19/69)	25.4 (36/142)	26.1 (55/211)		
Year 12	28.0 (30/107)	21.4 (37/173)	23.9 (67/280)		
Total*	28.7 (74/258)	27.4 (119/434)	27.9 (193/692)		
Sexual pleasure without intercourse					
Year 10	38.3 (31/81)	53.4 (63/118)	47.2 (94/199)		
Year 11	29.4 (20/68)	41.8 (59/141)	37.8 (79/209)		
Year 12	38.0 (41/108)	37.6 (65/173)	37.7 (106/281)		
Total*	35.8 (92/257)	43.2 (187/433)	40.4 (279/690)		
Using a condom					
Year 10	79.8 (67/84)	79.5 (93/117)	79.6 (160/201)		
Year 11	68.1 (47/69)	68.1 (96/141)	68.1 (143/210)		
Year 12	65.7 (71/108)	59.7 (105/176)	62.0 (176/284)		
Total*	70.9 (185/261)	67.8 (295/435)	69.0 (480/696)		
Having sex					
Year 10	91.7 (77/84)	83.1 (98/118)	86.6 (175/202)		
Year 11	82.4 (56/68)	78.9 (112/142)	80.0 (168/210)		
Year 12	76.2 (83/109)	80.0 (140/175)	78.5 (223/284)		
Total*	82.8 (216/261)	80.5 (351/436)	81.4 (567/697)		

Question: 'Think back to the last time you had sex. Before you had sex, did you talk to this person about...?'
 Base: Sexually active students.

Key: *Total sample size may not equal year level total because some did not report their year level.

Condom use

The majority of students (67%) reported that when they had sex the last time a condom was available (Table 5.15).

Table 5.15 – Sexually active students reporting a condom was available at the most recent sexual encounter

	Males (N=273)	Females (N=440)		Total (N=713)
	% (n)	% (n)	% (n)	
Year 10	75.9 (63/83)	75.9 (88/116)	75.9 (151/199)	
Year 11	64.3 (45/70)	67.1 (96/143)	66.2 (141/213)	
Year 12	69.6 (78/112)	56.0 (98/175)	61.3 (176/287)	
Total*	70.2 (186/265)	64.8 (282/435)	66.9 (468/700)	

Question: 'Did you or the person you had sex with have a condom the last time you had sex?'

Base: Sexually active students.

Key: *Total sample size may not equal year level total because some did not report their year level.

As Table 5.16 demonstrates, a slightly smaller proportion of students reported that a condom was actually used at the last sexual encounter (59%). A slightly higher proportion of young men (65%) than young women (55%) reported using a condom the last time they had sex. Analysis using only those who had access to a condom at their last sexual encounter, showed that if students reported having access to a condom, the majority of young men (89%) and young women (84%) actually used it. This suggests that a major factor to increasing condom use may be the availability of a condom at the time of a sexual encounter.

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Table 5.16 – Sexually active students reporting that a condom was used at the most recent sexual encounter

	Males		Females		Total	
	%	(n)	%	(n)	%	(n)
Among all sexually active students[^]						
Year 10	72.6	(61/84)	72.2	(83/115)	72.4	(144/199)
Year 11	58.6	(41/70)	55.7	(78/140)	56.7	(119/210)
Year 12	63.4	(71/112)	43.9	(76/173)	51.6	(147/285)
Total*	65.0	(173/266)	55.2	(237/429)	59.0	(410/695)
Among students with condom available[#]						
Year 10	90.5	(57/63)	93.2	(82/88)	92.1	(139/151)
Year 11	86.7	(39/45)	82.1	(78/95)	83.6	(117/140)
Year 12	88.5	(69/78)	76.3	(74/97)	81.7	(143/175)
Total*	88.7	(165/186)	83.6	(234/280)	85.6	(399/466)

Question: 'Was a condom used the last time you had sex?'

Base: [^]Sexually active students.

[#]Sexually active students who reported having a condom the last time they had sex.

Key: *Total sample size may not equal year level total because some did not report their year level.

Students who reported not using a condom at their last sexual encounter were presented with a set of reasons to account for their non-use and these are shown in Table 5.17. Being unprepared and not expecting sex ('it just happened', 27%), trusting a partner (31%), knowing a partner's sexual history (32%) and not liking condoms (30%) were the most common reasons stated for failing to use a condom at the last sexual encounter. A high proportion of students who reported 'other' indicated the use of other types of contraception (e.g. the pill) as a reason for not using a condom the last time they had sex.

**Table 5.17 – Sexually active students' reasons for not using a condom the last time they had sex
(of students who did not use a condom)**

	Males (N=93)	Females (N=192)	Total (N=285)
	% (n)	% (n)	% (n)
I don't like them	31.2 (29/93)	29.2 (56/192)	29.8 (85/285)
My partner does not like them	24.7 (23/93)	22.4 (43/192)	23.2 (66/285)
I trust my partner	29.0 (27/93)	31.8 (61/192)	30.9 (88/285)
It just happened	36.6 (34/93)	22.4 (43/192)	27.0 (77/285)
We both have been tested for HIV / STIs	15.1 (14/93)	21.9 (42/192)	19.7 (56/285)
Too embarrassed	2.2 (2/93)	2.1 (4/192)	2.1 (6/285)
I know my partner's sexual history	28.0 (26/93)	34.4 (66/192)	32.3 (92/285)
It is not my responsibility	0.0 (0/93)	1.0 (2/192)	0.7 (2/285)
Other	23.7 (22/93)	44.3 (85/192)	37.5 (107/285)

Question: 'If a condom was NOT used, why?'

Base: Sexually active students who reported not using a condom the last time they had sex.

Note: Multiple responses.

Drunk or high at last sexual encounter

Seventeen per cent of sexually active students reported that the last time they had sex they were drunk or high (Table 5.18). Young men in this sample were more likely to report having sex the last time while under the influence of alcohol or drugs than were young women (21% vs 15%).

Table 5.18 – Sexually active students who were drunk or high the last time they had sex

	Males (N=273)	Females (N=440)	Total (N=713)
	% (n)	% (n)	% (n)
Year 10	27.1 (23/85)	17.1 (20/117)	21.3 (43/202)
Year 11	16.7 (12/72)	14.6 (21/144)	15.3 (33/216)
Year 12	18.6 (21/113)	13.0 (23/177)	15.2 (44/290)
Total*	20.7 (56/270)	14.6 (64/439)	16.9 (120/709)

Question: 'Were you drunk or high last time you had sex?'

Base: Sexually active students.

Key: *Total sample size may not equal year level total because some did not report their year level.

Unwanted sex at last sexual encounter

Generally, most students reported having wanted to have sex at their last sexual encounter (Table 5.19). Eight per cent of female students reported unwanted sex compared with 5% of male students.

Table 5.19 – Students who reported that their last sex was unwanted

	Males (N=273)	Females (N=440)	Total (N=713)
	% (n)	% (n)	% (n)
Unwanted sex	5.2 (14/272)	8.0 (35/437)	6.9 (49/709)

Question: 'The last time you had sex did you want to have sex?'

Base: Sexually active students.

Feelings after sex

Overall, students expressed positive feelings after their last sexual encounter (Table 5.20). Each feeling was rated on a 5-point Likert scale with '1' being labelled 'not at all' and '5' labelled 'extremely'. Almost half of sexually active students reported that they felt 'extremely' good (46%), happy (43%), fantastic (41%) or loved (44%) after their last sexual encounter. Similarly, students were less likely to endorse the items conveying negative feelings after the last sexual encounter. Relatively small proportions of students reported feeling 'extremely' used (5%), regretful (6%), worried (5%), upset (3%) or guilty (5%) the last time they had sex. Overall, a lower proportion of young women reported high positive sentiment after sex (e.g. feeling 'extremely' good, 42% vs 52%; fantastic, 35% vs 49%). Female students were also less likely than their male counterparts to report feeling 'not at all' upset (74% vs 88%) and used (68% vs 82%) after their last sexual encounter.

Table 5.20 – Sexually active students' feelings after their last sexual encounter

		Males (N=273)		Females (N=440)		Total (N=713)	
		%	(n)	%	(n)	%	(n)
Good	Not at all	1.2	(3/261)	2.8	(12/425)	2.2	(15/686)
	Extremely	52.1	(136/261)	42.4	(180/425)	46.1	(316/686)
Upset	Not at all	87.5	(210/240)	73.8	(299/405)	78.9	(509/645)
	Extremely	2.1	(5/240)	3.5	(14/405)	3.0	(19/645)
Guilty	Not at all	70.3	(170/242)	67.7	(274/405)	68.6	(444/647)
	Extremely	2.9	(7/242)	5.7	(23/405)	4.6	(30/647)
Happy	Not at all	0.4	(1/255)	4.1	(17/412)	2.7	(18/667)
	Extremely	46.3	(118/255)	40.3	(166/412)	42.6	(284/667)
Used	Not at all	82.4	(196/238)	67.5	(274/406)	73.0	(470/644)
	Extremely	5.5	(13/238)	4.7	(19/406)	5.0	(32/644)
Fantastic	Not at all	3.9	(10/254)	8.7	(36/413)	6.9	(46/667)
	Extremely	49.2	(125/254)	35.1	(145/413)	40.5	(270/667)
Worried	Not at all	55.2	(133/241)	54.2	(219/404)	54.6	(352/645)
	Extremely	3.7	(9/241)	5.2	(21/404)	4.7	(30/645)
Loved	Not at all	13.6	(34/250)	11.8	(49/414)	12.5	(83/664)
	Extremely	41.2	(103/250)	45.2	(187/414)	43.7	(290/664)

Table 5.20 – Sexually active students’ feelings after their last sexual encounter (continued)

		Males (N=273)		Females (N=440)		Total (N=713)	
		%	(n)	%	(n)	%	(n)
Regretful	Not at all	71.4	(172/241)	71.4	(289/405)	71.4	(461/646)
	Extremely	5.4	(13/241)	5.7	(23/405)	5.6	(36/646)
Frightened	Not at all	79.1	(189/239)	79.6	(320/402)	79.4	(509/641)
	Extremely	4.2	(10/239)	2.2	(9/402)	3.0	(19/641)

Question: 'After the last time you had sex, to what extent did you feel...? Please tick / click one box to rate each feeling.'

Response options were a 5 point Likert scale with extremes being 'Not at all important' and 'Extremely important'.
Base: Sexually active students.

Contraception

Students were asked what forms of contraception, if any, were used at their last sexual encounter. Sexually active students most commonly used a condom (58%) and/or the contraceptive pill (39%) the last time they had sex (Table 5.21). Fifteen per cent of sexually active students reported using the withdrawal method at their last sexual encounter. The pill was reported by a higher proportion of young women (43%) than young men (32%) as was withdrawal (18% vs 11%), whereas condoms were reported by a higher proportion of males (63% vs 55%). Emergency contraception was not widely used with only 4% of students having accessed it.

Table 5.21 – Type of contraceptive method used at last sexual encounter

		Males (N=273)		Females (N=440)		Total (N=713)	
		%	(n)	%	(n)	%	(n)
Condom		63.4	(173/273)	54.8	(241/440)	58.1	(414/713)
The pill		32.2	(88/273)	43.0	(189/440)	38.9	(277/713)
IUD		0.7	(2/273)	1.1	(5/440)	1.0	(7/713)
Diaphragm		0.4	(1/273)	0	(0/440)	0.1	(1/713)
Emergency contraception		4.8	(13/273)	2.7	(12/440)	3.5	(25/713)
Withdrawal		11.4	(31/273)	17.7	(78/440)	15.3	(109/713)
Rhythm method		1.5	(4/273)	1.6	(7/440)	1.5	(11/713)
Injection		0.4	(1/273)	0.7	(3/440)	0.6	(4/713)

Table 5.21 – Type of contraceptive method used at last sexual encounter (continued)

	Males (N=273)	Females (N=440)		Total (N=713)
	% (n)	% (n)	% (n)	
Contraceptive implant	4.4 (12/273)	6.8 (30/440)	5.9 (42/713)	
None	17.2 (47/273)	10.5 (46/440)	13.0 (93/713)	
Other	1.8 (5/273)	0.7 (3/440)	1.1 (8/713)	

Question: 'The last time you had sex which, if any, forms of contraception did you or the person you had sex with use?

Please tick/click as many as you think apply'.

Base: Sexually active students.

Note: Multiple responses.

Sex that resulted in a pregnancy

A small proportion (5%) of sexually active students reported that they had experienced sex that resulted in pregnancy (Table 5.22). Students also expressed a degree of uncertainty regarding pregnancy, with 4% of sexually active students unsure if they had had sex that resulted in pregnancy. There were no striking gender differences.

Table 5.22 – Sexually active students who had sex that resulted in a pregnancy

	Males (N=267)	Females (N=438)		Total (N=705)
	% (n)	% (n)	% (n)	
Yes	5.6 (15/267)	4.6 (20/438)	5.0 (35/705)	
No	90.6 (242/267)	92.0 (403/438)	91.5 (645/705)	
Don't know	3.8 (10/267)	3.4 (15/438)	3.6 (25/705)	

Question: 'Have you ever had sex that resulted in a pregnancy?'

Base: Sexually active students.

NON-SEXUALLY ACTIVE STUDENTS

All non-sexually active students who completed the survey online (not paper) were asked a series of questions about their lack of sexual experience. Non-sexually active students were considered to be those who responded ‘No’ to the question “Have you ever had sexual intercourse (vaginal or anal)?” In total, 783 students; 256 young men and 527 young women completed the following section (of these students, 46% were in Year 10, 32% in Year 11 and 22% were in Year 12).

Partnership status

The majority of non-sexually active students (60%) reported ‘ever’ having a girlfriend or boyfriend, with a small proportion (3%) expressing uncertainty (Table 5.23). A higher proportion of male students (69%) than female students (56%) reported ‘ever’ having a girlfriend or boyfriend.

Table 5.23 – Non-sexually active students who have ever had a girl / boyfriend

	Males (N=256)		Females (N=527)		Total (N=783)
	% (n)		% (n)		% (n)
Yes	68.8 (176/256)		55.6 (292/525)		59.9 (468/781)
No	28.5 (73/256)		41.5 (218/525)		37.3 (291/781)
Don't know / Not sure	2.7 (7/256)		2.9 (15/525)		2.8 (22/781)

Question: ‘Have you ever had a girlfriend or boyfriend?’

Base: Non-sexually active students.

One in five non-sexually active students reported currently having a girlfriend or boyfriend (Table 5.24).

Table 5.24 – Non-sexually active students who currently have a girl/boyfriend

	Males (N=256)		Females (N=527)		Total (N=783)
	% (n)		% (n)		% (n)
Yes	19.6 (50/255)		20.2 (106/525)		20.0 (156/780)
No	79.6 (203/255)		77.9 (409/525)		78.5 (612/780)
Don't know / Not sure	0.8 (2/255)		1.9 (10/525)		1.5 (12/780)

Question: ‘Do you currently have a girlfriend or boyfriend?’

Base: Non-sexually active students.

Importance of reasons for not having sexual intercourse

Non-sexually active students reported on how important a number of reasons were for not having sexual intercourse (Table 5.25). In general, there were higher proportions of girls reporting that some reasons were ‘extremely important’: e.g., “I do not feel ready to have intercourse” (53% total; girls 64%, boys 32%), “I am proud I can say no and mean it” (54% total; girls 62%, boys 37%), “Important to be in love the first time” (50% total; girls 57%, boys 34%), and “Current (or last) partner is not willing” (48% total; girls 52%, boys 41%). Religious (19%) and cultural (17%) beliefs played less of a role in these decisions, as did parental disapproval (17%).

Table 5.25 – Non-sexually active students’ importance ratings of reasons for not having sexual intercourse

Reasons*	Importance	Males (N=256)		Females (N=527)		Total (N=783)	
		%	(n)	%	(n)	%	(n)
I do not feel ready to have sexual intercourse	Not at all	14.1	(36/255)	5.7	(30/526)	8.5	(66/781)
	Extremely	31.8	(81/255)	63.9	(336/526)	53.4	(417/781)
Current (or last) partner is not willing	Not at all	19.1	(48/251)	15.9	(83/521)	17.0	(131/772)
	Extremely	41.0	(103/251)	51.6	(269/521)	48.2	(372/772)
I am proud I can say no and mean it	Not at all	13.4	(34/254)	4.4	(23/525)	7.3	(57/779)
	Extremely	36.6	(93/254)	62.1	(326/525)	53.8	(419/779)
Against my religious beliefs	Not at all	60.1	(152/253)	45.1	(237/525)	50.0	(389/778)
	Extremely	14.2	(36/253)	21.5	(113/525)	19.2	(149/778)
Against my cultural beliefs	Not at all	57.8	(144/249)	43.4	(227/523)	48.1	(371/772)
	Extremely	9.2	(23/249)	20.7	(108/523)	17.0	(131/772)
Fear of parental disapproval	Not at all	32.9	(84/255)	22.4	(117/523)	25.8	(201/778)
	Extremely	14.1	(36/255)	18.4	(96/523)	17.0	(132/778)
Fear of pregnancy	Not at all	23.5	(59/251)	8.2	(43/525)	13.1	(102/776)
	Extremely	31.5	(79/251)	39.1	(205/525)	36.6	(284/776)
Important not to have sex before marriage	Not at all	61.6	(154/250)	44.7	(234/524)	50.1	(388/774)
	Extremely	13.6	(34/250)	19.1	(100/524)	17.3	(134/774)
Fear of damaging reputation	Not at all	40.9	(104/254)	28.9	(150/520)	32.8	(254/774)
	Extremely	11.8	(30/254)	16.4	(85/520)	14.9	(115/774)

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Table 5.25 – Non-sexually active students’ importance ratings of reasons for not having sexual intercourse (continued)

Reasons*	Importance	Males (N=256)		Females (N=527)		Total (N=783)	
		%	(n)	%	(n)	%	(n)
Not met a person I want to have sex with	Not at all	17.1	(43/252)	7.6	(40/526)	10.7	(83/778)
	Extremely	30.6	(77/252)	53.4	(281/526)	46.0	(358/778)
I worry about contracting HIV / AIDS	Not at all	18.6	(47/253)	12.2	(64/525)	14.3	(111/778)
	Extremely	24.1	(61/253)	24.8	(130/525)	24.6	(191/778)
I worry about contracting STIs	Not at all	16.1	(41/254)	9.2	(48/524)	11.4	(89/778)
	Extremely	23.2	(59/254)	26.9	(141/524)	25.7	(200/778)
Too shy / embarrassed to initiate sex	Not at all	23.4	(59/252)	11.2	(59/525)	15.2	(118/777)
	Extremely	9.1	(23/252)	18.5	(97/525)	15.4	(120/777)
Not in a relationship long enough	Not at all	11.8	(30/254)	7.2	(38/525)	8.7	(68/779)
	Extremely	28.0	(71/254)	44.6	(234/525)	39.2	(305/779)
Important to be in love the first time	Not at all	14.3	(36/252)	5.9	(31/524)	8.6	(67/776)
	Extremely	34.1	(86/252)	57.4	(301/524)	49.9	(387/776)
I don't feel physically attractive / desirable	Not at all	22.6	(57/252)	13.6	(71/522)	16.5	(128/774)
	Extremely	12.3	(31/252)	21.7	(113/522)	18.6	(144/774)
Not had the opportunity to have sex	Not at all	17.6	(44/250)	14.8	(77/522)	15.7	(121/772)
	Extremely	29.2	(73/250)	32.0	(167/522)	31.1	(240/772)

Question: ‘Here are some reasons that people may have for not having sexual intercourse. Please indicate how important these reasons are for you. Please click one answer to rate each reason.’ Response options were a 5 point Likert scale with extremes being ‘Not at all important’ and ‘Extremely important’. Adapted from Sprecher & Regan, 1996; Miller et al. 1998; Herold & Goodwin, 1981.

Base: Non-sexually active students.

Key: *Some statements are abbreviated.

Likelihood of sex

Just over one in ten non-sexually active students reported that it was ‘extremely likely’ that they would engage in sex during the next year (11%), and 50% reported that it was ‘extremely likely’ that they would engage in sex prior to marriage (Table 5.26). Approximately one third of these students (32%) felt that it was ‘not at all likely’ that they would engage in sex in the next year. Higher proportions of young men than young women thought it extremely likely they would have sex during the next year (15% vs 9%) and before they get married (57% vs 46%).

Table 5.26 – Non-sexually active students’ likelihood of having sexual intercourse

How Likely	Males (N=256)		Females (N=527)		Total (N=783)	
	%	(n)	%	(n)	%	(n)
During the next year						
Year 10	Not at all	23.4	(32/137)	40.1	(89/222)	33.7
	Extremely	11.7	(16/137)	5.9	(13/222)	8.1
Year 11	Not at all	29.0	(18/62)	37.4	(68/182)	35.3
	Extremely	16.1	(10/62)	8.8	(16/182)	10.7
Year 12	Not at all	11.1	(6/54)	31.9	(38/119)	25.4
	Extremely	20.4	(11/54)	15.1	(18/119)	16.8
Total*	Not at all	22.1	(56/254)	37.4	(196/524)	32.4
	Extremely	14.6	(37/254)	9.0	(47/524)	10.8
Before you get married						
Year 10	Not at all	14.0	(19/136)	13.2	(29/219)	13.5
	Extremely	52.9	(72/136)	42.0	(92/219)	46.2
Year 11	Not at all	17.7	(11/62)	14.2	(26/183)	15.1
	Extremely	58.1	(36/62)	44.8	(82/183)	48.2
Year 12	Not at all	5.6	(3/54)	10.0	(12/120)	8.6
	Extremely	64.8	(35/54)	55.8	(67/120)	58.6
Total*	Not at all	13.0	(33/253)	12.8	(67/523)	12.9
	Extremely	56.5	(143/253)	46.1	(241/523)	49.5

Question: ‘How likely are you to engage in sex...?’ Response options were a 5 point Likert scale with extremes being ‘Not at all likely’ and ‘Extremely likely’.

Base: Non-sexually active students.

Key: *Total sample size may not equal year level total because some did not report their year level.

Opportunity to have sex

Just over half of non-sexually active students (52%) reported that given a close relationship with a willing partner, they would have sex (Table 5.27). Young men were more likely than young women to report the likelihood of sex in these circumstances (70% vs 43%). A high proportion of students (36%) said they did not know or were unsure. More young women (42%) than young men (24%) chose this option.

Table 5.27 – Non-sexually active students who would have sex if they had the opportunity

	Males (N=256)	Females (N=527)	Totalw (N=783)
	% (n)	% (n)	% (n)
Yes	69.8 (171/245)	43.1 (221/513)	51.7 (392/758)
No	6.5 (16/245)	14.6 (75/513)	12.0 (91/758)
Don't know / Not sure	23.7 (58/245)	42.3 (217/513)	36.3 (275/758)

Question: 'If you were in a close relationship with a partner who wanted to have sex and the opportunity was available, would you have sex?'

Base: Non-sexually active students.

Feelings about not having experienced sexual intercourse

Generally, non-sexually active students expressed positive feelings about not having experienced sexual intercourse (Table 5.28). More than half of non-sexually active students reported that they felt 'not at all' upset (54%), guilty (75%), regretful (63%), or embarrassed (51%) in relation to not having experienced sexual intercourse. Just under one quarter of these students (24%) felt 'extremely' good about their lack of experience. Relatively small proportions of students reported feeling 'extremely' regretful (2%), worried (3%), upset (2%) or guilty (1%). Overall, a slightly higher proportion of young women reported high positive sentiment about not having experienced sexual intercourse (e.g. feeling 'extremely' good, 27% vs 19%; happy, 25% vs 18%; proud, 23% vs 17%). Female students were also more likely to report feeling 'not at all' upset (58% vs 45%); guilty, (79% vs 67%); regretful, (68% vs 51%); and embarrassed (55% vs 43%).

Table 5.28 – Non-sexually active students’ feelings about not having experienced sex

		Males (N=256)		Females (N=527)		Total (N=783)	
		%	(n)	%	(n)	%	(n)
Good	Not at all	10.8	(27/249)	6.0	(31/514)	7.6	(58/763)
	Extremely	18.5	(46/249)	26.9	(138/514)	24.1	(184/763)
Upset	Not at all	45.3	(112/247)	58.3	(300/515)	54.1	(412/762)
	Extremely	3.2	(8/247)	1.0	(5/515)	1.7	(13/762)
Guilty	Not at all	66.5	(165/248)	78.9	(404/512)	74.9	(569/760)
	Extremely	2.4	(6/248)	0.6	(3/512)	1.2	(9/760)
Happy	Not at all	12.6	(31/247)	6.8	(35/512)	8.7	(66/759)
	Extremely	17.8	(44/247)	24.8	(127/512)	22.5	(171/759)
Worried	Not at all	48.4	(119/246)	49.5	(253/511)	49.1	(372/757)
	Extremely	2.4	(6/246)	3.3	(17/511)	3.0	(23/757)
Regretful	Not at all	50.6	(125/247)	68.2	(350/513)	62.5	(475/760)
	Extremely	3.6	(9/247)	1.4	(7/513)	2.1	(16/760)
Fantastic	Not at all	24.2	(60/248)	15.4	(79/513)	18.3	(139/761)
	Extremely	15.7	(39/248)	20.5	(105/513)	18.9	(144/761)
Anxious	Not at all	42.0	(103/245)	45.1	(231/512)	44.1	(334/757)
	Extremely	2.0	(5/245)	4.5	(23/512)	3.7	(28/757)
Proud	Not at all	25.0	(62/248)	18.3	(94/514)	20.5	(156/762)
	Extremely	16.5	(41/248)	23.0	(118/514)	20.9	(159/762)
Embarrassed	Not at all	43.1	(106/246)	54.8	(280/511)	51.0	(386/757)
	Extremely	3.7	(9/246)	0.8	(4/511)	1.7	(13/757)

Question: ‘In relation to not having experienced sexual intercourse, to what extent do you feel...? Please click one answer to rate each feeling.’ Response options were a 5 point Likert scale with extremes being ‘Not at all’ and ‘Extremely’. Base: Non-sexually active students.

Pressure to have sex

Over 60% of non-sexually active students reported ‘no pressure’ from partners (66%; male students 70% vs female students 63%) or friends (61%; male students 49% vs female students 68%) to become sexually active (Table 5.29). Similarly, low proportions reported ‘a lot of pressure’ from parents/guardians (12%; male students 7% vs female students 14%) and friends (2%; male students 2% vs female students 2%) to remain a virgin.

Table 5.29 – Non-sexually active students’ feelings of pressure to have sex

Pressure from...	Males		Females		Total		
	%	(n)	%	(n)	%	(n)	
Girl/boyfriend to have sex with them*	No pressure	69.5	(121/174)	63.3	(183/289)	65.7	(304/463)
	A lot of pressure	2.3	(4/174)	1.4	(4/289)	1.7	(8/463)
Friends to become sexually active	No pressure	48.6	(123/253)	67.6	(352/521)	61.4	(475/774)
	A lot of pressure	4.7	(12/253)	1.7	(9/521)	2.7	(21/774)
Parents/guardians to remain a virgin	No pressure	55.5	(142/256)	39.0	(205/526)	44.4	(347/782)
	A lot of pressure	7.0	(18/256)	14.1	(74/526)	11.8	(92/782)
Peers or friends to remain a virgin	No pressure	72.4	(184/254)	59.1	(311/526)	63.5	(495/780)
	A lot of pressure	1.6	(4/254)	2.3	(12/526)	2.1	(16/780)

Question: ‘How much pressure have you received from (your)...?’ Response options on a 5-point Likert scale with extremes being ‘No pressure’ and ‘A lot of pressure’. Adapted from Sprecher & Regan, 1996.

Base: Non-sexually active students.

Key: *Non-sexually active students who reported having had a girl/boyfriend.

Chapter 6 – Fertility

Questions about students' understanding of and expectations of fertility were asked for the first time in this survey.

HAVING CHILDREN IN THE FUTURE

Table 6.1 shows that 79% of male students and 77% of female students expressed a desire to have children at some stage of their life; with 15% indicating that they didn't know. Only 7% clearly expressed no desire to have children in the future, indicating that generally students regard their fertility as important.

Table 6.1 – Students' desire to have children

	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
Yes	79.2 (640/808)	77.3 (1,002/1,297)	78.0 (1,642/2,105)
No	5.6 (45/808)	7.9 (103/1,297)	7.0 (148/2,105)
Don't know	15.2 (123/808)	14.8 (192/1,297)	15.0 (315/2,105)

Question: Would you like to have children at some stage of your life?

Base: All students.

Over half of students expressed a desire to have children when they were between the ages of 25 and 29 (Table 6.2), with smaller proportions choosing the age categories of 20-24 (20%) and 30-34 (16%). A higher proportion of young men (22%) than young women (13%) reported wanting children when they were between the ages of 30 and 34. Once again, only 7% clearly expressed no desire for children.

Table 6.2 – Age at which students want to have their first child

	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
15-19 years	1.5 (12/791)	0.8 (10/1,289)	1.1 (22/2,080)
20-24 years	17.5 (138/791)	21.3 (275/1,289)	19.9 (413/2,080)
25-29 years	52.0 (411/791)	55.5 (715/1,289)	54.1 (1,126/2,080)
30-34 years	21.7 (172/791)	13.2 (170/1,289)	16.4 (342/2,080)
35+ years	1.9 (15/791)	1.0 (13/1,289)	1.4 (28/2,080)
I don't want to have children	5.4 (43/791)	8.2 (106/1,289)	7.2 (149/2,080)

Question: By what age would you like to have your first child?

Base: All students.

FACTORS THAT COULD AFFECT FERTILITY

Students were asked whether a range of factors could affect their fertility (Table 6.3). The majority of students correctly identified a family history of infertility (74%), STIs (72%), recreational drugs (71%), smoking (66%), and excessive alcohol (69%) as potential factors in affecting their fertility. Additionally, around half of the students also correctly identified being overweight (52%), underweight (51%), and a poor diet (50%) as issues.

Table 6.3 – Students’ perception of factors that could affect their fertility

	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
Smoking	67.2 (556/827)	65.3 (855/1,309)	66.1 (1,411/2,136)
Using recreational drugs	69.5 (575/827)	72.1 (944/1,309)	71.1 (1,519/2,136)
Drinking a lot of alcohol	67.5 (558/827)	69.3 (907/1,309)	68.6 (1,465/2,136)
Being overweight	48.6 (402/827)	54.2 (709/1,309)	52.0 (1,111/2,136)
Being underweight	39.4 (326/827)	58.4 (764/1,309)	51.0 (1,090/2,136)
Sexually transmitted infections	69.0 (571/827)	74.3 (972/1,309)	72.2 (1,543/2,136)
Using mobile phones excessively	15.7 (130/827)	12.7 (166/1,309)	13.9 (296/2,136)
Too much stress	44.4 (367/827)	54.9 (718/1,309)	50.8 (1,085/2,136)
Lack of exercise	36.6 (303/827)	32.5 (426/1,309)	34.1 (729/2,136)
Poor diet	49.3 (408/827)	50.0 (654/1,309)	49.7 (1,062/2,136)
Too much coffee	23.5 (194/827)	17.1 (224/1,309)	19.6 (418/2,136)
Family history of infertility	69.4 (574/827)	77.3 (1,012/1,309)	74.3 (1,586/2,136)
Eating chocolate	11.0 (91/827)	6.5 (85/1,309)	8.2 (176/2,136)

Question: Which of the following could affect your fertility (i.e. your ability to have children) in the future?

Base: All students.

Note: Multiple responses.

DIFFICULTY HAVING CHILDREN

A similar proportion of students who wanted children, reported that they anticipated no difficulty conceiving children (45%) or that they were unsure if they would have difficulty (44%) (Table 6.4). Only 11% of these students thought that they would have trouble conceiving. A higher proportion of female students expressed uncertainty about difficulty conceiving children (52% vs 32%).

Table 6.4 – Students’ perception of their difficulty having children

	Males (N=640)	Females (N=1,002)	Total (N=1,642)
	% (n)	% (n)	% (n)
Difficulty	9.6 (61/639)	11.2 (111/995)	10.5 (172/1,634)
No difficulty	58.4 (373/639)	37.0 (368/995)	45.4 (741/1,634)
Don’t know	32.1 (205/639)	51.9 (516/995)	44.1 (721/1,634)

Question: Do you think you will ever have difficulty having children when you want to?

Base: Students who answer ‘yes’ to ‘Would you like to have children at some stage of your life?’

ATTITUDES TOWARD FERTILITY

Students were presented with a series of fertility-related statements and asked to indicate their opinion (Table 6.5). Over two thirds of students reported that they will keep away from situations that may adversely affect their fertility, whereas approximately one third felt that they were too young to worry about infertility. Relatively small numbers of students thought that people from their cultural (12%) and religious (10%) backgrounds would not have fertility problems; however, 43% of students were unsure.

Table 6.5 – Students’ attitudes towards fertility-related statements

	Males (N=827)	Females (N=1,309)	Total (N=2,136)	
	% (n)	% (n)	% (n)	
Infertility (not being able to make a baby) is not as widespread as some people think	Yes	21.1 (167/793)	15.2 (195/1,280)	17.5 (362/2,073)
	No	32.3 (256/793)	41.4 (530/1,280)	37.9 (786/2,073)
	Don’t know	46.7 (370/793)	43.4 (555/1,280)	44.6 (925/2,073)
I will keep away from situations that might put my fertility at risk	Yes	64.6 (517/800)	71.0 (914/1,287)	68.6 (1,431/2,087)
	No	13.4 (107/800)	11.3 (145/1,287)	12.1 (252/2,087)
	Don’t know	22.0 (176/800)	17.7 (228/1,287)	19.4 (404/2,087)

Table 6.5 – Students’ attitudes towards fertility-related statements (continued)

	Males (N=827)	Females (N=1,309)		Total (N=2,136)	
		% (n)	% (n)	% (n)	
I am too young to worry about infertility	Yes	34.9 (279/799)	34.0 (437/1,287)	34.3 (716/2,086)	
	No	48.6 (388/799)	56.3 (725/1,287)	53.4 (1,113/2,086)	
	Don't know	16.5 (132/799)	9.7 (125/1,287)	12.3 (257/2,086)	
I would know if I had a disease that could harm my fertility	Yes	35.9 (285/793)	26.5 (338/1,275)	30.1 (623/2,068)	
	No	35.8 (284/793)	43.1 (549/1,275)	40.3 (833/2,068)	
	Don't know	28.3 (224/793)	30.4 (388/1,275)	29.6 (612/2,068)	
I will always use a condom when having sex	Yes	39.9 (318/797)	51.7 (661/1,278)	47.2 (979/2,075)	
	No	29.5 (235/797)	26.0 (332/1,278)	27.3 (567/2,075)	
	Don't know	30.6 (244/797)	22.3 (285/1,278)	25.5 (529/2,075)	
I will always use appropriate protective gear in my sporting activities	Yes	63.8 (508/796)	67.0 (858/1,280)	65.8 (1,366/2,076)	
	No	18.8 (150/796)	14.8 (189/1,280)	16.3 (339/2,076)	
	Don't know	17.3 (138/796)	18.2 (233/1,280)	17.9 (371/2,076)	
People from my religious background don't have fertility problems	Yes	13.8 (109/792)	8.0 (102/1,274)	10.2 (211/2,066)	
	No	40.3 (319/792)	50.2 (639/1,274)	46.4 (958/2,066)	
	Don't know	46.0 (364/792)	41.8 (533/1,274)	43.4 (897/2,066)	
People from my cultural background don't have fertility problems	Yes	14.8 (117/791)	9.7 (124/1,277)	11.7 (241/2,068)	
	No	38.3 (303/791)	49.3 (630/1,277)	45.1 (933/2,068)	
	Don't know	46.9 (371/791)	41.0 (523/1,277)	43.2 (894/2,068)	

Question: 'Here are some statements about fertility. Please indicate your opinion by ticking/clicking one box for each statement.'

Base: All students.

Chapter 7 – Drinking and Drug Taking

ALCOHOL USE

The majority of students surveyed (60%) reported that they had drunk alcohol. Students were asked how often they drank alcohol and the results are shown in Table 7.1. Just over one third of students (36%) reported drinking alcohol ‘once a month or less’, but about 10% drank either weekly or more frequently. A higher proportion of young men than young women reported that they drink more than once a week (6% vs 3%).

Table 7.1 – Students’ frequency of having an alcoholic drink of any kind

		Males (N=827)	Females (N=1,309)	Total (N=2,136)
		% (n)	% (n)	% (n)
Year 10	Never drink alcohol	46.4 (181/390)	50.4 (258/512)	48.7 (439/902)
	Once a month or less	31.0 (121/390)	31.5 (161/512)	31.3 (282/902)
	2-3 days a month	12.1 (47/390)	12.1 (62/512)	12.1 (109/902)
	About 1 day a week	4.1 (16/390)	4.3 (22/512)	4.2 (38/902)
	More than once a week	6.4 (25/390)	1.8 (9/512)	3.8 (34/902)
Year 11	Never drink alcohol	41.1 (83/202)	44.2 (187/423)	43.2 (270/625)
	Once a month or less	35.6 (72/202)	37.4 (158/423)	36.8 (230/625)
	2-3 days a month	11.4 (23/202)	12.1 (51/423)	11.8 (74/625)
	About 1 day a week	5.0 (10/202)	3.8 (16/423)	4.2 (26/625)
	More than once a week	6.9 (14/202)	2.6 (11/423)	4.0 (25/625)
Year 12	Never drink alcohol	19.0 (41/216)	26.6 (96/361)	23.7 (137/577)
	Once a month or less	44.9 (97/216)	39.3 (142/361)	41.4 (239/577)
	2-3 days a month	18.5 (40/216)	20.8 (75/361)	19.9 (115/577)
	About 1 day a week	12.0 (26/216)	10.0 (36/361)	10.8 (62/577)
	More than once a week	5.6 (12/216)	3.3 (12/361)	4.2 (24/577)

Table 7.1 – Students' frequency of having an alcoholic drink of any kind (continued)

		Males (N=827)	Females (N=1,309)	Total (N=2,136)
		% (n)	% (n)	% (n)
Total*	Never drink alcohol	37.9 (307/811)	41.7 (541/1,298)	40.2 (848/2,109)
	Once a month or less	35.8 (290/811)	35.6 (462/1,298)	35.7 (752/2,109)
	2-3 days a month	13.6 (110/811)	14.6 (189/1,298)	14.2 (299/2,109)
	About 1 day a week	6.4 (52/811)	5.7 (74/1,298)	6.0 (126/2,109)
	More than once a week	6.4 (52/811)	2.5 (32/1,298)	4.0 (84/2,109)

Question: 'How often do you have an alcoholic drink?'

Base: All students.

Key: *Total sample size may not equal year level total because some did not report their year level.

When students drank they commonly consumed large quantities of alcohol (Table 7.2). Thirty-seven per cent of the sample reported consuming '3 or more drinks' on a day when they have an alcoholic drink (62% of those students who drank alcohol). Twenty-one per cent of young men (33% of male students who drank alcohol) and 11% of young women (19% of female students who drank alcohol) reported consuming 'seven or more drinks' on a day when they drank.

CHAPTER 7 – DRINKING AND DRUG TAKING

Table 7.2 – Number of drinks on a day that a student has an alcoholic drink

		Males (N=827)	Females (N=1,309)	Total (N=2,136)
		% (n)	% (n)	% (n)
Year 10	Never drink alcohol	47.0 (183/389)	50.9 (259/509)	49.2 (442/898)
	1-2 drinks	25.5 (99/389)	22.2 (113/509)	23.6 (212/898)
	3-4 drinks	8.7 (34/389)	10.4 (53/509)	9.7 (87/898)
	5-6 drinks	5.1 (20/389)	5.9 (30/509)	5.6 (50/898)
	7 or more drinks	13.6 (53/389)	10.6 (54/509)	11.9 (107/898)
Year 11	Never drink alcohol	41.3 (83/201)	43.6 (184/422)	42.9 (267/623)
	1-2 drinks	21.9 (44/201)	21.6 (91/422)	21.7 (135/623)
	3-4 drinks	8.5 (17/201)	16.1 (68/422)	13.6 (85/623)
	5-6 drinks	8.0 (16/201)	9.5 (40/422)	9.0 (56/623)
	7 or more drinks	20.4 (41/201)	9.2 (39/422)	12.8 (80/623)
Year 12	Never drink alcohol	19.0 (41/216)	26.0 (94/361)	23.4 (135/577)
	1-2 drinks	24.1 (52/216)	21.9 (79/361)	22.7 (131/577)
	3-4 drinks	12.5 (27/216)	18.0 (65/361)	15.9 (92/577)
	5-6 drinks	10.7 (23/216)	19.4 (70/361)	16.1 (93/577)
	7 or more drinks	33.8 (73/216)	14.7 (53/361)	21.8 (126/577)
Total*	Never drink alcohol	38.2 (309/809)	41.5 (537/1,294)	40.2 (846/2,103)
	1-2 drinks	24.1 (195/809)	22.0 (284/1,294)	22.8 (479/2,103)
	3-4 drinks	9.6 (78/809)	14.4 (186/1,294)	12.6 (264/2,103)
	5-6 drinks	7.4 (60/809)	10.8 (140/1,294)	9.5 (200/2,103)
	7 or more drinks	20.6 (167/809)	11.4 (147/1,294)	14.9 (314/2,103)

Question: 'On a day that you have an alcoholic drink, how many standard drinks do you usually have?

(A standard drink is a small glass of wine or middy of beer, a nip of spirits or a mixed drink.)'

Base: All students.

Key: *Total sample size may not equal year level total because some did not report their year level.

CIGARETTE USE

Table 7.3 shows that the vast majority of students (81%) have never smoked with only 4% reporting that they smoke cigarettes regularly, and 14% reporting only occasional smoking.

Table 7.3 – Frequency of cigarette use

		Males (N=827)	Females (N=1,309)	Total (N=2,136)	
		% (n)	% (n)	% (n)	
Year 10	Never	83.8 (330/394)	85.4 (439/514)	84.7 (769/908)	
	Occasionally	12.7 (50/394)	10.3 (53/514)	11.3 (103/908)	
	Regularly	3.6 (14/394)	4.3 (22/514)	4.0 (36/908)	
Year 11	Never	81.5 (167/205)	80.4 (344/428)	80.7 (511/633)	
	Occasionally	14.2 (29/205)	15.0 (64/428)	14.7 (93/633)	
	Regularly	4.4 (9/205)	4.7 (20/428)	4.6 (29/633)	
Year 12	Never	77.2 (169/219)	76.7 (277/361)	76.9 (446/580)	
	Occasionally	17.8 (39/219)	18.6 (67/361)	18.3 (106/580)	
	Regularly	5.0 (11/219)	4.7 (17/361)	4.8 (28/580)	
Total*	Never	81.4 (668/821)	81.4 (1,062/1,305)	81.4 (1,730/2,126)	
	Occasionally	14.5 (119/821)	14.1 (184/1,305)	14.3 (303/2,126)	
	Regularly	4.1 (34/821)	4.5 (59/1,305)	4.4 (93/2,126)	

Question: 'How often do you smoke cigarettes?'

Base: All students.

Key: *Total sample size may not equal year level total because some did not report their year level.

MARIJUANA USE

As Table 7.4 shows, 18% of students smoke marijuana either occasionally or regularly, with young men (21%) reporting higher use than young women (15%).

Table 7.4 – Frequency of marijuana use

		Males (N=827)	Females (N=1,309)	Total (N=2,136)
		% (n)	% (n)	% (n)
Year 10	Never	80.6 (316/392)	87.7 (450/513)	84.6 (766/905)
	Occasionally	14.5 (57/392)	10.9 (56/513)	12.5 (113/905)
	Regularly	4.9 (19/392)	1.4 (7/513)	2.9 (26/905)
Year 11	Never	82.3 (167/203)	84.3 (360/427)	83.7 (527/630)
	Occasionally	12.8 (26/203)	13.1 (56/427)	13.0 (82/630)
	Regularly	4.9 (10/203)	2.6 (11/427)	3.3 (21/630)
Year 12	Never	73.5 (161/219)	80.6 (291/361)	77.9 (452/580)
	Occasionally	21.9 (48/219)	18.3 (66/361)	19.7 (114/580)
	Regularly	4.6 (10/219)	1.1 (4/361)	2.4 (14/580)
Total*	Never	79.1 (646/817)	84.7 (1,103/1,303)	82.5 (1,749/2,120)
	Occasionally	16.2 (132/817)	13.7 (178/1,303)	14.6 (310/2,120)
	Regularly	4.8 (39/817)	1.7 (22/1,303)	2.9 (61/2,120)

Question: ‘How often do you smoke marijuana?’

Base: All students.

Key: *Total sample size may not equal year level total because some did not report their year level.

THE RELATIONSHIP BETWEEN CIGARETTE AND MARIJUANA USE

Table 7.5 demonstrates the strong association between cigarette smoking and marijuana use. The majority of student smokers (occasionally or regularly) also use marijuana occasionally or regularly (61%) with young male smokers more likely to use marijuana (67%) than young female smokers (57%). A very high proportion of male (90%) and female (94%) non-smokers have never used marijuana; conversely only a small proportion of non-smokers have ever used marijuana (boys 10% and girls 6%).

Table 7.5 – The relationship between cigarette and marijuana use

	Males (N=816)				Females (N=1,303)				Total (N=2,119)				
	Smokers		Non-smokers		Smokers		Non-smokers		Smokers		Non-smokers		
	%	(n)	%	(n)	%	(n)	%	(n)	%	(n)	%	(n)	
Marijuana use	Yes	67.1	(102/152)	10.4	(69/664)	57.2	(139/243)	5.8	(61/1,060)	61.0	(241/395)	7.5	(130/1,724)
	No	32.9	(50/152)	89.6	(595/664)	42.8	(104/243)	94.3	(999/1,060)	39.0	(154/395)	92.5	(1,594/1,724)

Questions: ‘How often do you smoke cigarettes?’ and

‘How often do you smoke marijuana?’

Base: Students providing a valid response to both cigarette and marijuana use questions.

Chapter 8 – Internet, Technology and Social Media

FREQUENCY OF USE OF NEW TECHNOLOGIES

Students were asked about the frequency of use of some common forms of electronic communication and digital technologies. As Table 8.1 shows, the most frequently used technologies/communication methods (at least once a week or more) were using social networking sites (93%), sending and receiving instant messages (91%), text messaging (88%), mobile phone calls (86%), and sending/receiving emails (72%). Social networking sites were used at least once a day by 87% of all students. In general, a slightly higher proportion of young women reported daily use of these frequently used digital technologies. In contrast, 56% of male students reported using online games at least once a week compared with only 16% of female students.

Table 8.1 – Students’ use of digital technologies

	Send or receive emails	Males (N=827)		Females (N=1,309)		Total (N=2,136)	
		% (n)	% (n)	% (n)	% (n)		
Send or receive emails	At least once a day	38.3 (314/820)	50.6 (657/1,299)	45.8 (971/2,119)			
	At least once a week	28.8 (236/820)	25.3 (328/1,299)	26.6 (564/2,119)			
	Less than once a week	16.6 (136/820)	13.7 (178/1,299)	14.8 (314/2,119)			
	Don’t know	8.7 (71/820)	6.9 (89/1,299)	7.6 (160/2,119)			
	Haven’t done	7.7 (63/820)	3.6 (47/1,299)	5.2 (110/2,119)			
Send or receive a text message on a mobile phone	At least once a day	65.7 (537/818)	79.6 (1,036/1,301)	74.2 (1,573/2,119)			
	At least once a week	17.2 (141/818)	12.1 (157/1,301)	14.1 (298/2,119)			
	Less than once a week	7.8 (64/818)	4.2 (54/1,301)	5.6 (118/2,119)			
	Don’t know	3.3 (27/818)	1.9 (25/1,301)	2.5 (52/2,119)			
	Haven’t done	6.0 (49/818)	2.2 (29/1,301)	3.7 (78/2,119)			
Use a mobile phone to make or receive phone calls	At least once a day	54.2 (439/810)	63.2 (822/1,300)	59.8 (1,261/2,110)			
	At least once a week	27.5 (223/810)	25.2 (327/1,300)	26.1 (550/2,110)			
	Less than once a week	11.0 (89/810)	8.5 (110/1,300)	9.4 (199/2,110)			
	Don’t know	3.1 (25/810)	1.3 (17/1,300)	2.0 (42/2,110)			
	Haven’t done	4.2 (34/810)	1.9 (24/1,300)	2.8 (58/2,110)			

Table 8.1 – Students’ use of digital technologies (continued)

		Males (N=827)	Females (N=1,309)	Total (N=2,136)
		% (n)	% (n)	% (n)
Go to a social networking site like Facebook or Twitter	At least once a day	81.2 (663/817)	90.5 (1,178/1,302)	86.9 (1,841/2,119)
	At least once a week	8.6 (70/817)	4.5 (59/1,302)	6.1 (129/2,119)
	Less than once a week	3.8 (31/817)	1.2 (16/1,302)	2.2 (47/2,119)
	Don’t know	1.6 (13/817)	0.4 (5/1,302)	0.9 (18/2,119)
	Haven’t done	4.9 (40/817)	3.4 (44/1,302)	4.0 (84/2,119)
Send or receive instant messages or other chat messages	At least once a day	76.7 (626/816)	83.7 (1,090/1,302)	81.0 (1,716/2,118)
	At least once a week	11.2 (91/816)	8.5 (111/1,302)	9.5 (202/2,118)
	Less than once a week	4.5 (37/816)	3.1 (40/1,302)	3.6 (77/2,118)
	Don’t know	2.2 (18/816)	0.9 (12/1,302)	1.4 (30/2,118)
	Haven’t done	5.4 (44/816)	3.8 (49/1,302)	4.4 (93/2,118)
Use video chat such as Skype, FaceTime, Google chat or iChat	At least once a day	16.8 (137/814)	13.1 (170/1,298)	14.5 (307/2,112)
	At least once a week	20.5 (167/814)	16.6 (216/1,298)	18.1 (383/2,112)
	Less than once a week	29.0 (236/814)	37.7 (489/1,298)	34.3 (725/2,112)
	Don’t know	8.6 (70/814)	8.6 (112/1,298)	8.6 (182/2,112)
	Haven’t done	25.1 (204/814)	24.0 (311/1,298)	24.4 (515/2,112)
Send or receive messages on Twitter (tweet)	At least once a day	6.7 (55/817)	9.2 (119/1,297)	8.2 (174/2,114)
	At least once a week	6.9 (56/817)	4.7 (61/1,297)	5.5 (117/2,114)
	Less than once a week	9.3 (76/817)	13.6 (176/1,297)	11.9 (252/2,114)
	Don’t know	2.9 (24/817)	3.5 (45/1,297)	3.3 (69/2,114)
	Haven’t done	74.2 (606/817)	69.1 (896/1,297)	71.1 (1,502/2,114)

Table 8.1 – Students’ use of digital technologies (continued)

		Males (N=827)	Females (N=1,309)	Total (N=2,136)
		% (n)	% (n)	% (n)
Create or interact with a post on Tumblr	At least once a day	11.5 (94/815)	30.9 (400/1,296)	23.4 (494/2,111)
	At least once a week	6.5 (53/815)	10.2 (132/1,296)	8.8 (185/2,111)
	Less than once a week	7.7 (63/815)	9.3 (121/1,296)	8.7 (184/2,111)
	Don’t know	3.3 (27/815)	2.2 (28/1,296)	2.6 (55/2,111)
	Haven’t done	70.9 (578/815)	47.5 (615/1,296)	56.5 (1,193/2,111)
Write a blog or comment on someone else’s blog	At least once a day	8.6 (70/816)	13.2 (172/1,300)	11.4 (242/2,116)
	At least once a week	8.8 (72/816)	13.2 (171/1,300)	11.5 (243/2,116)
	Less than once a week	11.0 (90/816)	12.6 (164/1,300)	12.0 (254/2,116)
	Don’t know	5.4 (44/816)	5.6 (73/1,300)	5.5 (117/2,116)
	Haven’t done	66.2 (540/816)	55.4 (720/1,300)	59.6 (1,260/2,116)
Play online games against other players	At least once a day	32.2 (263/818)	7.5 (98/1,302)	17.0 (361/2,120)
	At least once a week	24.1 (197/818)	8.4 (109/1,302)	14.4 (306/2,120)
	Less than once a week	18.3 (150/818)	18.3 (238/1,302)	18.3 (388/2,120)
	Don’t know	4.4 (36/818)	8.6 (112/1,302)	7.0 (148/2,120)
	Haven’t done	21.0 (172/818)	57.2 (745/1,302)	43.3 (917/2,120)

Question: ‘Please indicate how frequently you do each of the following activities. Please tick/click one box for each activity’

Adapted from *Social Media, Social Life: How Teens View Their Digital Lives*, Common Sense Media, 2012.

Base: All students.

WAYS OF ACCESSING THE INTERNET

Students reported that they used a variety of methods to regularly access the Internet (Table 8.2). The vast majority of students regularly accessed the Internet using computers (95%) and mobile phones (85%), with less common methods being iPads/tablets (42%) and iPod touch (or similar) devices (39%). The use of hand-held gaming devices was reported more frequently by young men (29%) than young women (9%).

Table 8.2 – Students reporting regularly accessing the Internet

		Males (N=827)	Females (N=1,309)	Total (N=2,136)
		% (n)	% (n)	% (n)
Computer	Yes	95.2 (767/806)	94.5 (1,210/1,281)	94.7 (1,977/2,087)
	No	3.0 (24/806)	4.9 (63/1,281)	4.2 (87/2,087)
	Don't know	1.9 (15/806)	0.6 (8/1,281)	1.1 (23/2,087)
Mobile phone	Yes	84.2 (664/789)	86.0 (1,103/1,282)	85.3 (1,767/2,071)
	No	14.5 (114/789)	13.2 (169/1,282)	13.7 (283/2,071)
	Don't know	1.4 (11/789)	0.8 (10/1,282)	1.0 (21/2,071)
iPad / or similar tablet device	Yes	41.4 (307/741)	41.5 (508/1,224)	41.5 (815/1,965)
	No	54.9 (407/741)	56.5 (691/1,224)	55.9 (1,098/1,965)
	Don't know	3.6 (27/741)	2.0 (25/1,224)	2.7 (52/1,965)
iPod Touch / or similar device	Yes	42.0 (309/735)	37.6 (458/1,219)	39.3 (767/1,954)
	No	54.3 (399/735)	59.8 (729/1,219)	57.7 (1,128/1,954)
	Don't know	3.7 (27/735)	2.6 (32/1,219)	3.0 (59/1,954)
Hand-held gaming device	Yes	28.9 (212/734)	9.0 (108/1,199)	16.6 (320/1,933)
	No	65.9 (484/734)	85.8 (1,029/1,199)	78.3 (1,513/1,933)
	Don't know	5.2 (38/734)	5.2 (62/1,199)	5.2 (100/1,933)

Question: 'Which are the ways you regularly access the Internet? Please tick / click one box for each device.'

Base: All students.

REGULAR USE OF SOCIAL NETWORKING SITES

Facebook was the most commonly used social networking site with 91% of students reporting regular use (Table 8.3). Many students also reported that they regularly used YouTube (82%) and Instagram (49%). Only 2% of students reported that they did not use any forms of social networking.

Table 8.3 – Students’ use of social networking sites

	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
Facebook	90.1 (745/827)	91.6 (1,199/1,309)	91.0 (1,944/2,136)
Twitter	15.8 (131/827)	17.2 (225/1,309)	16.7 (356/2,136)
GooglePlus	12.0 (99/827)	6.8 (89/1,309)	8.8 (188/2,136)
Tumblr	18.1 (150/827)	45.6 (597/1,309)	35.0 (747/2,136)
YouTube	84.8 (701/827)	79.4 (1,039/1,309)	81.5 (1,740/2,136)
MySpace	1.7 (14/827)	0.9 (12/1,309)	1.2 (26/2,136)
reddit	11.1 (92/827)	3.3 (43/1,309)	6.3 (135/2,136)
Instagram	37.0 (306/827)	55.8 (731/1,309)	48.6 (1,037/2,136)
Flickr	2.4 (20/827)	1.3 (17/1,309)	1.7 (37/2,136)
Other	11.6 (96/827)	8.9 (117/1,309)	10.0 (213/2,136)
I don’t use social networking	3.1 (26/827)	1.5 (20/1,309)	2.2 (46/2,136)

Question: ‘Which of the following social networking sites do you use regularly? Please tick/click as many as apply.’

Base: All students.

Note: Multiple responses.

SEXUAL EXPERIENCES USING NEW TECHNOLOGIES

Over 50% of all students reported receiving a sexually explicit written text message (Table 8.4) while over one third had sent such a text message (43%), or received a sexually explicit photo of someone else (42%). Just over a quarter of young people reported that they sent a sexually explicit photo of themselves (26%). Higher proportions of young men sent (14% vs 5%) and received (45% vs 40%) sexually explicit photos or videos of someone else, and reported using social media for sexual reasons (31% vs 16%).

Table 8.4 – Students' sexual experiences using new technologies

		Males (N=827)	Females (N=1,309)	Total (N=2,136)
		% (n)	% (n)	% (n)
Sent a sexually explicit written text message	Yes	45.5 (368 / 809)	41.2 (537 / 1,303)	42.9 (905 / 2,112)
	No	47.3 (383 / 809)	55.3 (721 / 1,303)	52.3 (1,104 / 2,112)
	Don't know	7.2 (58 / 809)	3.5 (45 / 1,303)	4.9 (103 / 2,112)
Received a sexually explicit written text message	Yes	54.5 (439 / 806)	54.1 (701 / 1,296)	54.2 (1,140 / 2,102)
	No	39.6 (319 / 806)	43.7 (566 / 1,296)	42.1 (885 / 2,102)
	Don't know	6.0 (48 / 806)	2.2 (29 / 1,296)	3.7 (77 / 2,102)
Sent a sexually explicit nude or nearly nude photo or video of yourself	Yes	27.2 (219 / 805)	25.1 (327 / 1,302)	25.9 (546 / 2,107)
	No	68.9 (555 / 805)	73.1 (952 / 1,302)	71.5 (1507 / 2,107)
	Don't know	3.9 (31 / 805)	1.8 (23 / 1,302)	2.6 (54 / 2,107)
Sent a sexually explicit nude or nearly nude photo or video of someone else	Yes	13.8 (111 / 804)	5.4 (70 / 1,296)	8.6 (181 / 2,100)
	No	82.6 (664 / 804)	93.1 (1,206 / 1,296)	89.1 (1870 / 2,100)
	Don't know	3.6 (29 / 804)	1.5 (20 / 1,296)	2.3 (49 / 2,100)
Received a sexually explicit nude or nearly nude photo or video of someone else	Yes	45.1 (363 / 805)	39.9 (518 / 1,298)	41.9 (881 / 2,103)
	No	51.2 (412 / 805)	58.6 (761 / 1,298)	55.8 (1,173 / 2,103)
	Don't know	3.7 (30 / 805)	1.5 (19 / 1,298)	2.3 (49 / 2,103)
Used a social media site for sexual reasons	Yes	30.6 (247 / 808)	15.9 (207 / 1,300)	21.5 (454 / 2,108)
	No	63.7 (515 / 808)	80.9 (1,051 / 1,300)	74.3 (1566 / 2,108)
	Don't know	5.7 (46 / 808)	3.2 (42 / 1,300)	4.2 (88 / 2,108)

Question: 'Have you ever experienced or done any of the following? Please tick / click one box for each activity.'

Adapted from Lenhart, 2009; Drouin and Landgraff, 2012.

Base: All students.

Table 8.5 displays the same behaviours as above, but only among sexually active students. There were higher proportions of reported behaviours in the sexually active cohort compared with those indicated in the sample of all students. Most sexually active students reported receiving (84%) and sending (72%) sexually explicit text messages, and receiving a sexually explicit nude or nearly nude photo or video of someone else (70%), while 50% reported sending a sexually explicit nude or nearly nude photo or video of themselves. Nearly one third of sexually active students have used a social media site for sexual reasons (31%) while 17% have sent a sexually explicit image of someone else. Higher proportions of young men than young women reported sending (25% vs 11%) and receiving (76% vs 66%) explicit images of someone else and using social media for sexual reasons (45% vs 23%).

Table 8.5 – Sexually active students’ sexual experiences using new technologies

		Males (N=273)		Females (N=440)		Total (N=713)	
		%	(n)	%	(n)	%	(n)
Sent a sexually explicit written text message	Yes	73.6	(195/265)	71.6	(313/437)	72.4	(508/702)
	No	18.9	(50/265)	26.3	(115/437)	23.5	(165/702)
	Don't know	7.6	(20/265)	2.1	(9/437)	4.1	(29/702)
Received a sexually explicit written text message	Yes	82.7	(220/266)	85.0	(368/433)	84.1	(588/699)
	No	10.9	(29/266)	13.6	(59/433)	12.6	(88/699)
	Don't know	6.4	(17/266)	1.4	(6/433)	3.3	(23/699)
Sent a sexually explicit nude or nearly nude photo or video of yourself	Yes	48.1	(127/264)	51.3	(223/435)	50.1	(350/699)
	No	47.4	(125/264)	46.9	(204/435)	47.1	(329/699)
	Don't know	4.6	(12/264)	1.8	(8/435)	2.9	(20/699)
Sent a sexually explicit nude or nearly nude photo or video of someone else	Yes	25.2	(67/266)	11.3	(49/433)	16.6	(116/699)
	No	71.1	(189/266)	87.1	(377/433)	81.0	(566/699)
	Don't know	3.8	(10/266)	1.6	(7/433)	2.4	(17/699)
Received a sexually explicit nude or nearly nude photo or video of someone else	Yes	75.9	(201/265)	65.7	(285/434)	69.5	(486/699)
	No	20.4	(54/265)	33.2	(144/434)	28.3	(198/699)
	Don't know	3.8	(10/265)	1.2	(5/434)	2.2	(15/699)
Used a social media site for sexual reasons	Yes	44.7	(119/266)	23.2	(101/436)	31.3	(220/702)
	No	48.5	(129/266)	74.8	(326/436)	64.8	(455/702)
	Don't know	6.8	(18/266)	2.1	(9/436)	3.9	(27/702)

Question: ‘Have you ever experienced or done any of the following? Please tick / click one box for each activity.’

Adapted from Lenhart, 2009; Drouin and Landgraff, 2012.

Base: Sexually active students.

CYBERBULLYING

Students were asked to indicate how often they had been exposed to a series of Internet/mobile communication behaviours. These behavioural situations involved potential bullying examples using the Internet or mobile phone and are commonly considered to constitute ‘cyberbullying’ (Table 8.6). Overall, relatively low proportions of students reported being bullied frequently. The most common bullying behaviours occurring every few weeks or more were receiving prank mobile phone calls (10%) and being deliberately ignored or left out of things over the Internet (9%). For all ‘cyberbullying’ examples the vast majority of young people reported that it had not happened to them in the last couple of months.

Table 8.6 – Cyberbullying in the last couple of months

		Males (N=827)	Females (N=1,309)	Total (N=2,136)
		% (n)	% (n)	% (n)
I was sent threatening emails	Did not happen	92.1 (744/808)	93.5 (1,211/1,295)	93.0 (1,955/2,103)
	Once or twice	4.5 (36/808)	3.8 (49/1,295)	4.0 (85/2,103)
	Every few weeks	0.5 (4/808)	0.7 (9/1,295)	0.6 (13/2,103)
	Once a week or more	3.0 (24/808)	2.0 (26/1,295)	2.4 (50/2,103)
I was sent nasty messages on the Internet e.g. through Facebook Chat, Skype and Tumblr	Did not happen	82.8 (662/800)	81.0 (1,047/1,293)	81.7 (1,709/2,093)
	Once or twice	11.0 (88/800)	13.0 (168/1,293)	12.2 (256/2,093)
	Every few weeks	2.1 (17/800)	2.4 (31/1,293)	2.3 (48/2,093)
	Once a week or more	4.1 (33/800)	3.6 (47/1,293)	3.8 (80/2,093)
I was sent nasty text messages	Did not happen	86.9 (692/796)	86.8 (1,122/1,293)	86.8 (1,814/2,089)
	Once or twice	7.8 (62/796)	8.3 (107/1,293)	8.1 (169/2,089)
	Every few weeks	1.9 (15/796)	2.5 (32/1,293)	2.3 (47/2,089)
	Once a week or more	3.4 (27/796)	2.5 (32/1,293)	2.8 (59/2,089)
I received prank calls on my mobile phone	Did not happen	66.8 (537/804)	69.0 (891/1,292)	68.1 (1,428/2,096)
	Once or twice	21.3 (171/804)	21.7 (280/1,292)	21.5 (451/2,096)
	Every few weeks	5.2 (42/804)	4.5 (58/1,292)	4.8 (100/2,096)
	Once a week or more	6.7 (54/804)	4.9 (63/1,292)	5.6 (117/2,096)

Table 8.6 – Cyberbullying in the last couple of months (continued)

		Males (N=827)		Females (N=1,309)		Total (N=2,136)	
		%	(n)	%	(n)	%	(n)
Someone used my username or profile, pretending to be me to hurt someone else	Did not happen	91.3	(734/804)	95.4	(1,234/1,294)	93.8	(1,968/2,098)
	Once or twice	4.6	(37/804)	2.4	(31/1,294)	3.2	(68/2,098)
	Every few weeks	1.5	(12/804)	0.8	(10/1,294)	1.1	(22/2,098)
	Once a week or more	2.6	(21/804)	1.5	(19/1,294)	1.9	(40/2,098)
Someone sent my private emails, messages, pictures or videos to others	Did not happen	87.8	(703/801)	92.0	(1,188/1,292)	90.4	(1,891/2,093)
	Once or twice	7.0	(56/801)	5.3	(68/1,292)	5.9	(124/2,093)
	Every few weeks	1.4	(11/801)	1.2	(15/1,292)	1.2	(26/2,093)
	Once a week or more	3.9	(31/801)	1.6	(21/1,292)	2.5	(52/2,093)
Mean or nasty messages or pictures were sent or posted about me to websites, e.g. Facebook, Twitter or Tumblr	Did not happen	89.7	(714/796)	88.3	(1,136/1,287)	88.8	(1,850/2,083)
	Once or twice	5.8	(46/796)	6.8	(88/1,287)	6.4	(134/2,083)
	Every few weeks	1.9	(15/796)	1.9	(25/1,287)	1.9	(40/2,083)
	Once a week or more	2.6	(21/796)	3.0	(38/1,287)	2.8	(59/2,083)
Mean or nasty messages or pictures were sent about me to other students' mobile phones	Did not happen	92.0	(734/798)	93.3	(1,202/1,289)	92.8	(1,936/2,087)
	Once or twice	4.1	(33/798)	3.9	(50/1,289)	4.0	(83/2,087)
	Every few weeks	1.1	(9/798)	1.2	(15/1,289)	1.2	(24/2,087)
	Once a week or more	2.8	(22/798)	1.7	(22/1,289)	2.1	(44/2,087)
I was deliberately ignored or left out of things over the Internet	Did not happen	80.4	(643/800)	76.7	(991/1,292)	78.1	(1,634/2,092)
	Once or twice	11.3	(90/800)	13.8	(178/1,292)	12.8	(268/2,092)
	Every few weeks	2.8	(22/800)	4.3	(56/1,292)	3.7	(78/2,092)
	Once a week or more	5.6	(45/800)	5.2	(67/1,292)	5.4	(112/2,092)

Question: 'In the past two months how often have these things happened to you? Please tick/click one box for each statement.'

Adapted from the *Australian Covert Bullying Prevalence Survey*, 2007.

Base: All students.

Chapter 9 – Sexuality and Relationship Education

All the participants in this survey are students in Australian secondary schools and, as all state and territory curriculum frameworks mandate some form of sexuality education, it is a reasonable expectation that they are able to report on the nature and quality of that education. Some religious schools may choose not to meet this requirement, but commonly they do provide some version of sexuality education in line with their religious ethos. In addition to schools programs, most students use a range of other information resources to answer their questions about sexual health, some of them more reliable than others.

SOURCES OF INFORMATION

Students were asked to list the sources they used for information regarding sexual health (Table 9.1). Students could choose as many as applied to them. Students most commonly consulted either their mother (36%) or a female friend (41%), used the school sexual health program (43%) or an Internet website (44%) for information on sexual health. Doctors (29%) were also nominated as a fairly common source of information for sexual health, as were teachers (28%). A higher proportion of young women reported getting advice on sexual health from the school program (45% vs 39%), their doctor (32% vs 25%), Internet web sites (47% vs 39%), an older brother or sister (16% vs 13%), their mother (43% vs 27%), and a female friend (51% vs 27%), whereas young men tended to use their father more as a source of information (23% vs 16%). A higher proportion of young men hadn't sought advice (16% vs 10%).

Table 9.1 – Sources of information used by students for sexual health

	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
Doctor	24.7 (204/827)	32.2 (421/1,309)	29.3 (625/2,136)
Community Health Service	11.0 (91/827)	10.4 (136/1,309)	10.6 (227/2,136)
School program	38.5 (318/827)	45.3 (593/1,309)	42.7 (911/2,136)
School counsellor	10.6 (88/827)	10.8 (141/1,309)	10.7 (229/2,136)
School nurse	11.3 (93/827)	11.8 (155/1,309)	11.6 (248/2,136)
Teacher	28.1 (232/827)	28.4 (372/1,309)	28.3 (604/2,136)
Youth worker	10.3 (85/827)	8.6 (113/1,309)	9.3 (198/2,136)
Internet websites	38.8 (321/827)	46.7 (611/1,309)	43.6 (932/2,136)
Mother	26.6 (220/827)	42.6 (558/1,309)	36.4 (778/2,136)
Father	23.2 (192/827)	15.6 (204/1,309)	18.5 (396/2,136)
Female friend	26.7 (221/827)	50.7 (664/1,309)	41.4 (885/2,136)
Male friend	29.4 (243/827)	25.4 (333/1,309)	27.0 (576/2,136)
Older brother / sister	12.5 (103/827)	16.1 (211/1,309)	14.7 (314/2,136)
Other	6.3 (52/827)	6.4 (84/1,309)	6.4 (136/2,136)
Never sought advice	16.0 (132/827)	10.2 (134/1,309)	12.5 (266/2,136)

Question: 'Please mark all of the sources of information below that you have ever used for advice about sexual health, and whether you trust that source.'

Base: All students.

Note: Multiple responses.

SEXUALITY AND RELATIONSHIP EDUCATION AT SCHOOL

Most students (86%) reported that they had received sex education at school with approximately 4% expressing uncertainty (Table 9.2). Around one in ten students reported having no sex education.

Table 9.2 – Prevalence of sexuality / relationship education

	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
Yes	84.2 (645/766)	87.1 (1104/1,268)	86.0 (1,749/2,034)
No	11.9 (91/766)	9.5 (120/1,268)	10.4 (211/2,034)
Don't know	3.9 (30/766)	3.5 (44/1,268)	3.6 (74/2,034)

Question: 'Have you ever had sexuality / relationship education at school?'

Base: All students

Over three quarters of students reported that sexuality and relationship education had been taught in Health and Physical Education classes (80%) while just less than a third (31%) indicated that it was a part of Science and Biology classes (Table 9.3). For 13% of students it was part of a Religious Instruction program.

Table 9.3 – Subjects in which sexuality / relationship education was taught

	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
Health / Physical Education	75.2 (622/827)	82.3 (1,077/1,309)	79.5 (1,699/2,136)
Science / Biology	28.7 (237/827)	31.7 (415/1,309)	30.5 (652/2,136)
Religious Instruction / Education	14.6 (121/827)	11.5 (150/1,309)	12.7 (271/2,136)
Other	7.3 (60/827)	8.3 (108/1,309)	7.9 (168/2,136)
Not had sex / relationship education at school	10.5 (87/827)	6.3 (83/1,309)	8.0 (170/2,136)

Question: 'Was sexuality / relationship education part of ...? Please tick / click as many as you think apply.'

Base: All students.

Note: Multiple responses.

Sexuality and relationship education was mainly taught between Years 7 and 10 (Table 9.4) with over 60% of students indicating that the topic was taught in Years 7-8 (64%) and/or Years 9-10 (68%).

Table 9.4 – Level of schooling that sexuality/relationship education was taught

	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
Prep / kindergarten	1.2 (10/827)	0.2 (3/1,309)	0.6 (13/2,136)
Years 1-4	5.3 (44/827)	3.4 (45/1,309)	4.2 (89/2,136)
Years 5-6	34.2 (283/827)	38.7 (506/1,309)	36.9 (789/2,136)
Years 7-8	63.2 (523/827)	65.0 (851/1,309)	64.3 (1,374/2,136)
Years 9-10	63.4 (524/827)	71.0 (929/1,309)	68.0 (1,453/2,136)
Years 11-12	18.9 (156/827)	20.6 (270/1,309)	19.9 (426/2,136)
Not had sex / relationship education at school	9.6 (79/827)	7.0 (92/1,309)	8.0 (171/2,136)

Question: 'At what level of schooling did you have sexuality/relationship education?

Please tick/click as many as you think apply.'

Base: All students.

Note: Multiple responses.

CHAPTER 9 – SEXUALITY AND RELATIONSHIP EDUCATION

Pleasingly, as Table 9.5 demonstrates, sexuality and relationship education appears to be predominantly taught by teachers (83%), however someone from outside the school (34%), and/or the school nurse (22%) were also commonly involved. Fewer students reported that school counsellors (10%) or chaplains (4%) were involved in the subject's delivery.

Table 9.5 – People teaching sexuality / relationship education

	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
A teacher	79.2 (655/827)	85.0 (1,113/1,309)	82.8 (1,768/2,136)
A school nurse	20.0 (165/827)	22.5 (294/1,309)	21.5 (459/2,136)
A chaplain	5.3 (44/827)	3.4 (44/1,309)	4.1 (88/2,136)
School counsellor	9.3 (77/827)	10.3 (135/1,309)	9.9 (212/2,136)
Someone from outside school	31.1 (257/827)	36.4 (476/1,309)	34.3 (733/2,136)
Someone else	2.8 (23/827)	3.1 (41/1,309)	3.0 (64/2,136)
Not had sex / relationship education at school	8.8 (73/827)	6.3 (82/1,309)	7.3 (155/2,136)

Question: 'Was sexuality / relationship education taught by? Please tick / click as many as you think apply.'

Base: All students.

Note: Multiple responses.

Despite the high numbers of students who reported receiving sexuality education, not all found it met their needs. Less than half of students (45%) found their sexuality and relationship education to be 'very' or 'extremely' relevant (Table 9.6). In particular, 8% of male students found that the subject was not relevant at all, a proportion that was slightly higher than for female students (6%).

Table 9.6 Students' assessment of sexuality / relationship education relevance

	Males (N=827)	Females (N=1,309)	Total (N=2,136)
	% (n)	% (n)	% (n)
Not relevant at all	8.1 (63/778)	5.7 (72/1,272)	6.6 (135/2,050)
Somewhat relevant	40.1 (312/778)	41.9 (533/1,272)	41.2 (845/2,050)
Very relevant	28.0 (218/778)	28.4 (361/1,272)	28.2 (579/2,050)
Extremely relevant	15.4 (120/778)	17.6 (224/1,272)	16.8 (344/2,050)
Not had sex / relation education at school	8.4 (65/778)	6.5 (82/1,272)	7.2 (147/2,050)

Question: 'How relevant did you / do you find sexuality / relationship classes?'

Base: All students.

In this context students were given the opportunity to provide some commentary on their sexuality education and the results are reported below.

COMMENTARY ON SEXUALITY EDUCATION

"The information that they gave us sounds good in theory, but in reality, it's not at all realistic. For instance, we were taught how to say no to sex if we aren't comfortable with the situation, but none of the techniques would realistically be effective. It seems like the teachers are rushing through the course to get it out of the way and to sort of 'tick the box' of having covered the content, but we can all tell that they don't endorse what they are saying."

"We have a great sex ed class. Even though I personally knew a lot beforehand, it was good to see that people were taught important life lessons such as understanding sexuality and gender as well as safe sex."

For the first time in conducting these surveys we invited students to contribute some commentary about the sexuality education they received. The question asked was:

"If there is anything you would like to tell us about your sexuality education at school and how useful it has been for you, please write your comments here".

In all 474 students responded to this invitation, 270 from the ROS sample and 203 from the school-based sample. These samples were coded separately. Responses were coded according to the student expressing **positivity** about their sexuality education, **negativity** about it, or if they highlighted that something was missing from their education program. If a response communicated that something was missing from the student's sexuality education program it was not automatically coded as negative as well as missing; students had to make a negative statement about their education in addition to also receive a negative code.

For example:

"It was all about biology and contraception. Nothing about sex for pleasure or LGBT+"

was coded as missing. Whereas:

"Inadequate, not enough focus on establishing positive consent or personal decision making, came off as generally sex-negative"

was coded as both negative and missing.

The ROS sample was overwhelmingly critical of their sexuality and relationship education. Over half of the sample (58%) commented negatively on their education and a similar proportion (52%) identified at least one area which they felt their education program did not address adequately. Those in the sample collected in schools were more complimentary about their sexuality education with over half (57%) of comments being positive, around a third (36%) negative and just 16% specifically mentioning topics missing from their education.

The difference in the samples may be explained by a bias in those schools we were able to recruit. In these schools a willingness to participate in the survey may have been as a result of the school community prioritising sexuality education and comprehensive programs being provided. It is also worth noting that there was a higher proportion of same sex attracted young people in the ROS sample. These young people have been shown to be highly likely to find their sexuality education inadequate or irrelevant (Hillier et al., 2010).

This possibility was further supported when the responses which described elements of sexuality education which were missing were subjected to further analysis to explore key themes. By far the most commonly reported missing topic amongst the online sample was advice and education for members of the LGBTIQ community (66%).

"There was no mention of LGBTQ+ in any context".

Others noted the lack of information relevant to their own experiences or to those of their classmates:

"My school didn't talk about safe sex for LBGTIQ people, and as a result i know a few same sex attracted girls are under the impression that they don't have to worry about getting STIs from having sex with other girls".

Many students from the ROS sample also mentioned a lack of information on sexual practices (19%). They referred to the lack of information on the practicalities of how to have sex, how to enjoy it and sometimes specifically to sexual practices other than penis in vagina intercourse such as anal or oral sex.

"It's very brief and it was done pretty awkwardly, they don't go into detail about the logistics of the sexual acts"

"It was all about biology and contraception. nothing about sex for pleasure or LGBT+"

"I don't feel as if sexuality education covers alternative forms of sex enough, e.g. same-sex couples and oral sex".

Contraception and condom use were also both reported as missing by many respondents (16%). Often respondents reported that they were not educated about the proper use of contraception because they felt that their school supported an abstinence approach:

"I think sexual education should focus more on being realistic and explaining about proper types of contraception. teenagers are always going to have sex, so school should be educating us how to safely do that rather than make us ashamed"

"It was basically scare tactics. 'Why not just wait? If you don't you'll get diseased and die.' – Non-direct quote, but the intent was still there. It would have been much more helpful to give information about contraception etc. It would have at least been interesting in any case :)"

"All the information I have found has not been through school. We only learnt about what condoms were, (didn't even see one or explain how to use it effectively) and that women got pregnant. The other stuff was all "Puberty Ed" stuff. Nothing on sexuality, pleasure, contraception other than condoms / the pill? ... but I think that's downright stupid. I had to research everything myself so that I didn't end up pregnant, diseased, or in serious pain. :/"

Several respondents commented that they felt their sexuality education did not include enough information or emphasis on the importance of consent in sexual relationships (21%). For example:

"It was useless. It only talked about STI's, not about consent etc"

"Sexuality education has been very helpful but i believe there needs to be more open discussion and education about consent and sexual orientation".

Related to this, many students said that they would have liked more information on the emotional side of sexual relationships and how to build a healthy, positive sexual relationship:

"It was done through more of a biological lens and taught us about STI prevention and anatomy but did not include many topics that are very important, such as communication with partners, different relationship dynamics or unusual circumstances, actually getting pleasure from sex etc"

"I remember it being rather clinical, it seems like the only emotional side of things that was explored was 'don't force girls to have sex with you' which doesn't apply to me because I'm gay".

Most of the topics that were frequently mentioned by those in the ROS sample were also commonly mentioned by the school-based sample. The two largest differences between the samples were that LGBTIQ issues were far less common amongst the school-based sample (21%, but still the second most commonly reported) and that issues about STIs/STDs were far more likely to be reported by the school-based sample (36%, and the most commonly mentioned topic as opposed to 12% online).

Most of the students who mentioned STIs/STDs acknowledged that they had been part of their education but felt that there was insufficient information or that the information was not presented clearly:

"We had one lesson talking about STDs in Year 10 and that has been all. More talk about relationships and STDs would be good"

"Didn't concentrate much on STDs, mostly concentrated on chances of unplanned pregnancy-schools should discuss the causes, symptoms and long term consequences of STDs".

Despite the negative comments and the deficits reported it is important to acknowledge the many positive comments made by young people about their sexuality education, and to compliment those teachers who are providing it:

"Extremely beneficial in teaching me safe sex practices, a must for all teenagers!"

"Our school provided a fairly competent sexual education class in Year 8, 9 and 10. Most students aren't sexually active at that stage - I was towards the end of it. But I feel sexuality education at school would be more relevant if all year groups were taught it, when the chances of the students being sexually active are greater and they have more to gain from an education."

"I already felt that I knew about sexual relationships already due to just general accumulated knowledge, but sex education in school helped to clear some things and terms up."

"It's actually been very good and helped out a lot."

"I am glad I had SEX ED. It was super helpful."

Sexuality education is clearly a topic on which many young people are prepared to offer an opinion, using its relevance to their lives as a criterion to determine its value. It is clear that schools vary in their capacity to make judgements about what students need to know and in delivering on those perceptions. Listening to the voices of young people and trusting in their sense of what is important is likely to be a useful strategy for improving our programs in the future.

Conclusion

Despite ongoing concerns for the sexual wellbeing of young people, the data from this study demonstrate that the vast majority of young people are confident in their decision-making around their sexual health. Those who are sexually active are, by and large, having sex that they enjoy and feel positive about. The majority of those who are not having intercourse are feeling comfortable and confident that this is what they want. This is clearly a strength of young people and one which should be recognised in the approaches taken to sexual health promotion and sexuality education targeting young people.

Young people seek information from parents, siblings and friends who they trust and are positive about the contribution school programs can make to their knowledge and capability. All these sources need to be recognised as valuable, strengthened and resourced to continue their contribution. It is interesting to note that, despite some concerns that this is not the case, nearly all the young people in the study have received some sexuality education at school. Called to question by the study is the quality of that education and these data suggest that this should become the issue of concern for advocates rather than the more common push for mandating.

Young people's increasing use of the Internet as a source of sexual health information also needs to be seen as a strength which can, with the development of skills improving critical enquiry, give them access to reliable and confidential information in areas where questions may be too hard to ask. The use of social media is almost universal and clearly plays a large role in the negotiation and development of sexual relationships. This includes the now common sending of explicit messages and images, most of which appear to occur within relationships. Policies and programs designed to improve the sexual health of young people cannot work against this trend but clearly now must work with it to minimise damage and enable young people to develop an ethical framework to guide them in this territory. At best this phenomenon presents a clear opportunity for getting messages out to a large number of young people in ways we could not envisage a decade ago.

There are inevitably a number of concerns that arise from studies that explore the sexual health of young people, and this one is no exception. Those young people who are under pressure of various kinds to have unwanted sex, and the role alcohol plays in these encounters, have remained matters of concern for as long as we have been doing this research. The poor knowledge of STIs remains despite the best efforts of educators, although a better working knowledge of the symptoms (if they are present) has become evident over the years. Inadequate levels of condom use and effective consistent contraception are ongoing areas of worry which change little but which demand our ongoing efforts to improve.

There is still much to be done to help young people negotiate the exciting, confusing and sometimes treacherous territory of sexual relationships as they look to reliable and trusted sources for help.

It has been a privilege to research these issues over the last twenty years, to document the rate of social change and those things which remain constant no matter what. The most abiding of these constants has been the inherent ethical and common sense approach of Australian young people to making the transition to an adulthood in which sexual relationships can be a positive part.

References

- Cross, D., Shaw, T., Hearn, L., Epstein, M., Monks, H., Lester, L., & Thomas, L. (2009). *Australian Covert Bullying Prevalence Study (ACBPS)*. Child Health Promotion Research Centre, Edith Cowan University, Perth.
- Drouin, M., and Landgraff, C. (2012). Texting, sexting, and attachment in college students' romantic relationships. *Computers in Human Behavior*. 28, 444-449.
- Herold, E. S., & Goodwin, M. S. (1981). Adamant virgins, potential nonvirgins and nonvirgins. *Journal of Sex Research*, 17(2), 97-113.
- Hillier, L., Jones, T., Monagle, M., Overton, N., Gahan, L., Blackman, J. & Mitchell, A. (2010) Writing Themselves In 3: The third national study on the sexual health and wellbeing of same sex attracted and gender questioning young people. *Australian Research Centre In Sex, Health & Society Monograph Series No. 78*. Melbourne.
- Lenhart, A. (2009). *Teens and Sexting: Pew Research Centre*. http://www.pewinternet.org/~ /media/ /Files/Reports/2009/PIP_Teens_and_Sexting.pdf
- Miller, B. C., Norton, M. C., Fan, X., & Christopherson, C. R. (1998). Pubertal development, parental communication, and sexual values in relation to adolescent sexual behaviors. *The Journal of Early Adolescence*, 18(1), 27-52.
- Social Media, Social Life: How Teens View Their Digital Lives (2012). Common Sense Media. <http://www.commonsensemedia.org/research/social-media-social-life>
- Sprecher, S., & Regan, P. C. (1996). College virgins: How men and women perceive their sexual status. *Journal of Sex Research*, 33(1), 3-15.

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