

SEXUAL HEALTH NEWS

WELCOME TO ISSUE 12, WINTER 2021



HSE Sexual Health and Crisis Pregnancy Programme launch new messages for condom campaign. Read more about this on page 4.

INSIDE THIS ISSUE

- Updates from the HSE Sexual Health and Crisis Pregnancy Programme
- Experiences & Health Behaviours of Menopausal Women in Ireland
- LGBT+ Cervical Screening Study
- Pelvic Floor Exercises – Preventative and Curative Role
- Galway Active*Consent Programme

GENERAL NEWSLETTER INFORMATION

CONTENTS

SEXUAL HEALTH AND PREGNANCY PROGRAMME UPDATES | Page 4–6

- Because getting frisky doesn't have to be so risky
- Sláintecare and HSE Pilot online STI testing service has been a great success!
- National Condom Distribution Service (NCDS)
- HSE Syphilis Testing and Communications Campaign
- 'Healthy Sexuality and Relationship Development: the education and support needs of young people in care' toolkit – now available to staff on new Tusla hub

OTHER UPDATES | Page 7–10

- Harassment, Harmful Communications and Related Offences Act 2020
- OH MY GOSHH! Podcasts
- DASH (Drugs, Alcohol and Sexual Health)
- Sex And Love Therapy (S.A.L.T.)
- Sexual health education: WISE and SHIFT
- National World AIDS Day Run: Saturday, 4th December

RESOURCES | Page 11–12

- 'What you need to know about contraception' Information Guide
- Sexual and Mental Health Films
- Sexual Health West – Sex Educated

REPORTS AND RESEARCH ARTICLES | Page 13–16

- Menstrual health: a definition for policy, practice, and research
- LGBT+ cervical screening study: differences in screening experiences and participation
- Experiences and health behaviours of menopausal women in Ireland

TRAINING | Page 17

- The Foundation Programme in Sexual Health Promotion
- In The Know

FEATURES | Page 18–22

- NUI Galway's Active* Consent Programme
- Pelvic Floor Exercises a preventative and curative role
- LIVING: a World AIDS Day 2021 initiative

SEXUAL HEALTH PROMOTION IN ACTION | Page 22–25

- Let's talk about the Menopause
- 'Help!' How Galway parents feel when talking to their children about relationships and sexuality

Every effort has been made by the Health Service Executive (HSE) to ensure that the information in this publication is accurate. The information contained in this newsletter should in no way be a substitute for seeking expert advice from the appropriate health professional or agency.

The information that is written by the different contributors in the Sexual Health News is the view of the authors and not that of the HSE.

Some photos may be posed by models for illustration purposes only.

Welcome to ISSUE 12, Sexual Health News (SHN) magazine

Tracey Tobin, Editor and HSE Health Promotion Officer,
HSE South East Community Health Care



We are delighted to bring you issue 12 of Sexual Health News. This is our only issue of 2021 as both Anita and I were redeployed to provide important support to the COVID-19 contact tracing service and vaccination programme throughout 2020 and 2021.

The enthusiasm of this issue's contributors has made bringing it together a really enjoyable process, and in turn we hope you find the issue an enjoyable and educational read. The topics included are interesting and thought provoking, and as ever we bring updates from the various sexual health services across the country and from the HSE Sexual Health and Crisis Pregnancy Programme. The Menopause and the LGBT+ Cervical Screening Study, a feature on the preventative and curative role of pelvic floor muscle exercises, Galway's Active*Consent Programme are examples of some of the topics covered in this issue and I hope they will give some insight to these aspects of sexual health promotion.

Previous issues are available at:

<https://www.sexualwellbeing.ie/for-professionals/research/sexual-health-newsletter/>

Call for Submissions

If you have any feedback on the newsletter please contact
Tracey Tobin tracy.tobin@hse.ie or Anita Ghafoor-Butt anita.butt@hse.ie

Editorial Team

Tracey Tobin

SHN Editor and HSE Health Promotion Officer, HSE South East Community Health Care.

Anita Ghafoor-Butt

Co-Editor and Communications Manager, HSE Sexual Health and Crisis Pregnancy Programme

SHN is funded by the Sexual Health and Crisis Pregnancy Programme, HSE Health and Wellbeing

Because getting frisky doesn't have to be so risky

Muireann Kirby, Campaigns Officer, HSE Communications
and Anita Ghafoor-Butt, Communications Manager, SHCPP

The HSE Sexual Health and Crisis Pregnancy Programme (SHCPP) updated its campaign promoting condom use in November 2021.

The campaign, which first launched in November 2019, is aimed at young adults (aged 18–30) who are at increased risk of acquiring sexually transmitted infections (STIs).

The campaign objectives are to:

- build awareness about the risk of acquiring an STI
- emphasise the role of condoms in minimising this risk
- sign-post people to www.sexualwellbeing.ie for further information about sexual health and wellbeing

The new creative will appear across multiple channels. Since late November posters appeared in social venues in Dublin, Cork, Limerick, Galway and Kilkenny, and digital posters appeared in areas with high footfall in Dublin. Later in December digital ads will appear across various platforms including YouTube, Facebook and Instagram.

The campaign has been developed because

- Over 11,000 STIs were diagnosed in Ireland in 2020
- 18 to 30-year-olds are more likely to be diagnosed with an STI than other age groups

The campaign was created with young adults at the heart of the communications approach. Focus groups with 18-30-year-olds informed the campaign in their feedback, they said that they were looking for clear information and messaging about sexual health, with humour plus an educational element to it.

The updated campaign continues this approach. The consistent style of the creative, aims to build on awareness of the campaign among the target audience by introducing new messages. Based on a 2020 omnibus, 31% of the target audience can recall seeing or hearing advertising relating to the sexual health campaign and 44% of this group say they would more likely use a condom after seeing the ads.

Social media messaging will start from Monday 13th December.

We would like your help to promote the campaign. You can do this by supporting the launch on social media by sharing the messages via your social media channels.

The campaign can be found across Sexual Wellbeing social media channels.

Twitter: [@_respectprotect](https://twitter.com/_respectprotect) Facebook: [@hserespectprotect](https://www.facebook.com/hserespectprotect) Instagram: [@hserespectprotect](https://www.instagram.com/hserespectprotect)

The video element of this campaign will be launched later in December.

'Sex: Fact or Fiction?' is a series of engaging videos aiming to debunk myths around sexual health. In a 2020 omnibus 35% of 18-30-year-olds had seen the campaign and 42% said they would be more likely to use a condom after seeing the ads. In focus groups, viewers felt that the videos were a novel way of providing education about sexual health, providing an appetite to learn more.

The new series was shot in UCD and UL campuses in November 2021, showing real students responding to statements relating to sexual health – revealing whether they think the statement is fact or fiction. The reaction is often a mixture of humour, curiosity or surprise. The videos are judgement free and reinforce the importance of condom use to reduce the risks of STIs. The videos provide accurate, accessible information which may help to challenge the myths surrounding sexual health.

The videos align with the different poster messages, and encourage discussions on these topics, with a view to normalising broader discussions around sexual health and wellbeing. They will be placed across different platforms targeting the younger audience such as Youtube, Sky on Demand, Twitch, Spotify Sessions, Livescore and across social media platforms.

Sláintecare and HSE Pilot online STI testing service has been a great success!

Caroline Hurley, Project Manager, SHCPP

In 2021, the HSE Sexual Health and Crisis Pregnancy Programme (SHCPP) piloted an online STI testing service in partnership with online provider SH:24 and integrated with HSE public STI clinics. Individuals who required further testing and treatment were referred to public STI clinics, ensuring a seamless individual experience.

The project was piloted in counties Dublin, Cork and Kerry, allowing anyone with an address in these counties to order a free STI test to their home.



- 13,749 STI test kits were ordered during the pilot (with almost 5,000 test kits ordered in the first 24 hours!)
- 734 (8%) had a reactive result requiring further care
- 57% of service users had never accessed a sexual health service before
- 99.4% of users rated the service 4 or 5 out of 5

'Without this testing opportunity I wouldn't have known that I needed treatment. I'm very grateful for this wonderful project.'

An evaluation report of the pilot is currently being completed.

The online STI testing service has continued on a temporary basis and is currently available in Cavan, Cork, Dublin, Donegal, Galway, Kerry, Kildare, Laois, Leitrim, Louth, Mayo, Meath, Monaghan, Offaly, Roscommon, Sligo and Wicklow.

Funding has been secured to roll-out the service nationally from 2022 and a tender procurement process is underway.

Visit <https://sh24.ie/> to order a test.

This project has received funding from the Government of Ireland's Sláintecare Integration Fund 2019 under Grant Agreement Number ID57.



National condom distribution service (NCDS)

Owen Brennan, Research Assistant, SHCPP

Following the cyberattack in May, the usual process for ordering condoms and lubricant sachets is still not operational. Registered services wishing to place orders can do so by email to owen.brennan@hse.ie

Please include the following details in your email:

- Products and quantities required
- Delivery address (including Eircode)
- Contact details (Name, email address, phone no.)

If your organisation is not yet registered, please find the application form and Terms and Conditions for using the service here <https://www.sexualwellbeing.ie/for-professionals/national-condom-distribution-service/terms-and-conditions/>

HSE syphilis testing and communications campaign

Caroline Hurley, Project Manager & Anita Ghafoor-Butt, Communications Manager SHCPP

In June 2021, Public Health declared a national outbreak of early infectious syphilis (EIS) and convened an outbreak control team (OCT) tasked with developing and implementing an action plan to address the outbreak. The OCT includes representation from HPSC, Public Health, HSE SHCPP, clinical services, laboratories, antenatal services, NGOs and community representatives.

A key response to the outbreak was to increase access to syphilis/STI testing and diagnostics. Three pop-up syphilis testing clinics were run in Dublin in July (15th, 22nd and 29th) through a joint collaboration between Public Health, HSE SHCPP, HIV Ireland's MPower programme, the National Viral Reference Laboratory (NVRL) and public STI clinics.

Some public STI clinics made walk-in testing available and the free online/home STI testing service was promoted in the counties where it was available. A communications response was initiated to raise awareness of the increase in syphilis among gay, bisexual and other men who have sex with men (gbMSM) and young people aged 18 plus to encourage those who may be at risk of syphilis to get tested. Messages were promoted across HSE Sexual Wellbeing digital channels; and in collaboration with community partners, messages targeting gbMSM were promoted across digital channels, in social venues and on Grinder.



The campaign messages for gbMSM and young people aged 18 plus will continue to be advertised across man2man and Sexual Wellbeing digital channels.

Information on syphilis is available here www.sexualwellbeing.ie/syphilis

Further information is available on the man2man website <https://man2man.ie/stis/syphilis/> and the HIV Ireland Mpower webpage <https://mpower.hivireland.ie/syphilis/>

'Healthy sexuality and relationship development: the education and support needs of young people in care', toolkit – now available to staff on new Tusla hub

Moira Germaine, Education and Training Manager, SHCPP



Following the disruption of the recent cyberattack, the 'Healthy Sexuality and Relationship Development: the education and support needs of young people in care', toolkit, is now available to staff on the new Tusla hub.

The resource, launched in March 2021, was developed by Tusla, in partnership with the Sexual Health and Crisis Pregnancy Programme (SHCPP), HSE Health and Wellbeing. It was developed as part of an ongoing collaboration between the two organisations to address the sexual health and wellbeing needs of young people in care, and was informed by the first output of that collaboration, *the Sexual Health and Sexuality Education Needs Assessment of Young People in Care (SENYPIC)* research study, published in 2016.

Although created for practitioners who work with children and young people in care, much of this resource will be of use to professionals working with a wider cohort of young people. It is therefore available in pdf format at <https://www.sexualwellbeing.ie/for-professionals/supports/resources/> for those who cannot access Tusla's intranet.

Harassment, Harmful Communications and Related Offences Act 2020

Catherine O'Sullivan, Lecturer School of Law University College Cork



Three offences are contained in the *Harassment, Harmful Communications and Related Offences Act 2020*, a statute prompted in part by Jackie Fox who campaigned to criminalise cyberbullying following the suicide of her daughter Nicole ('Coco') and by Megan Sims who was subjected to image-based sexual abuse.

Sections 2 and 3 criminalise image-based sexual abuse. Section 2 criminalises the distribution or publication of an intimate image or the threat to do so without the consent of the person depicted in that image. Section 3 criminalises the recording, distribution or publication of an intimate image without consent. An intimate image is defined as nude images, nude or underwear-covered images of a person's genitals, buttocks or anal region, nude or underwear-covered images of a woman's breasts and images where the person is engaged in sexual activity. These images can be real or photoshopped. This is important because harm can be caused whether the image is real or not. Both offences require the victim-survivor to suffer harm as a result of the offender's wrongdoing. This is defined as seriously interfering with their peace and privacy or causing them alarm or distress.

Section 2 carries a maximum penalty of 7 years' imprisonment and/or unspecified maximum fine. The maximum penalty for a section 3 charge is either 12 months' imprisonment and/or a fine of up to €5,000. The section 2 offence is more serious because the accused either intends to cause harm or was reckless about causing it. The standard of recklessness is that of the reasonable person. This captures someone who, for example, claims that they shared an intimate image 'just for a laugh.' A reasonable person would know that this is not funny and that it is reckless to share such photos without consent.

Section 2 and 3 are sexual offences. Section 5 of the 2020 Act provides that anyone sentenced to a term of imprisonment for either offence will be subject to the provisions of the *Sex Offender Act 2001*.

Section 4 criminalises cyberbullying, specifically the distribution, publication or sending of a threatening or grossly offensive communication to or about another person. "Grossly offensive" is not defined. To be guilty of this offence, the person who does any of the specified actions must intend to cause harm and must in fact cause harm, defined in the same way as in sections 2 and 3. The maximum prison sentence is 2 years and/or unspecified maximum fine.

For more information see:

<https://www.irishstatutebook.ie/eli/2020/act/32/enacted/en/html>



OH MY GOSHH! Podcasts

Sarah Fitzpatrick Health Promotion Officer, GOSHH

GOSHH (Gender, Orientation, Sexual Health and HIV) launched the OH MY GOSHH! podcast in 2020. The podcasts make information personal; they are a much more intimate way of getting information than reading an email or document. Some people may find accessing sexual health information on a face-to-face basis nerve-racking; therefore, having up-to-date and accurate sexual health-related information on a podcast is a great alternative.



The podcasts cover topics in gender, orientation, sexual health and HIV. Some guests who have featured on the podcasts include:

- ✓ Infectious disease specialist
- ✓ HIV personal support worker
- ✓ Youth worker
- ✓ Family planning doctor
- ✓ Student union vice president
- ✓ Clinical sexologist
- ✓ Other guests with personal experiences to share

One of the most played podcasts so far has been with Infectious Disease Specialist, Dr Sarah O'Connell speaking about her role in the STI/GUM clinic in Limerick University Hospital, along with addressing frequently asked questions about the clinic, STIs, and HIV.

Another popular podcast includes Clinical Sexologist, Emily Power Smith discussing the many areas to consider around the menopause, including symptoms, treatment, diet and nutrition and emotional and psychological wellbeing, with a focus on sexual wellbeing in the menopause.

The podcast has received very positive feedback and it has reached a diverse group of audiences. It has been circulated on multiple social media platforms from existing podcasters. All the podcasts are being carried over Zoom thus adhering to COVID-19 guidelines.

The Oh MY GOSHH! podcast is available on Anchor, Spotify, Apple, Google, Breaker, Radio Public and Pocket Casts. Search for 'Oh My GOSHH!' wherever you listen to your podcasts.





DASH (Drugs, Alcohol and Sexual Health)

In a landmark partnership for the Cork and Kerry region, the Sexual Health Centre launched a joint community initiative with Cork Local and Southern Regional Drug and Alcohol Task Forces last July. This unique mobile health service will endeavour to travel to every part of Cork and Kerry – making support, information and interventions available to all irrelevant of geographical spread.

The 'DASH' (Drugs, Alcohol and Sexual Health) unit is the first of its kind in Ireland, providing community-wide mobile services such as rapid HIV testing, provision of condoms, sexual health interventions, drug and alcohol assessments and support from trained health promotion professionals.

The aim of the project is to ensure equity of access, breaking down the barriers that people face in accessing services – be it time, location or cost. DASH is available to all sectors of the community, and services are free of charge. By reaching members of the public within their community, DASH can support those who may not have the opportunity or encouragement to consider their own needs around drugs, alcohol and sexual health.

The HSE's Head of Service for Primary Care for Cork and Kerry, Priscilla Lynch commented:

'Drugs, alcohol and sexual health services have operated exclusively, even though there is a lot of overlap in the issues that can come up for service users. The arrival of DASH marks a turning point in how we think about service provision in these areas across the region. It pools our expertise and brings services to people so that comprehensive, accessible supports are truly available to all.'

Sex And Love Therapy (S.A.L.T.)

The Sexual Health Centre welcomed the *Sex and Love Therapy (S.A.L.T.)* programme to its services in late 2020. This group therapy programme supports people in regulating their own sexual behaviour and eliminating any internalised shame or isolation that may be associated with it.

S.A.L.T. was created by Donal Clifford, an accredited counsellor and psychotherapist working in addiction therapy and is based on the training he undertook with Paula Hall, a leading expert in sex addiction in the UK.

The programme is predominately run in a group therapy setting, separated by gender. The group dynamic encourages trust and allows people to address their issues in a safe space with the help of their peers.

'It is so important to listen to a client's concerns without judgement. I am not here to tell someone what is normal or right. This therapy is a tool that helps people to identify why their behaviour concerns them and how to move forward in a healthy, responsible, shame-free manner,' highlights Mr Clifford.

'It also provides crucial intervention which can prevent increased risk-taking behaviour further down the line, thus improving sexual health outcomes.'

Issues related to a pattern of consistent unhealthy relationships, compulsive porn consumption and anonymous sex are also within the wide remit of the S.A.L.T. programme. The Sexual Health Centre recognises that some behaviours can lead to many issues for an individual including relationship problems, friendship problems, difficulties at work, and substance misuse amongst other negative outcomes.

Sexual health education: WISE and SHIFT

The Sexual Health Centre's WISE (What; Information; Support; Engagement and Education) E-learning platform has been supporting sexual health education throughout 2021, since its launch last December by Minister for Children, Disability, Equality, Integration and Youth, Roderic O'Gorman TD. *WISE Online* was created by Phil Corcoran and Muire O'Farrell of the Sexual Health Centre, to assist professionals in facilitating and responding to questions on sexual health and relationships from young people.

The free WISE tool supports professionals in addressing questions and developing skills that will help in turning comments that may seem flippant or uncomfortable into useful teaching moments. The launch recording and WISE programme can be accessed at <https://www.sexualhealthcentre.com/wiseline>

In March 2021, the Sexual Health Centre also launched the SHIFT (Sexual Health Information For Teens) booklet. The resource supports youth, of all sexualities and genders, in navigating areas of sexual health such as consent, sexting, contraception and more. SHIFT was funded by the 2020 Dormant Accounts Funding via the Department of Rural and Community Development under the *National LGBTI+ Strategy*, which seeks to ensure that existing community infrastructure is inclusive and welcoming to LGBTI+ people.

The Sexual Health Centre has also been running a youth-specific Instagram page (www.instagram.com/shc_hub) and *SHIFT: The Webinar Series*, to deliver information and support to young people. For further information on these services or to receive SHIFT booklets for your organisation, please contact the Centre at 021-4276676, info@sexualhealthcentre.com, or www.sexualhealthcentre.com

National World AIDS Day Run: Saturday, 4th December

The Sexual Health Centre in Cork hosted its annual World AIDS Day run on Saturday 4th of December, in conjunction with the HSE Sexual Health and Crisis Pregnancy Programme (SHCPP), Parkrun and Healthy Ireland.

The World AIDS Day run has gone from strength to strength since its inception in 2018, raising awareness of free rapid HIV testing services for key populations, and tackling HIV stigma across the country. This year, the run was hosted in partnership with parkruns in Ballincollig Regional Park, Glen River Park and Tralee Town Park. In light of public health measures, this year's run was also being held 'virtually' so that those who are not attending a parkrun venue could participate in their local community instead.

'Early diagnosis is extremely important in relation to care and treatment. Medical advances in recent years mean that people in Ireland who are HIV positive can live full and healthy lives' said Dr. Martin Davoren, Executive Director of the Sexual Health Centre based in Cork.

This initiative is funded by the SHCPP.

The Sexual Health Centre runs a free rapid HIV testing service for key populations.



‘What you need to know about contraception’ information guide

Anita Ghafoor-Butt, Communications Manager, SHCPP



Contraception for women aged 17-25 years old will be free from August next year, as part of measures announced in Budget 2022.

Comprehensive information on the range of contraceptive methods is very important to enable people to make informed decisions about the most appropriate method of contraception for them.

This year to mark World Contraception Day on September 26th, the SHCPP published a new information guide titled ‘What you need to know about contraception’

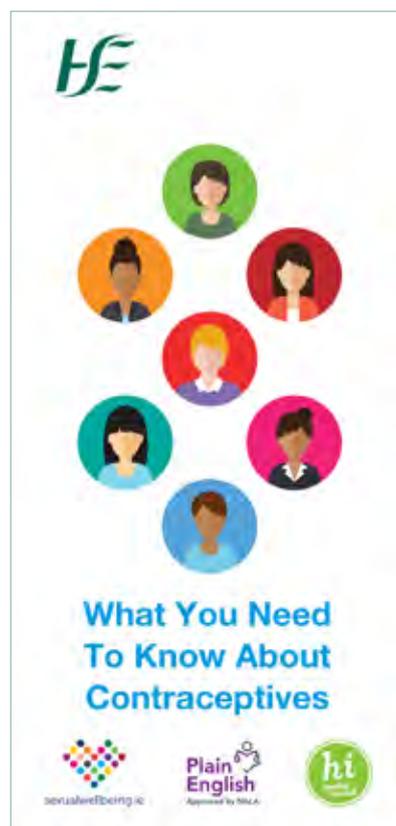
This is an easy-to-read guide designed to present information on the different methods of contraception in an accessible way.

The guide is intended to support women (and their partners) in choosing a method of contraception; or to be used as part of a contraception consultation with a doctor or family planning clinic in discussing the options available.

Maeve O’Brien, Interim Programme Lead, SHCPP said; ‘It’s very important for people to choose a method of contraception that suits their lifestyle and their stage in life. This information guide was developed to support women to understand the range of methods available to them and how each method works with their body to prevent pregnancy.’

The guide was designed with people who may struggle with health literacy or whose first language is not English in mind. It has been quality checked by the National Adult Literacy Agency (NALA) and complies with the HSE’s Plain English guidelines and has been translated into five languages: French, Arabic, Urdu, Polish and Portuguese.

The Plain English guide is currently displayed in GP surgeries across Ireland.



The information guides are available to download from the www.sexualwellbeing.ie website or here <https://www.sexualwellbeing.ie/sexual-health/contraception/>

You can order printed versions of the contraception guide from www.healthpromotion.ie

Social media messages will continue to be promoted across @_respectprotect channels on Twitter, Facebook and Instagram.

Sexual and mental health films

Padraig Burke, Communications Director, the Gay Health Network (GHN)

To mark Virtual Pride, the Gay Health Network (GHN) through its *Man2Man* programme produced two videos looking at our sexual and mental health. The videos take the form of talking heads with four sexual health professionals from around Ireland speaking candidly and sharing their thoughts.

In the films, the professionals speak about the importance of our sexual health and how it is more than just the absence of disease. They also allude to the sex positive nature and zero judgement ethos of their services and how everyone is welcome.

Interviewees include,

Billie Stoica, Support Worker with GOSHH, Limerick.

Diego Caxieta, Outreach Worker, MPOWER, Dublin.

Konrad Im, LGBTQIA+ Sexual Health Advisor, SHC, Cork.

Phil Corcoran, Senior Health Promotion Officer, SHC, Cork.

Their passion, expertise and friendliness painted a positive picture of where our sexual health services are at. There are great insights throughout including, from Billie Stoica 'Our sexuality, our sexual expression, our gender identity our self-expression, they are all part of our sexual health. And when our sexual health is good, generally we are healthier.' It could not be put better.

The films were shown on Virtual Pride, on www.man2man.ie social channels, with an abridged version played in cinemas throughout the GAZE film festival.

You can view the videos here:

Sexual Health:

https://youtu.be/e_Q9m52SFGc

Mental health

<https://youtu.be/sgjf6pCjvts>

Films were supported with funding from LGBT community funds.

Sexual Health West – Sex Educated

It's an exciting time for us here in Sexual Health West. Our former Relationships and Sexuality Educator, Grace O'Shea (aka 'Grace Alice') has written an amazing book *Sex Educated*, which is due to be launched imminently. The book idea came from answering thousands of questions over the years of teaching RSE in classrooms, giving our WISER (West of Ireland Sexuality Education Resource) team a unique and invaluable insight into the mind of young people; their worries, the curiosities, their fears and what information they are unearthing on the internet. As we know the best sex education is not based solely on answering questions with facts and figures. It is rooted in empathy, respect, kindness, inclusivity, justice, patience and passion; yes, it's about bodies, but it's about hearts and minds too. Sex, sexuality and sexual health are integral parts of being human, healthy and happy. This book aims to meet the needs of young people in Ireland where they are now, and tells them what they want and need to know with evidence-based, factual, age-appropriate information.

So, if you have or know any young person, one who is trying to figure out what feels good or right for them, who isn't sure who they are attracted to, who doesn't identify with the gender they were assigned at birth, or who wants some guidance on how good relationships even work, this book is for you. Email us at info@sexualhealthwest.ie for pre-order details.

This section of the newsletter provides an update of material that readers may find helpful in their respective roles. If you are aware of any new resources, factsheets, infographics or booklets, please let the Sexual Health News Team know, and we can include details of these in the next issue.

Menstrual health: a definition for policy, practice and research. A review Tracey Tobin, Health Promotion Officer South East Community Health Care (SECH)

This paper published earlier this year outlined the process in which a comprehensive definition for menstrual health is necessary. This definition of menstrual health was developed through a multi-stage process, led by the Terminology Action Group of the Global Menstrual Collective (www.globalmenstrualcollective.org).

There has been growing awareness of menstrual-related challenges, and the needs of all people who menstruate. Although research and practice have developed an understanding of menstrual experiences, and their relationship with physical, mental, and social health, varied terminologies had emerged. With many stakeholders using the term menstrual health a formal definition was required, to advance advocacy, policy, practice, and research, to highlight the relevance of menstrual health across sectors, and facilitate communication.

Definition of menstrual health

Menstrual health is a state of complete physical, mental, and social wellbeing and not merely the absence of disease or infirmity, in relation to the menstrual cycle. Achieving menstrual health implies that women, girls, and all other people who experience a menstrual cycle, throughout their life course, are able to:

- Access accurate, timely, age-appropriate information about the menstrual cycle, menstruation, and changes experienced throughout the life course, as well as related self-care and hygiene practices.
- Care for their bodies during menstruation such that their preferences, hygiene, comfort, privacy, and safety are supported. This includes accessing and using effective and affordable menstrual materials and having supportive facilities and services, including water, sanitation and hygiene services, for washing the body and hands, changing menstrual materials, and cleaning and/or disposing of used materials.
- Access timely diagnosis, treatment and care for menstrual cycle-related discomforts and disorders, including access to appropriate health services and resources, pain relief, and strategies for self-care.
- Experience a positive and respectful environment in relation to the menstrual cycle, free from stigma and psychological distress, including the resources and support they need to confidently care for their bodies and make informed decisions about self-care throughout their menstrual cycle.
- Decide whether and how to participate in all spheres of life, including civil, cultural, economic, social, and political, during all phases of the menstrual cycle, free from menstrual-related exclusion, restriction, discrimination, coercion, and/or violence.

For us as practitioners in Ireland this definition will be useful to advance our advocacy, policy, practice, and research, to highlight the relevance of menstrual health across sectors, and facilitate communication and conversation.

Read more here:

Sex Reprod Health Matters. 2021; 29(1):1911618. doi:10.1080/26410397.2021.1911618

LGBT+ cervical screening study: differences in screening experiences and participation

Lynn Swinburne, Senior Health Promotion Officer, Public Health Department, National Screening Service



Our recent study, launched in September, set out to examine the knowledge, attitudes, participation and experiences of lesbian and bisexual women, trans men, non-binary and intersex people with a cervix in cervical screening in Ireland.

The concept behind this study started when I presented the topic of HPV and cervical screening to a group in LINC, a lesbian and bisexual support group in Cork in 2019. I was struck by the depth of questions people had on all aspects of HPV, cervical cancer, and cervical screening. Their desire for information, understanding and specifics pointed to a need for deeper collaboration, understanding and meeting the needs of this group.

From the beginning, it was important that we collaborated with the LGBT+ community so that participation would be widespread, and as meaningful as possible. We held discussions with local, regional and national LGBT+ organisations. This led to us receiving the input of over 450 LGBT+ people in this study, which surpassed our expectations.

The quantitative piece of this research showed that the overwhelming experience of cervical screening among LGBT+ people was positive. However, some reported difficult experiences in cervical screening, including poor communication, inappropriate questioning, dismissal of previous experience, and personal commentary on their status. It illustrated that we needed to find ways to ensure our sample takers feel comfortable in their interactions with the LGBT+ community and that we provide a holistic service to meet their needs in cervical screening.

Two-thirds of the people in our study said they attend screening every time they are invited. However, this is short of the 80% national average screening uptake.

Why is this, and what can we do about it?

Many referred to discomfort and past negative experience in cervical screening, sexual health and sexual trauma. It suggests that a good consultation with the service user covering all the elements of cervical screening, along with an alert system that tells the sample taker that the person is anxious for a particular reason, would make the experience a more positive one for the person, and hopefully ensure their return to screening when invited.

A total of 62% of respondents did not tell their healthcare provider their identity when attending for cervical screening. This can lead to difficulties as sample takers do not know the full identity of the person, or how to address their needs.

The study found barriers to cervical screening for the LGBT+ community that included an assumption by some sample takers that the person being screened was heterosexual; and fear and embarrassment of the test procedure.

However, the research also showed what would encourage respondents to attend screening. The responses included: LGBT+-friendly practices; being able to book appointments online; being sent reminders by text; specialist LGBT+ clinics; and more flexible GP surgery opening hours.



What would an LGBT+ friendly service look like?

Basic elements would include posters, images of LGBT+ people, and the use of more inclusive language. 'You will feel welcome, safe and free to be out if you see yourself in these settings,' one stakeholder said.

It would also include staff training on good practice in providing services to the LGBT+ community; policies on inclusion and equality; and identity captured on GP databases and sign-up forms. In essence the community should feel safe to come out to trained people who can address their needs and have an open participative discussion about cervical screening and their wider sexual health.

All women and people with a cervix should be offered, invited and welcomed to participate in cervical screening. An acknowledgement that this is their right, and a requirement for their health protection, is central to ensuring equity in our services. Equality is about treating everyone the same, but equity is about providing the extra requirements to certain communities to ensure their participation can be enhanced, supported and furthered. We must ensure our services close the inequality gap not widen it; this is about doing more than treating everyone the same.

This project has helped me reflect on how our assumptions and judgements affect those we work with. Our unconscious biases need to be recognised, analysed, challenged and ultimately, we need to move to a new perspective where our sample takers have increased opportunity for positive contacts with the LGBT+ community in a supportive environment.

LINC member and cervical screening advocate Ruth O'Mahony said: 'A number of lesbian and bisexual women think they don't need to go for screening because they are not having sex with men. And just like women in the community as a whole, many also don't like the invasiveness of the procedure. A positive experience with your GP can help you focus on taking care of your body. And if you can see yourself represented in the information being given out about female health, you'll be more likely to consider it's for you.'

The LGBT+ Cervical Screening Study can be found at:

<https://www.screeningservice.ie/publications/LGBT+Cervical-Screening-Study-Report.pdf>



LINC member and cervical screening advocate, Ruth O'Mahony

Experiences and health behaviours of menopausal women in Ireland by Dr Trish Heavey



Menopause is when a woman's menstrual periods stop, followed by a year of no periods. It is a natural process that occurs in women's lives as a part of normal aging and signifies the end of the reproductive lifespan with changes in the levels of the hormones oestrogen and progesterone. The average age at which menopause occurs is 51 years with about four years of irregular periods leading up to this event. With today's average life expectancy, women are living around a third of their lives after the menopause. This means an estimated one billion people around the world have experienced it.

Female infants are born with about 1-2 million eggs in their ovaries, with no new eggs made after birth. This amount declines slowly over the course of the reproductive lifespan, alongside a woman's monthly cycles. At about the age of 37, the rate that a woman loses eggs speeds up rapidly, with almost none left at menopause. This finely balanced process is controlled by several hormones which all interact with each other throughout menstrual cycles. During the menopausal transition there are changes in the amount of these hormones being made, and the ovaries gradually lose function. For some this can be accompanied by physical and emotional changes. Many women experience the discomfort of hot flushes, trouble sleeping, vaginal dryness and anxiety during the months and years leading up to their final period and for some time afterwards (post menopause). Some have reported muscle aches, tiredness, lack of sex drive, increased appetite, cravings and weight gain, and body shape changes. Although a range of symptoms are reported not all women are affected and every woman has a different experience.

We know very little about the experiences of women going through menopause in Ireland. Earlier this year, Dr Trish Heavey and her team in the SHE Research Group at Athlone Institute of Technology carried out an online survey to explore this in more detail. In total 855 women aged between 44 and 65 years completed an online questionnaire. Some of the key findings from the study show that:

- 78% of respondents indicated that menopausal symptoms interfere 'sometimes' or 'often' in their daily activities.
- Almost one-third (31%) of women are using HRT and women also use alternative therapies to manage their symptoms with herbal remedies being the most popular option for women in this analysis.
- In the postmenopausal symptomatic group, 59% of women experience 13 or more symptoms. The most

reported symptoms are hot flushes affecting 92% of women, low sex drive (89% of women) and night sweats (87% of women).

- The majority (80%) of women reported weight changes during the menopause transition and 66% of women were classified as either overweight or obese. Almost half of women (48%) reported finding it difficult to manage their weight.
- Overall, 47% of women engage in moderate physical activity almost daily, with 30% engaging 'at least 3 times a week', 17% 'occasionally' and 7% 'never' or 'rarely'. Walking is the most frequently preferred form of exercise (79%) followed by exercise classes (16%) and resistance training (14%).
- The majority (77%) of women feel they lack knowledge and are unprepared for menopause. Social media is the main source (53%) of information on menopause for women, followed by government websites (40%) and GPs (21%).

Most women (78%) indicated that they would have found a lifestyle programme useful for transitioning through the menopause. Women were also asked to rate the most important aspects of a lifestyle programme: Menopause education was rated the most important (71%), followed by weight management (63%), weight loss (54%) and physical activity sessions (53%). More than half (55%) would prefer to do such a programme in a group setting with similar women.

As findings from this analysis indicate that women felt unprepared and lacked knowledge during this time, going forward there needs to be a greater focus on educating and supporting women who are transitioning through menopause. Pharmacological (hormonal and non-hormonal) approaches have shown to be effective in the management of menopausal symptoms. We know that maintenance of a healthy body weight may help to reduce hot flushes and night sweats, and cognitive behavioural therapy has also been shown to be beneficial in reducing the effect of these symptoms as well as improving sleep and overall wellbeing.

This research is a start, but we need to do a lot more. In Ireland, there is no evidence that supports the feasibility or effectiveness of a structured lifestyle programme, and therefore no visible approach to this provision for women during menopause. Researchers in the SHE Research Group are working to contribute to the knowledge and practice gap around supports for women going through menopause. This report presents a snapshot of Irish women's experience of menopause that aligns with further activity exploring the lived experience of menopause and developing and evaluating a lifestyle programme for women in menopause. If you would like to read more about this research, please visit <https://sheresearch.ie/women-menopause/>. We would like to thank those women who engaged in this survey and appreciate their honesty and willingness to participate.

The Foundation Programme in Sexual Health Promotion

The Foundation Programme in Sexual Health Promotion (FPSHP) developed by Health Promotion and Improvement (South and South East), has been delivered by HSE and external partner-facilitators since 2009. Following several programme evaluations, the latest by HSE SHCPP in 2019, (<https://www.sexualwellbeing.ie/for-professionals/research/research-reports/foundation-programme-final.pdf>), the programme has undergone a significant review.

A revised FPSHP, being developed by a working group of both internal and external FPSHP facilitators, will be ready for a national pilot in early 2022. The updated programme takes into account developments within sexual health promotion in the years since the programme's original development, while retaining its focus on enhancing participants' capacity to incorporate sexual health promotion into their work through the development of their comfort levels, confidence, knowledge and skills. Going forward, the FPSHP will be reviewed and revised on a regular basis, allowing it to respond to the ever-changing, sexual health and wellbeing landscape.

The dates and locations will be available on www.sexualwellbeing.ie early in the New Year.

In the Know

BelonG To

The 'In the Know' programme was conceived by Seán Frayne of BeLonG To for young gbMSM; helping them understand and protect their sexual health and wellbeing.

The development of the 'In the Know' programme manual and facilitator training is a partnership project between the Sexual Health Centre, BeLonG To, and the HSE SHCPP to enable youth workers, community workers, sexual health workers, and other appropriate professionals to deliver the 'In the Know' programme to their young gbMSM services users.

Its aim is to provide young gbMSM with the tools and confidence they need to protect themselves in terms of sexual health. It is designed to be run as a 6-week programme that covers topics such as communication in relationships, STI and HIV information and prevention, coping skills, condom use and a positive framework regarding consent and pleasure.

Visit www.sexualhealthcentre.com/training to register.



The features section is made possible by authors giving of their time and expertise in their respective fields; for any queries or further information on the features in this section, please contact the relevant author.

NUI Galway's Active* Consent Programme The Active Consent Team

Active* Consent is a national programme, based in NUI Galway, that supports young people and those that are important to them (parents, teachers, staff and policymakers) in building their knowledge of consent. We are an interdisciplinary team, drawing on Psychology, Drama and Theatre Studies, and Health Promotion.

Working closely with young people, Active* Consent creates up-to-date resources to develop their knowledge, skills and confidence to have positive sexual health and wellbeing. These original Irish consent education resources include workshops, e-Learning modules, drama, videos and social media campaigns. Our resources are underpinned by our unique Irish research evidence, which spans 10 years and has been published in 6 research reports since 2014. On-going evaluation, with a wide range of stakeholders, ensures our resources stay relevant and are effective, engaging, and feasible.

The logo for the Active* Consent programme, featuring the words "ACTIVE* CONSENT" in a bold, black, sans-serif font. The asterisk in "ACTIVE*" is stylized with a white outline.

To date, NUI Galway's Active* Consent programme has collaborated with almost all Higher Education Institutions (HEIs) in Ireland and an increasing number internationally. In addition to our signature Active* Consent workshop, we released the Sexual Violence and Harassment: How to Support Yourself and your Peers e-Learning module for HEI students and staff in 2020. This module introduces a basic understanding of sexual violence and harassment and provides users with practical skills in supporting friends who disclose negative sexual experiences and how to safely intervene in negative situations in their peer groups. The module is available at:

<https://activeconsent.usi.ie/training/>

We believe that partnership is key to improving education with young people. Therefore, we provide training and collaborate with a wide range of organisations including HEIs and Schools, Union of Students Ireland, Irish Second-Level Students' Union (ISSU), Student Services, Guidance Counsellors, Sports Organisations, Parents' Associations and other stakeholders. Our theory of change indicates that by working directly with young people, meaningful, positive and sustainable change can happen in their lives. In 2020, we reached over 17,000 third-level students, and are hoping to reach more students in 2021. We also engage with third-level staff, offering awareness-raising materials and a professional development module through NUI Galway.

Building on this approach pioneered at third-level, we recently launched Active* Consent for School Communities, following the August 2021 release of our first-ever report on secondary school pupils' perspectives. This programme addresses individual pupils and their understanding of consent in order to positively impact their ongoing and/or future relationships. We aim to empower pupils to

- communicate with their partners, friends and peers through an expanded consent vocabulary;
- achieve confidence in knowledge and skills to negotiate consent;
- challenge negative and/or non-consensual behaviours;
- advocate for themselves and act as Active* Bystanders;
- support others and themselves in identifying how to access support services following a negative sexual experience.

The programme includes a secondary schools' workshop, which was designed from survey data and developed in conjunction with four different youth panels of transition year (TY), fifth and sixth-year pupils and regional officers of the Irish Second-Level Students' Union. In 2021, we piloted the schools' workshop with 993 pupils in TY, 5th and 6th year in 10 schools nationwide and hosted webinars with 353 parents. Pupils completed pre- and post-surveys on the workshop, and we found statistically significant increases in having all the skills to deal with sexual consent (from 61% to 92%), with 99% of females, 95% of males and 100% of non-binary pupils agreeing that the workshop was relevant to them. Our research also found that teachers reported a positive experience when delivering the workshop, and 96% of the parents agreed the school consent workshop 'will provide important learning for 15–17-year-olds'.

Active* Consent is currently training second-level teachers to rollout the Active* Consent for School Communities programme this autumn and will engage with parents in the coming months through virtual seminars. We are also piloting our 'Sex on Our Screens' module, a new critical media intervention, with teachers, pupils and parents.

These materials and more will soon be housed on a new consent online learning hub to be fully launched in the New Year. Funded by the Department of Justice and the Department of Further and Higher Education, Innovation and Science, this hub will showcase Active* Consent's resources and introduce new short-form educational materials for a national audience. As part of this roll-out, Active* Consent's original filmed theatrical drama *How I Learned About Consent* will be premiered on this platform and available in versions for secondary school and third-level students. This original drama explores themes ranging from positive consent to image-based sexual abuse, to navigating gender identity and healing from trauma.

For more information on Active* Consent or to request trainings or materials, please contact us at: activeconsent@nuigalway.ie. We also welcome you to follow @ActiveConsent on social media.



Ikenna Anyabuikwe, Ariyan Bhatti, Gavin Friel and Alice Keane in Active Consent's forthcoming theatrical film *How I Learned About Consent*.

Pelvic floor exercises a preventative and curative role

Cinny Cusack, Physiotherapy Manager, Rotunda Hospital, Dublin

Deirdre Daly, Assistant Professor in Midwifery, School of Nursing and Midwifery, Trinity College Dublin



Pelvic floor muscle exercises (PFMEs) were first described by Arnold Kegel in 1948. However, many women do not know about pelvic floor muscle exercises and of those that do, approximately 30% of women do not know how to do them correctly, straining down instead of lifting them up which may make their symptoms worse.

Done correctly, PFMEs have a preventative and curative role, but to be effective women must know:

- Where their pelvic floor muscles are
- What they do
- How to exercise them

Once women know how to train their muscles, they need to remember to fit the exercises into their busy lives.

Where are the pelvic floor muscles?

The pelvic floor has two muscle layers that spans the underneath opening of the bony pelvis, attached to the pelvis by ligaments.

What do they do?

The pelvic floor holds up the pelvic organs (bladder, uterus and bowel) against gravity and with increasing abdominal pressure, such as lifting or coughing. The diaphragm, abdominal and lower back muscles work with the pelvic floor to provide core stability, and coordinate with breathing.

The deep pelvic floor muscles maintain continence by squeezing and lifting upwards and forwards to close the urethra and anal sphincters (the openings from the bladder and bowel). The muscles release and lengthen to facilitate opening the bladder and bowels. The superficial layer of muscles, closest to the skin, plays a role in sexual arousal and function.

What impacts on pelvic floor health and women's quality of life?

A number of life events can impact the pelvic floor. Approximately 25% of young women may leak urine during high impact sport. Up to 50% of pregnant women may have incontinence due to the impact of pregnancy hormones and the increasing weight of the baby. Giving birth to a large baby (>4,500 grams), instrument-assisted births and increasing parity can all lead to pelvic floor dysfunction. Other, potentially, contributing factors include increased Body Mass Index (BMI), heavy lifting, constipation and straining at stools, aging and menopause.

What are the symptoms of pelvic floor dysfunction?

Symptoms of pelvic floor problems are urinary and faecal incontinence, prolapse and sexual dysfunction. Stress incontinence is the most common type, impacting one in three women. These symptoms all have a negative impact on women's physical and mental wellbeing and often precipitate lifestyle changes such as toilet mapping, wearing pads, darker clothing and disengaging from social activities, sport and exercises. Other women experience pain or leaking with sexual intercourse.

Prevention better than cure

In an ideal world, all teenage girls would be taught effective PFMEs in school along with an awareness of good bladder and bowel health. The second opportunity to teach women about PFMEs is in a maternity setting, but this is missed if women are not asked about being incontinent or do not attend antenatal education. Continent women who perform PFMEs during pregnancy are less likely to leak urine towards the end of the pregnancy and up to six months' postpartum. The 2018 Cochrane Review reports that women with any type of urinary incontinence who performed PFMEs were twice as likely to be cured compared with those who did not.

Pelvic floor exercises

Women's health physiotherapists are specialists in treating pelvic floor dysfunction. Treatment includes a detailed assessment of the symptoms, the woman's lifestyle and examination of the pelvic floor. Treatment options include education, good bladder and bowel health, bladder retraining, prolapse management, pessary management and safe return to exercise. For women who experience painful sex – dyspareunia – we offer advice, relaxation, down training for an overactive pelvic floor, manual therapy and release of scars postpartum or after surgery.

The exercise programme

- The squeeze should be activated first from the back passage and brought forward to close the vagina and urethra
- Keep breathing during the squeeze
- Do 10 fast squeezes and let go
- Do 10 slow contractions lasting up to 8-10 seconds, and repeat 10 times or until the muscle feels tired
- PFMEs should be done with raised intra-abdominal activities such as a cough, sneeze or lift, known as 'the knack'.

The muscle can be challenged by changing positions to anti-gravity postures from lying, to sitting to standing and then with activities.

The woman can check if the contraction is correct by having a look in the mirror, feeling the muscles in the vagina or doing the stop test. The stop test is a *once-off* test to stop urine mid flow, and if the stream of urine stops or slows then the contraction is correct.

Regular reminders to do your PFMEs are important and Apps, such as 'Squeezy', can be helpful.

For further resources, check out <https://www.futurelearn.com/courses/womens-health-after-motherhood>. These resources were developed as part of the MAMMI study to address issues that women told us they wish they had known after childbirth. <https://www.tcd.ie/mammi/>

Recommended reading:

1. Daly D., Clarke M., and Begley C., Urinary incontinence in nulliparous women before and during pregnancy: prevalence, incidence, type, and risk factors. *Int Urogynecol J*, 2018. **29**(3):353-362. DOI: 10.1007/s00192-018-3554-1
2. Daly D., Cusack C., and Begley C., Learning about pelvic floor muscle exercises before and during pregnancy: a cross-sectional study. *Int Urogynecol J*, 2019. **30**(6):965-975. DOI: 10.1007/s00192-018-3848-3
3. Kegel A. H., Progressive resistance exercise in the functional restoration of the perineal muscles. *Am J Obstet Gynecol*, 1948. **56** (2):238-48. DOI: 10.1016/0002-9378(48)90266-x
4. Woodley S. J., Lawrenson P., Boyle R., Cody J. D., Mørkved S., Kernohan A., and Hay-Smith E. J.C., *Pelvic floor muscle training for preventing and treating urinary and faecal incontinence in antenatal and postnatal women*. Cochrane Database of Systematic Reviews, 2020(5). DOI: 10.1002/14651858.CD007471.pub4
5. Woodley S. J. and Hay-Smith E. J. C., Narrative review of pelvic floor muscle training for childbearing women-why, when, what, and how. *Int Urogynecol J*, 2021. **32**(7):1977-1988. DOI: 10.1007/s00192-021-04804-z

LIVING: a World AIDS Day 2021 initiative

For the fourth year running, GCN and HIV Ireland teamed up for a World AIDS Day initiative, and this year we have produced a special project that seeks to give real visibility to, and celebrate the diversity of, people living with HIV in Ireland.

As we approach the end of a year reflecting on 40 years of HIV and AIDS, marking the achievements, acknowledging the work that still needs to be done, and remembering those who died, we are ending the year with a celebration of the *Living*.

Living is an innovative, first-of-its-kind, photographic exhibition showcasing a powerful and inspiring collection of portraits by the wonderfully talented photographer Hazel Coonagh. This is a milestone moment in Ireland's HIV response which endeavours to change the narrative, move away from outdated stereotypes, and shift society's perceptions. It also highlights the leadership role people living with HIV contribute to the HIV response, particularly in relation to confronting and challenging stigma.



The exhibition was launched on World AIDS Day, 1st December, at a special event hosted by national treasure Panti Bliss, and will run until 10th December at the CHQ Building in Dublin. Further exhibits and venues will be explored in 2022.

A social media campaign will complement the exhibition which can be followed @HIVIreland; a souvenir booklet will be launched in mid-December.

Living is proudly supported and funded by GSK, Dublin LGBTQ+ Pride, the HSE Sexual Health and Crisis Pregnancy Programme, and EPIC. The photographic exhibition is made possible by the voluntary contributions of people living with HIV.

Keep up to date at www.hivireland.ie and www.gcn.ie

SEXUAL HEALTH PROMOTION IN ACTION

Let's talk about the menopause

There are over 400,000 women in Ireland in the natural menopause age range of 45-55 years – these account for 12% of the national population (not including women in early menopause so the actual figure will be higher).

In the Cork/Kerry area there are 50,638 women between the ages of 45 and 55 years (CSO 2016) – 7.3% of the regional population. Like the national figures there are obviously others below and above those age ranges who are also affected by the menopause. So this is a very important subject for the largely female population of Cork/Kerry Community Health Care.

Let's Talk about the Menopause was a 1.5-hour Webinar and the aims were to:

- increase people's knowledge and awareness about the menopause (signs/symptoms/treatment/interventions/self-support/resources)
- allow space for open sharing of questions and answers
- prompt people as to how they can support themselves
- open a dialogue about the menopause that is frank, open and supportive

SEXUAL HEALTH PROMOTION IN ACTION

The webinar had inputs from:

- A general practitioner and British Menopause Society (BMS) accredited Menopause Specialist
- A Senior Physiotherapist in Women's Health
- A Senior Health Promotion Officer for physical activity
- A Senior Community Dietitian
- A Senior Clinical Psychologist

Altogether 758 people signed up for this webinar – a sure sign of the need for and interest in this subject.

The webinar is available to watch on the CKCH YouTube site <https://youtu.be/yJcROKKsg7M>

Below are some of the online evaluations we received from attendees:

'This really was an outstanding webinar.'

'Good clear concise information..... Easy to follow and relay to patients.'

'I thoroughly enjoyed this workshop. I liked the variety and diversity of the topics. It was so informative. It was structured very well.'

'Thank you all for your very informative webinar, it has helped me understand and accept the menopause more.'

'I found the webinar very informative. I learnt information from all the presenters. It is easy to neglect oneself during this time, so the holistic approach of the speakers has re-focused and motivated me to love myself and to become pro-active. I liked the information that focused on the future benefits of looking after oneself now and not just treating the symptoms. I liked the fact that it was not just a medical model but as stated, a holistic approach. I had never heard of a women's health physiotherapist - very interesting. I just want to say a huge thank you to everyone involved in organising and facilitating this webinar. It has given me so much to think about.'

As a follow-on to this encouraging programme there are 5 further sessions this autumn on HRT, nutrition, physical activity, women's physiotherapy and sleep allowing more dedicated time to each.



Edel O'Donnell. For more information - Email: Edel.odonnell1@hse.ie

‘Help!’ How Galway parents feel when talking to their children about relationships and sexuality

by Nicole McGuigan, Sexual Health West



Ireland’s ‘Repeal the 8th’ referendum publicity led to children asking questions ,yet answering them was outside the comfort zone of many parents – along with many other questions about relationships and sexuality. To understand the needs of parents we asked: ‘How comfortable are you responding when your kids ask you about sex and relationships?’

Our Survey respondents:

- We had 115 respondents to our online survey – 85% female, 5% male and unknown 10%.
- Parents had a diverse age range and 1 to 5 children.
- Over 80% had primary and secondary schooling in Ireland.
- 69% had no Relationships and Sexuality Education (RSE) in primary school, and 18% had none in secondary.
- Of those that did, less than 5% were taught about consent, sexual orientation, masturbation, gender identity or where to turn to for help.

As teenagers their main source of RSE information was friends, followed by books/magazines and finally, caregivers. None of the people who identified as male reported having learnt from talking to caregivers. When challenges arose, people primarily sought support from friends, and some respondents felt they had had no one to turn to at all.

Some topics were well within the comfort zone of all or almost all parents; talking to their children about their own bodies, accurate body part names, good and bad touching, personal safety, kissing, pregnancy and pregnancy loss. Most parents (87%) with daughters felt very comfortable talking about female puberty to them, yet only 38% of parents felt comfortable talking about male puberty; in fact, 5% of parents of boys felt they ‘wouldn’t know what to say’ when their sons ask about puberty. Parents felt more confident talking to their sons about female puberty; possibly because most of our respondents identified as women. Given that 28% of births currently in Galway are to women not in partnerships (CSO, 2018), these parents may need extra support discussing puberty with sons.

There were many areas where all parents were willing to discuss a topic with their child, but a significant proportion of them would like help doing it. Over 40% of parents want help talking about sexual pleasure, pornography, sexual orientation, masturbation, alcohol or substance use linked with sexual behaviour, inappropriate touching, sharing of images, different gender identities, and what to do if their child told them about non-consensual incidents. Over 30% of parents would like support in discussing sexual touching, HIV/AIDS, drug use, rape, sexual violence and internet safety. Over 25% would like advice on how to discuss abortion, STI’s, taking or sharing nude photographs or body image, and over 15% on discussing consent and alcohol. Parents’ level of comfort with the topics dropped when discussing sex and sexuality, some respondents opted out of responding to these questions at all or stated they did not want to discuss the topic, they would not know what to do, would avoid the question or would be upset if their child raised the topic. This avoidance was highest when asked about oral, anal and gay sex.

What are the biggest challenges for the sexual health of the next generation?

Sexual content and nudity on the internet/apps were the most raised concern; 'the availability of sexual information and images and pornography on the internet means that my teenager can Google any question ... but not be emotionally ready to see or understand it.' Parents worried about the effect of this exposure on the young person's future sexual experiences. Viewing nudity and sexual images and its impact on body image was also raised often.

Parents acknowledge challenges around both consent and pornography, as well as societal issues around gender and sexuality. Finally, the lack of representation of LGBTQI+ relationships, transphobia, and heteronormative RSE in schools was raised as a challenge that could impact on the sexual health of young people.

What does this mean for parents in Galway?

The survey results are positive; they show that parents are willing to have conversations about relationships and sexuality with their children, but quite a proportion of caregivers would like help. Parents do have concerns that their children may not be adequately prepared to overcome challenges to good sexual health, due to societal issues and their own need for extra support around addressing topics. For us at the Sexual Health West WISER team, this survey supports our belief that it is important to address both the informational needs of young people and to also expand the RSE resources available for their caregivers.

For more information <https://sexualhealthwest.ie/category/articles/>



My Options

All the information and support you need in an unplanned pregnancy

www.myoptions.ie

Unplanned Pregnancy?

Freephone

1800 828 010

Monday to Friday 9am to 8pm

Saturday 10am to 2pm

or visit **myoptions.ie**



My Options is a HSE service that provides confidential information and support if you are experiencing an unplanned pregnancy.

Professional, experienced counsellors can talk to you about all your options, including continued pregnancy supports and abortion services.

