



SYNERGIA

# YOUTH 2000 SUMMARY REPORT

Report for ACC

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07 July 2016

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## 1. INTRODUCTION

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All young people should have the support, information and skills that they need to make informed choices about relationships, sex and reproductive health. Evidence on young people's experience of sexual violence, sexual and reproductive health behaviour provide an opportunity to inform the development of programmes and interventions to support young people in making informed choices about relationships, sex and reproductive health.

The Youth2000 Survey series conducted by the University of Auckland provides a unique insight into the health and wellbeing of students in New Zealand secondary schools. The survey was first implemented in 2001 and again in 2007 and 2012. The survey is New Zealand's largest and most comprehensive survey of youth health and wellbeing<sup>1</sup>. The survey explores a range of factors that impact on the health and development of young people.

In 2015, the University prepared a report that focused on sexual violence experiences and the sexual and reproductive health of students<sup>1</sup>. The report provided a comprehensive analysis of the survey findings from 8,500 students in secondary schools across New Zealand in 2012. The analysis included an exploration of the experiences of Māori and Pacific students, as well as trends over time.

ACC wanted to ensure that this evidence was shared across the key organisations and sectors working to support the healthy development of young people in New Zealand. To support this, Synergia were contracted to provide an accessible summary of the key findings from the 2015 report<sup>1</sup>. This summary report draws on key findings and infographics to communicate key messages.

The report begins by understanding students' experiences of sexual violence, including differences between ethnic groups and trends over time. Key findings and trends are then explored regarding students' sexual and reproductive health, and their viewing and receiving of sexually explicit material.

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<sup>1</sup> Clark, T.C., Moselen, E., Dixon, R., The Adolescent Health Research Group, & Lewycka, S. (2015). Sexual and Reproductive Health & Sexual Violence among New Zealand secondary school students: Findings from the Youth'12 national youth health and wellbeing survey. Auckland, New Zealand: The University of Auckland.

## 2. YOUNG PEOPLE EXPERIENCING SEXUAL VIOLENCE

### 2.1 Students experiencing unwanted sexual contact

There has been a general decrease in the proportion of students who reported an unwanted sexual experience, since the 2001 survey



**15%**  
of students  
experienced  
unwanted  
sexual  
contact  
in 2012



This is an **8% decrease** from the rate of reported **unwanted sexual contact** in 2001 (23%)

15% of all students (n=7986) reporting unwanted sexual contact is still too high



20%

**Females** were **more likely** to experience **unwanted sexual contact** than males



9%

Unwanted sexual contact was also more commonly experienced by Māori (18%) and Pacific (22%) students

**Female students** and **older students** were more likely to report that their last **unwanted experience** was 'pretty bad', 'really bad' or 'terrible'

Both females and males were most likely to have unwanted sexual contact forced on them by a boyfriend/girlfriend followed by a friend

People forcing unwanted sexual contact on females (n=610)

Boyfriend/girlfriend 40%

Friend 30%

15% Relative or adult they knew

People forcing unwanted sexual contact on males (n=179)

Boyfriend/girlfriend 40%

Friend 30%

9% Relative or adult they knew

Over half of the students (55%) reported that their first unwanted sexual experience occurred before they were 14 years old



55%

55%

## 2.2 Students who have forced someone to do sexual things



## 2.3 Confiding in someone

**Females and older students (aged 16-18) were more likely to tell someone** that they had had an unwanted sexual experience.

Since the 2001 survey there has been a **7% decrease in the proportion of females who told someone** about their experience of unwanted sexual contact.

When students did confide in someone about their unwanted sexual experience, **most told a friend (70%)**, followed by a parent (38%).



## 2.4 Risk and protective factors for sexual violence

**Deprivation** appears to be a key contextual factor for those experiencing unwanted sexual contact. Students attending a low decile school and who live in a neighbourhood characterised by high levels of deprivation were more likely to report experiences of unwanted sexual contact.

**Students who did not experience unwanted sexual contact** had more positive family relationships and home circumstances than students who reported experiencing unwanted sexual contact. These students were:



Close to **17% more** likely to report they were **happy** with their **family relationships**

**16% more** likely to get **enough time** with at least one **parent**



**8% less** likely to have parents who often or always **worry about** not having **enough money for food**

In contrast, **students who reported forcing an unwanted sexual experience on others**, did not report having these same social and support networks around them.

It should be noted that these differences were typically small (10% or less), but these students were often more likely to have experienced, or be living in, a stressful or challenging home environment.

These particular students for example were:

Less likely to report	More likely to report
<ul style="list-style-type: none"><li>• Having happy family relationships</li></ul>	<ul style="list-style-type: none"><li>• Parents being worried about having enough money for food</li></ul>
<ul style="list-style-type: none"><li>• Having at least one parent who cared about them</li></ul>	<ul style="list-style-type: none"><li>• Household overcrowding</li></ul>
<ul style="list-style-type: none"><li>• Their family always knew where they were and who they were with</li></ul>	<ul style="list-style-type: none"><li>• Moving two or more times in the previous year</li></ul>

## 2.5 Health and social outcomes

Students who had experienced or forced unwanted sexual contact **reported poorer health and social outcomes** than students who had not experienced or forced unwanted sexual contact

**Students experiencing unwanted sexual contact were:**

**9% less likely** to report having **good, very good or excellent health**

**Three times more likely** to report **major depressive symptoms and suicidal thoughts**

**20% less likely** to report **good emotional wellbeing**

**Five times more likely** to have had an **STI**

**21% more likely** to have been **unable to access healthcare** required in the past 12 months

**10% less likely** to **feel safe at school**

**5% less likely** to be **planning to complete school**



**Students forcing unwanted sexual contact were:**

No significant difference in reporting **good, very good or excellent health**

**Twice as likely** to report **major depressive symptoms and suicidal thoughts**

**15% less likely** to report **good emotional wellbeing**

**Five times more likely** to have had an **STI**

**11% more likely** to have been **unable to access healthcare** required in the past 12 months

**10% less likely** to **feel safe at school**

**8% less likely** to be **planning to complete school**

### 3. SEXUAL AND REPRODUCTIVE HEALTH

#### 3.1 Sexually active students



**19%** of students reported being **currently sexually active**



This is a **7% decrease** from the rate of sexually active students in 2007 (26%)

24% of students reported having had sexual intercourse at least once in their lifetime (excluding any experiences of sexual abuse; n=8261)

Students were more likely to be sexually active if:

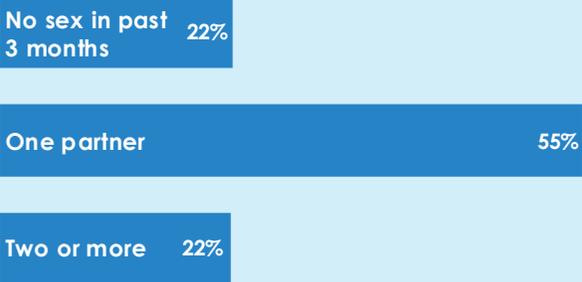


- They were **older** (aged 16-18) (33%) 
- They were **attracted to the same or both sexes** (30%)
- They attended a **low decile school** (23%) 



**22% of older students** (aged 16-18) reported they had **first had sex at age 15 or under**

Number of partners in the past three months of students who had sex at least once in their lifetime (n=1993)



No sex in past 3 months	22%
One partner	55%
Two or more	22%

**Most students had none or one sexual partner** in the past three months

Two or more partners was more commonly reported by:

- o Males than females
- o Younger students (aged 12-15) than older students (aged 16-18)

### 3.2 Use of condoms and contraception

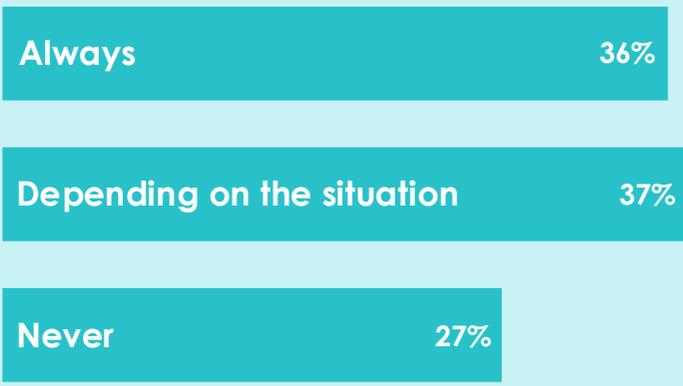
While fewer students report having sex in 2012, there was an **increase in the proportion of currently sexually active students who reported inconsistent use of condoms** and no improvement in consistent contraception use since 2001

**Over half (58%) of students reported consistent (always) contraception use**

**Less than half (45%) of students reported consistent (always) use of condoms**

**Condoms are the most common form of contraception used (80% of currently sexually active students)**

Sexually active students reported discussing preventing pregnancy with their partner(s) (n=1984):



#### The Youth '12 survey revealed gender differences in students' knowledge of contraception and reproductive health



Males were **more likely** to report **consistent use of condoms** (52% vs 40%)



Males were **less likely** to report **always discussing pregnancy prevention with their partner(s)** (30% vs 42%)

#### The Youth '12 survey revealed home and family factors which were associated with differences in students' consistent use of condoms

Students who reported **consistently using condoms** were:

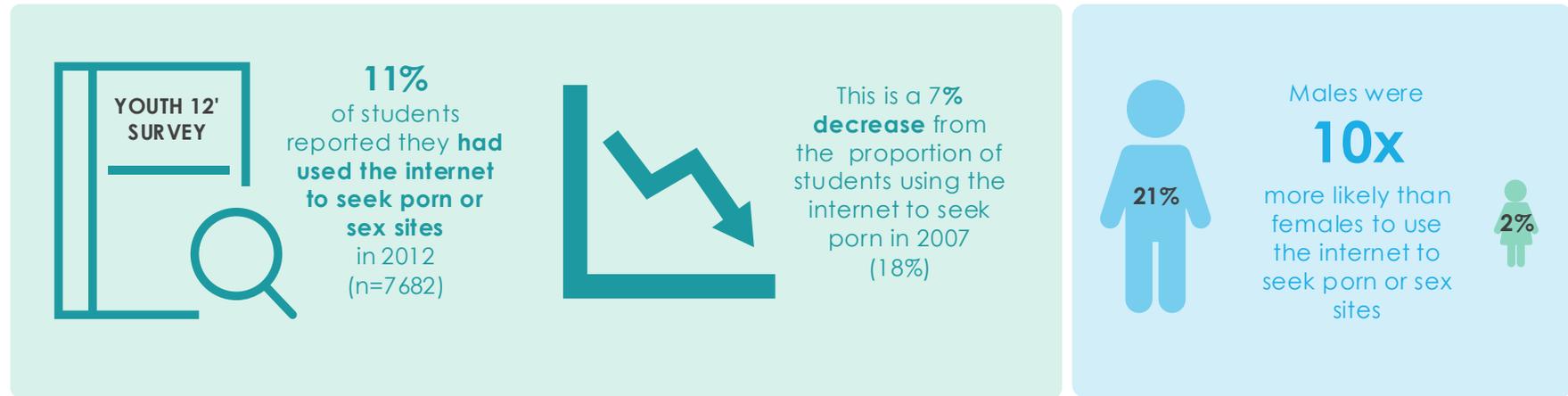
Less likely to report	More likely to report
<ul style="list-style-type: none"> <li>Household crowding</li> <li>Parents being worried about having enough money for food</li> <li>Neither parent working</li> </ul>	<ul style="list-style-type: none"> <li>Having happy family relationships</li> <li>Family that eats together at least 5 times per week</li> <li>Family that always or usually want to know where you are and who you are with</li> </ul>

#### The Youth '12 survey revealed some differences in access to healthcare associated with consistent use of condoms and contraception

- Students with **inconsistent use of contraception** were **9% more likely** to report they were **unable to access healthcare in the past 12 months**
- Both students with **inconsistent use of contraception** and students with **inconsistent use of condoms** were **more likely** to report **trouble getting help for contraception/sexual health** and **pregnancy or a pregnancy test**

## 4. VIEWING AND RECEIVING SEXUALLY EXPLICIT MATERIAL

### 4.1 Using the internet to seek porn or sex sites



Using the internet to seek porn or sex sites was associated with differences in sexual violence and sexual health. Students who had seeked porn or sex sites were:



## 5. KEY CONSIDERATIONS

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The summary report identified a number of key findings that warrant consideration by those sectors and organisations working to support the development of young people:

### Young peoples' experiences of sexual violence

- There was a general decrease in unwanted sexual experiences reported by young people from 23% in 2001 to 15% in 2012. Although the University of Auckland notes that 15% is still too high.
- Young people were most likely to experience unwanted sexual contact from a boyfriend/girlfriend or friend. This highlights the importance of supporting young people to understand concepts such as consent and developing respectful friendships and relationships.
- The findings also suggest that any services or supports would benefit from being mindful of the higher levels of females, Māori and Pacific students reporting unwanted sexual experiences.
- There was a decrease in the proportion of young people who reported forcing someone to do sexual things. Males were more likely to report this behaviour than females.
- It is noted that nearly half of student perpetrators had experienced unwanted sexual contact themselves. This warrants consideration from providers working with these students.
- There was a decrease in the proportion of females who reported telling someone that they had an unwanted sexual experience. This finding warrants consideration by sectors and organisations supporting the development of young people. Particularly as those who do tell someone are most likely to tell a friend.
- Consideration also needs to be given to males experiencing an unwanted sexual experience, as they were less likely to tell someone.

### Risk and protective factors for sexual violence

- The findings highlight the importance of a positive home environment, including happy family relationships, having enough time with a parent and less worries relating to food or money.

### Health and social outcomes

- Students experiencing and forcing unwanted sexual contact reported poorer health and social outcomes in comparison to other students. They were also less likely to access healthcare, feel safe at school or plan to complete their education.
- While these outcomes are associations and not necessarily caused by their unwanted sexual contact, they highlight the importance of providing support for young people experiencing and forcing unwanted sexual contact. In particular, the findings highlight the importance of providing services that supports their mental, emotional and sexual health.

## Sexual and reproductive health

- Approximately a quarter of students reported having had sexual intercourse at least once; 19% were currently sexually active. This is a 7% decrease from 2007 (n=8261).
- Associations with current sexual activity included being older, being attracted to the same or both sexes and attending a low decile school. This highlights the value of providing information, access to contraception and supports for sexually active young people.
- The findings highlight the importance of providing information and support for younger students (12 to 15 years) who were more likely to report having more than one partner in the past three months.

## Use of condoms and contraception

- The increase in inconsistent condom use warrants consideration. The findings suggest that supporting young people to discuss preventing pregnancy or more broadly having protected sex would be beneficial, as only about a third reported always doing this.
- It is interesting to note, that males were more likely to report consistent use of condoms. It would be valuable to further explore this finding in future surveys. For example, are males seen to be responsible for contraception use and/or what is preventing females from taking responsibility? The previous literature also offers some useful insights here, such as the perception that a female is 'easy' if they carry condoms<sup>2</sup>.
- The findings also highlight the importance of providing young people with access to sexual health services and contraception. Young people reporting inconsistent condom and contraception use were more likely to report trouble accessing them.
- The survey highlights the importance of a positive home environment for young people's sexual health, and their use of contraception.

## Viewing and receiving sexually explicit material

- There was a decrease in the proportion of students who reported using the internet to seek porn since 2007 (18% to 11% in 2012).
- Students seeking porn sites were more likely to force someone to do sexual things that they did not want to do.
- Males were more likely to be seeking porn sites. This highlights the importance of helping young men to understand the differences between the sexual experiences presented in porn and those in a consenting healthy sexual relationship.

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<sup>2</sup> Marston, C & King, E. (2006). Factors that shape young people's sexual behaviour: a systematic review. *The Lancet*, 368(9547), p1581.