

**Engaging black and
minority ethnic (BME)
groups with sexual
health services:
A youth participation
project summary and
recommendations**

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Introduction

In early 2009, young people's sexual health charity Brook conducted a youth-led participation project to explore, analyse and document the drivers and barriers to young people from Black and Minority Ethnic (BME) communities accessing sexual health services.

The following recommendations, based on the outcomes of the project, have been developed to support health professionals in engaging young people, particularly those from BME communities, with sexual health services.

10 point guide for health professionals

1. Avoid simplistic segregation of

BME audiences. Research participants felt strongly that promotion of sexual health services and positive sexual health messages should be accessible and inclusive to all rather than singling out particular groups. Although other research reveals that cultural differences do exist, young people from BME communities felt that sexual health campaigns could be more effective if they do not appear to suggest that certain groups have greater sexual health needs.

Recommendation: When developing campaigns and sexual health services for young people, including those from BME communities, be mindful not to contribute to stereotypes of ethnic groups.

2. Ensure sexual health services are

confidential. Again, young people confirmed the importance of confidentiality when visiting a sexual health service. This is a common

concern for all young people and should always be a priority.

Recommendation: Work with young people and staff to discuss ways to reassure young people that your service is confidential, e.g. a tick box registration process avoids young people having to say out loud what service they need. Ensure the waiting room considers privacy and confidentiality. Recruit friendly staff who can speak to young people in a non-judgemental and respectful manner.

3. Incorporate cultural differences in sexual health promotion.

Although the young people in this project felt that cultural differences should not be the main focus of sexual health promotion, they did feel that cultural background can influence sexual behaviour. For example, commitment to family and/or religious values.

Recommendation: Try to tailor advertising or promotion materials to

reflect cultural differences, but avoid using stereotypes and ensure it states that **all** young people are welcome. If your budget stretches to photography, use people from different backgrounds and cultures in campaigns and ensure cultural visibility.

4. Educate parents and carers about how to talk to young people about sexual health.

Young people believe that supporting older generations in understanding why sexual health is important and in talking to young people can break down barriers to accessing services.

Recommendation: Encourage communication between parents and young people – perhaps through local workshops which help create trust. Encourage younger and older generations to share experiences in a positive way.

5. Use other youth services to promote sexual health to young people.

Many young people emphasised the need to destigmatise the process of visiting sexual health services and suggested combining this service with services they are already confident and comfortable using (e.g. careers advice workshops).

Recommendation: Try to partner up with other services to develop a 'one stop shop' approach (e.g. sexual health, careers and housing). Even on a small scale, this kind of work provides opportunities to

signpost young people to other useful services available locally.

6. Promote sexual health messages via the internet and on social networking sites, such as Bebo or Facebook.

Feedback from young people highlighted the need to promote sexual health through channels they regularly use and respect, particularly digital networks.

Recommendation: Exploring new media doesn't need to be expensive. Don't reinvent the wheel, but tap into existing resources ensuring young people can find you through other sites. Set up pages on social networking sites and update your service opening times every day.

7. Recruit peer-to-peer advisers to promote sexual health messages.

Young people have told us they often find it easier to discuss sexual health issues with their friends as they feel that they can trust their peers and that they understand their lives better, but it is important that the information they get this way is accurate.

Recommendation: Provide young people with opportunities to train as peer educators so they can work with other young people to promote positive sexual health messages in a social/non-formal situation.

8. Use schools as a platform to discuss sexual health issues and to normalise services.

As young people spend much of their time in

the classroom they felt that this is an ideal environment to help demystify sexual health and raise awareness of local services.

Recommendation: Work with schools to support the delivery of Personal, Social, Health and Economic Education (PSHE Education), which includes Sex and Relationship Education (SRE) and will become statutory from 2011. Use these sessions as an opportunity to signpost young people to confidential information and support and organise visits from local schools.

9. Show the benefits of visiting a sexual health service in advertising.

The research revealed feelings of invincibility among young people around contracting sexually transmitted infections (STIs). Participants suggested that services need to emphasise the reasons why taking care of sexual health is important and relevant, rather than using scare tactics which miss the mark.

Recommendation: In reality promotional budgets can be small and traditional advertising can be expensive. However, whatever the budget, it's important to ensure you

promote positive messages to encourage young people to attend services and highlight the benefits of staying sexually healthy and safe.

10. Choose less obvious outlets to distribute condoms and advice to young people. Rather than using traditional health centres to distribute condoms and advice, participants suggested alternative locations are often more relevant and more frequently accessed by young people. For example, fast food venues and young people focused community outlets can be less intimidating and embarrassing places for young people to pick-up condoms and advice.

Recommendation: Encourage partnerships with local retail outlets to disseminate condoms and advice. These might include local venues visited by young people, particularly late at night. Become involved in c-card schemes in partnership with other local organisations and individuals that work with young people.