

## **Risk, anxiety and fun in safe sex promotion**

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### **Abstract**

Young people in Western countries are still being taught that sex is something dangerous: 'Just don't have sex. You'll get pregnant and die'. Research shows that presenting sex as a source of anxiety results in negative outcomes for young people's sexual health, discouraging them from having safe sex conversations or from developing the sexual agency necessary to have happy, healthy sex lives. A recent project attempts to promote sexual health by making safe sex conversations fun. A "Yes, no, maybe" list provides a fun way in which prospective sexual partners can compare and talk about their relative interest in a range of sexual practices – including safe sex. A qualitative pilot study in Australia showed that this approach encouraged young people to talk about safe sex, not as a source of anxiety that is separate from sexual practice, but as something that is part of the fun of sex.

### **Introduction: discourses of risk, anxiety and science in sex education**

In Australian, British and American sex education, 'risk' is a key term. This central concept in sex education brings together two important discursive elements. Firstly it presents sex as a source of anxiety: sex is dangerous; it can kill you. Secondly, it takes a primarily biomedical view of sex: the 'risk' in sexual risk is commonly understood as the risk of contracting STIs or HIV or of falling pregnant, rather than emotional risk, for example. This chapter explores an alternative approach to encouraging safe sex communication between sexual partners that tries to avoid both of these discourses, instead presenting safe sex as something that can be fun and pleasurable.

In a series of focus groups to find out what 14-16 year olds in Australia know about sex, and where they have learned that information, it became clear that

'sex' as it was presented to them in school sex education was dangerous and scary. (McKee, Watson & Dore 2014):

16.F.2:<sup>i</sup> They never talk about having good sex because they don't want us to have sex.

16.F.3: They talk about not having sex.

16.F.5: *Mean Girls*<sup>ii</sup>. 'Don't have sex'

16.F.4: 'You don't have sex standing up. You don't have sex'

16.F.5: 'Just don't have sex. You'll get pregnant and die'.

The dangers related to sex were presented to young people in medical and scientific terms – the need for safe sex – rather than wider understandings about healthy relationships:

13.F.6: It's not – it's all scientific though, it's not more ...

13.F.2: It's not in relation to your life. It's just ...

13.F.4: Yeah.

13.F.6: Education about the disease.

Facilitator: Okay.

13.F.6: Yeah, and how it works. And how it works in your body. And I'm, like, 'Yeah, stuff that.' You wouldn't really talk about in everyday life.

13.F.2: Yeah.

13.F.6: But, 'This works like this because of the two x-proteins and all that stuff like that'.

13.F.4: Yeah.

13.F.6: You wouldn't say that in an everyday conversation.

13.F.4: No.

13.F.2: 'Did you know that the protein coating of AIDS changes that's why they can't cure it?'

13.F.4: Yeah, exactly (McKee, Watson & Dore 2014, p. 656)

Our research suggests that a fear-based approach using a scientific vocabulary does not encourage young people to see safe sex as an integral part of their sexual development. This is not a new insight. Researchers have noted that sex education in Australia, America and the United Kingdom often focuses on 'mechanics' (Carmody 2009, p. 42), 'plumbing' (Carmody 2009, p. 59), or 'puberty, procreation and penetration' (Sorenson & Brown 2007, p. 34). That this discourse predominates in sexuality education is not surprising: such an approach to sex is 'safe' in the sense that to present sex as a laboratory experiment protects teachers from the ire of conservative religious groups in their communities who might lead attacks should they talk to young people about sex as an embodied practice of pleasure. The current situation in Australia, the UK and (especially) America is the result of an extensive system of forces and institutions that make it difficult to talk to young people about their sexual development. Perhaps most difficult is the confusion of childhood 'innocence' with childhood 'ignorance', despite the significant differences between these terms (McKee 2012, p. 504). The idea that young people should be 'protected' from information about their changing bodies and developing sexuality has gained an increasingly strong presence in public debates (Faulkner 2010). And although over 75% of Australian parents support sexuality education at school (Quantum Market Research 2008), the small minority who oppose it are 'highly vocal and persistent in promoting their point of view' (Dyson 2010, p. 7). Newspapers have also found that stories about the 'sexualisation' of young people are an effective selling tool, creating strong emotional reactions in readers (Chronaki 2017). In this context it is not surprising that sex is presented in sex education as dangerous, and that safe sex – in a biomedical sense – is a central part of school curricula. But if safe sex is presented as a scientific practice, driven by anxiety, this information is unlikely to be drawn upon by young people in the everyday contexts in which they are starting to develop relationships and explore their sexuality. As the respondent notes above, 'You wouldn't say that in everyday conversation'. By contrast, this chapter explores a new tool that tries to make safe sex fun, rather than a source of anxiety – emphasizing the 'sex' of 'safe sex'.

## **Sex in everyday conversations**

Researchers are familiar with the charge that the construction of teen sex in school sex education is problematic (Bay-Cheng 2003). Of course, it is important to emphasise at the start that there is no single 'correct' discourse of sex.

However the fact that the discourses of sex used in much sex education are about anxiety, based on biomedical dangers, is problematic as it means that much of the information young people are provided – particularly around safe sex – sits in a register that is far removed from their own interests, experiences and practices of sex. The most recent National Survey of Australian Secondary Students and Sexual Health asked young people how they felt after their most recent sexual encounter:

Almost half of sexually active students reported that they felt 'extremely' good (46%), happy (43%), fantastic (41%) or loved (44%) after their last sexual encounter. Similarly, students were less likely to endorse the items conveying negative feelings after the last sexual encounter. Relatively small proportions of students reported feeling 'extremely' used (5%), regretful (6%), worried (5%), upset (3%) or guilty (5%) the last time they had sex (Mitchell et al. 2014, p. 38)

The discourses of sex education focus on fear and danger. When young people talk about their own sexual experiences they are more likely to see them as positive. This disjuncture between registers may also explain why young people have high levels of medical knowledge about STIs, though this does not always seem to translate into practice. Levels of notifications for HIVs and STIs in Australia are increasing: the population rate of diagnosis of chlamydia in 2011 was 345 per 100,000 population - a 7% increase over the rate in 2010. Young heterosexual men and women are among the groups with the highest rates of chlamydia positivity, (Kirby Institute 2012, p. 8). Among possible reasons for this increase (along with improved testing rates and more sensitive tests) is increased rates of unsafe sexual practices among young Australians generally (Smith et al. 2009, pp. 1, 2).

At the same time, research shows that young Australians generally have high levels of knowledge about safe sexual practices. The National Survey of Australian Secondary Students, HIV/AIDS and Sexual Health found that:

The vast majority of this sample of students knew that HIV could be transmitted by sharing needles (93%), that a woman could get HIV from having sex with a man (95%) and conversely that a man could get HIV from having sex with a woman (90%) ... [and] that the contraceptive pill offers no protection against HIV for women (85%) ... Similarly, most students were aware that using condoms during sex offered some protection from HIV (83%), (Smith et al. 2009, p. 13)

Similarly, levels of information about STIs have improved:

students' knowledge of Chlamydia has improved markedly between 2002 and 2008 ... Students surveyed in 2008 were significantly more likely to know that ... the infection can lead to sterility for women (55% vs 36% ) (Smith et al. 2009, p. 19)

The scientific discourses of anxiety used in sex education would appear to be successful – in the sense that they have increased the capacity of young people to talk accurately about sex within this discourse. But the same young people do not appear to be integrating this information into their own sexual practice. This is not surprising: discussing the protein coating of the HIV virus is a useful skill; but would we say that it is a *sexy* practice? Is it a conversation one would have with a partner with whom one is exploring one's own body, identity and pleasures? We know that the priorities for young people in sex education are 'how to make sexual activity more enjoyable for both partners' (Allen 2008, p. 581) and how to understand the emotional side of physical intimacy – how to start, manage and if necessary end relationships, and understand the place of love and physical intimacy in them (Allen 2008; Buckingham & Bragg 2004; Carmody 2009; Halstead & Reiss 2003; Parks 2010; Tacchi, Jewell & Donovan 1998). How would one include a discussion of retroviruses into such practices? This is particularly problematic when we know that young people lack the skills to engage in sexual communication. In focus groups they report that when asking

for what one wants sexually – including safe sex practice – they have learned that one should not say explicitly what one wants, but be ‘subtle’ or use ‘hints’. It may be that they have learned this lesson by observing the behavior of parents and teachers who refuse to talk openly to them about sex (as opposed to STIs), and give them the message that it is ‘awkward’ to speak about such things (McKee, Watson & Dore 2014).

### **Making safe sex fun**

How might we make safe sex fun? Our proposal is to use a “Yes, no, maybe” list that brings safe sex into the discursive realm of sexual pleasure, simultaneously promoting sexual communication.

‘Yes, no, maybe’ lists evolved in the BDSM community (Bondage and Domination, Dominance and Submission, Sado-Masochism) (Glickman 2010) and have since been developed as sexual health tools (Corinna & Turett undated). A ‘Yes, no, maybe’ list is a list of sex acts provided to sexual partners, who then independently rate each act – for example, on a scale of 0 (I never want to do this) to 5 (I really want to do this). Partners then compare their lists, using this as a non-adversarial, fun and sexy way to talk about their sexual interests. In this way talking openly and honestly about what one would enjoy in a sexual encounter becomes part of the fun of the sexual encounter itself (we included ‘Dirty talk’ in our ‘Yes, no, maybe’ list). Kink communities have developed practices for promoting communication about sexual desires and practices well in advance of other sexual communities (Easton & Hardy 2009). This is partly because kink practices are outside the mainstream of heteronormativity and so practitioners cannot assume that their sexual partners will want the same thing that they do (a mistaken assumption in much vanilla sex in any case); it also partly because some kinky practices – particularly in the BDSM arena – can be physically dangerous. By learning from the practices of kink communities, a tool like this makes it easier for people to talk about sex in a way that is not aggressive or defensive but rather – and vitally for this article – can be sexy and fun. A ‘Yes, no, maybe’ list provides us with a model of how discussing what we would like to do sexually with partners can be sexy and fun.

In order to draw safe sex into this practice, we developed a 'Yes, no, maybe' list suitable for a range of sexual identities, not just BDSM practitioners, with fewer 'kink' practices (Morpheus 2008). It also – centrally for this project – included 'Unprotected sex' as one possible option. This option was not separated out from other sex acts, as a scientific or healthy 'safe sex' option; rather it was integrated into the list as one possible sex act among others, about which partners could talk just as they would about kissing, anal sex, bondage or other sexy and fun sexual options, and without having to move into a separate scientific/health conversational register. The aim was to facilitate open sexual communication as a part of this fun, sexy and non-adversarial conversation. Our aim was to take safe sex out of the realm of education – you *should* do this – and into the realm of entertainment – what would you like to do? (McKee 2016, p. 33). We aimed not to make conversations about the use of condoms part of a fear-driven and anxious approach to sex, but part of a fun conversation about what participants find sexy.

The complete 'Yes, no, maybe' list is attached as Appendix 1. The introductory blurb emphasizes fun, and does not draw attention to the safe sex item ('barebacking'):

You can use this list at any point in your relationship – with your new boyfriend(s) or girlfriend(s) to work out what you're into, with your partner of thirty years to add a bit of spice to your relationship, or with a stranger (or strangers) you've just taken home as you plan what to do for the rest of the evening. Take a copy each and go through it individually. Decide what you think sounds sexy, giving the acts a mark from 0 (Never!) through 3 (Maybe ...) to 5 (Definitely!). Be as honest as you can – that's the fun. If there's something that you're not particularly into, but you'd be happy to do it if your partner's really into it, give it a 3. You can skip anything that's not relevant to you because you don't have the right body parts. The list is structured so that it starts with stuff that's suitable for beginners, moves through the everyday stuff, and ends up with the most advanced things. If you're getting uncomfortable feel free to stop at any

time. And if there's anything you want to do that's not on the list, add it at the end.

Then go through your lists together and see what you have in common – you might be surprised!

Remember – no judgment. The aim is to find ways to make your sex hotter and more fun – not to attack your partners for their different pleasures.

The possible sex acts were grouped into three categories – 'Beginners', which includes practices such as kissing, eye contact and mutual masturbation; 'Everyday', including acts such as blindfolds and handcuffs; and 'Advanced', including such practices as the use of strap-ons, rimming and urine play. These categories were introduced following concerns among the researchers that young people just starting on their journeys of sexual exploration might be daunted by a list of practices – particularly kinky practices – that might seem intimidating to them. Of course any such taxonomy will have its own problems – in this case, the very fact of naming them from 'Beginners' to 'Advanced' might imply that there is a necessary teleological element to sex and that everyone, while starting with kissing everyone should end up going to sex clubs and having threesomes. This was not the intent. From another perspective, gay men, for example, might be disturbed to see that we included Anal sex – an everyday practice for many gay men – in the Advanced list. At this point we merely note our acceptance that any such taxonomy will be imperfect and register our openness to continual development of such a list.

The hope is that people using the list will, as they consider the possible sex acts, come across 'barebacking' as one option – it is literally integrated as a sexual option rather than a scientific practice, as something that people having sex might enjoy, or might not enjoy, but might enjoy talking about. If both partners rate this practice as something they don't want to do, this has then already been raised and if, in the course of their sexual encounter anyone wants to change their mind an explicit commitment has already been made that can then be referred to. If partners have different attitudes towards barebacking – one really wants to do it, the other doesn't – then this is signaled as something to talk about in the same way as the other sexual practices on the list. It is something for

negotiation, for discussion, in a context where such negotiations and discussions are constructed as fun and sexy – dirty talk, in fact. And – importantly – if both partners agree they want to have unprotected sex then this is an acceptable outcome (this is discussed more below).

### **Can a 'Yes, no, maybe' list make safe sex fun?**

In the tradition of classic psychological research, we tested this idea on undergraduate students (Sears 1986). The limitations of such an approach are well known – it is difficult to generalize from such cohorts to make claims about wider populations as they tend to be more homogenous (Peterson 2001, p. 450), 'have less-crystallized attitudes, less-formulated senses of self, stronger cognitive skills, stronger tendencies to comply with authority, and more unstable peer group relationships' (Sears 1986, p. 515). We thus make no claims for generalizability or representativeness from this pilot study: it provides qualitative data that begins to explore whether we might be able to move safe sex closer to the everyday discourses that young people use for their own sexual identities and practices.

An email was sent in September 2013 to students enrolled in an introductory Business unit at our university inviting them to take part in a project about sex. This email made no mention of safe sex. They received no course credit for taking part, but were offered a small voucher (Aus\$20) for a department store. Eleven young people responded. The small number suggests that only the most sexually adventurous were willing to respond. Eight continued to initial meetings with the researchers – three did not respond to logistical emails. Two of the authors met with each of these young people to introduce the 'Yes, no, maybe' list and explain how to use it. At this point no mention was made of safe sex, and no attention was drawn to the item 'Unprotected sex'. Students were told to take the List with them and use it in their own practice. Three months later these undergraduate students were invited to attend focus groups about the list, where they were introduced to the purpose of the List to promote Health Protective Sexual Communication and asked about whether it had done its job. Six students (ages = 20-27) continued to this data-gathering phase of the project;

the other two were unable to arrange a suitable time to attend a focus group. It is worth noting that the focus group members were first year undergraduate students. We did not return to members of our earlier high school focus groups, aged 14-16, or attempt to facilitate their discussion with their sexual partners. The legal age for heterosexual sex in Queensland was sixteen years old, and so we were concerned ethically at the implications of asking people under the age of consent to discuss sexual practices with partners.

These focus groups were conducted in a university classroom, and were video-recorded, transcribed with pseudonyms and subjected to 'interview textual analysis' (McKee 2004, p. 205). Such an approach treats the interview data:

as a text to be subjected to poststructuralist textual analysis, making an educated guess at some of the most likely interpretations that might be made of that text (p. 205)

It does not take 'a naïve realist approach to [the] data', attempt to measure the 'authenticity' or 'truth' of the speaking positions or 'look for hidden deep meanings of which the interviewees themselves would be unaware' (p. 205).

### **What young people said**

The young people who had used the 'Yes, no, maybe' list agreed that it promoted open sexual communication with their partners. Words used to describe their use of the list were 'informative' (Sylvia) and 'honest' (Nigel): 'I probably wouldn't have found out things if we hadn't had that discussion based on that' (Sylvia). Fiona agreed that: 'Like we were talking about all kinds of things cos it was very open and it triggers that communication ... we were like, what do you think of that? ...'

The respondents agreed that the List had not felt like a scientific 'safe sex' promotion. When asked if they had felt they were being prompted to have a 'safe sex' conversation, Nigel responded 'No, not really', and noted that it was 'probably one of the more timid options' and that he 'didn't really think anything of it' when he was using the list.

Interviewer : You had the discussion about unprotected sex in the same way as you did about other options on the list?

Nigel: Yeah ... It was pretty easy to discuss.

Nigel went on to note that:

the list itself gives a list of things to give a sexual partner to find out what they are comfortable with and so having the ability to just outright say yes I want protected, or unprotected sex, I think that opens the door to have opinions voiced on that.

Other young people agreed:

Fiona: It's a good entrance into them discussing about safe sex because you will sort of exchange things and then you can discuss other things, like protection, that sort of thing ... it's a good icebreaker.

Mark: It's a good way in general just to start communication about sex in a less intimate way, as opposed to a straight up factual way.

Penny: I would say less emotional. People can get offended like sometimes if you say like to your partner that you want to do something they don't consider, they could get offended – like, you know, you don't think they're good enough or something, you know. Whereas that, you know, there's no judgment, it's just 'Would you like that?'

Sylvia similarly said that:

I wouldn't say it promoted safe or unsafe sex – more knowing what you want ... being comfortable enough to talk to your partner about what you want, what they don't want ...

One focus group member said that the list promoted 'informed sex rather than safe sex' (Sylvia) and was thus seen positively, not as another attempt by authority figures to preach to them. This is important because researchers have previously found that young people reject material that they see as being overly didactic or 'preaching' (Buckingham & Bragg 2004, p. 183).

There was no sense that, even though the list had pointed its users towards thinking about the place of safe sex in their practices – through whether or not

they wanted, and agreed on whether they wanted, to have unprotected sex – that this had created anxiety for them, or suggested that they should be fearful about their sexual practice. In fact respondents said that using the list was ‘fun’ (Sylvia) or ‘super fun’ (Tara). This term was not introduced to the discussion by the facilitator, but rather raised spontaneously by the focus group subjects. As noted above, an important advantage of focus groups is that it allows subjects to use their own language to describe issues. The fact that the young people introduced this term from their own vocabulary suggests that they were not responding to experimenter desire, but articulating their actual experience of using the ‘Yes, no, maybe’ list. A central aim of this project was to produce a tool that was not seen as ‘scientific’, didn’t promote a fearful view of sex, and did not remove discussions about safe sex from the realm of pleasurable and everyday sexual practice. The fact that respondents spontaneously used the term ‘fun’ to describe the list suggests that it meets this requirement.

### **Risk, agency and communication**

It is worth noting at this point in the argument that we didn’t ask the young people whether they actually changed their sexual practices because of the list – rather we explored whether the tool had made it easier for them to have conversations about what they wanted sexually, including their desires around safe sex. Once again, this is an important shift away from traditional anxious discourses of safe sex, which measure their success in terms of the extent to which young people do what they are told, towards an approach that is based around young people’s sexual agency – to what extent are they making informed, consensual decisions with which they are happy. This is a key distinction that bears some explication.

The anxiety of many discourses about young people’s sexuality emerges from a desire to protect young people from their sexuality – which is linked to a desire to control their sexual practices (McKee 2013). The ‘Yes, no, maybe’ list moves away from this anxious desire to control. The measure of success here is not how little unprotected sex people are having – but rather whether people are making an informed consensual decision to have unprotected sex or not. As we

noted above, young people in Australia already have high levels of scientific knowledge about STIs and safe sex: but this is not always put into practice. The fact that formal discourses of sex education in Australia, Britain and the UK often present sex as something to be fearful and anxious about means that for young people preparing for sex by buying condoms, for example, is 'frowned upon' because it means that you have consciously decided to do something bad (have sex) – and have even prepared for it:

3.M.1: Um, because it's kind of frowned upon, I suppose a bit. Like with our age group. Like, you know, if somebody went out and bought like a packet of condoms it would be like oh, you know, what are you expecting? (McKee, Watson & Dore 2014, p. 657)

The implication is that it's actually better if sex happens 'on the spot' - because at least then the young person is not *deliberately* planning to do something bad. This project aims to remove this stigma by making the whole process of talking about sex a fun and sexy practice in itself.

The use of the term 'risk' in research into sexual health often suggests that any risky practices are bad, and must be minimized. There are many problems with such an approach. Firstly, 'risk' is often conceptualized simply in terms of diseases and pregnancy. A whole raft of 'risks' are ignored – for example, the risk that one might be in a patriarchal and unsatisfying relationship, that one might have bad sex, that one might be emotionally abused by a partner – and excluded as unimportant. Secondly, risk is, in itself, not a bad thing. In fact risk is a vital part of the learning process – it is only by extending ourselves beyond areas which we already know well and in which we are already confident that it is possible for us to learn anything new. Quite apart from such theoretical considerations, there are clearly points where unprotected sex is a rational act – for example, if one is trying to get pregnant then having unprotected sex is not a negative outcome of sexual negotiation.

From this perspective the desirable outcome of the 'Yes, no, maybe' list is not just a reduction in people having unprotected sex; it is a reduction in people having unprotected sex that is not informed and chosen. This approach privileges sexual agency over biological models of sexual health. Sexual agency refers to:

more than the ability to say “no”. It involves the negotiation of sexual desires, contextual factors, and the ability to assert the resulting decision, whether yes or no (Bay-Cheng 2003, p. 65)

The use of a tool like the ‘Yes, no, maybe’ list requires rethinking what constitutes safe sex, and more widely, what constitutes healthy sexual development. McKee et al identify fifteen domains of healthy sexual development. Number four is ‘an understanding of safety’:

In healthy sexual development, children learn what is safe sexual practice. This is meant in the widest possible sense, including physical safety, safety from sexually transmitted diseases and safety to experiment (McKee et al. 2010, p. 16)

That is to say healthy sexual development does not involve avoiding all risky behavior because you have been told to by an authority figure. Rather it involves making informed consensual decisions. As we noted at the start of this article it seems that young people have good levels of information about sexual risk (or at least, about biological aspects of sexual risk – perhaps less about the risks of bad sex). By creating a space that facilitates open communication about mutual desires informed by such knowledge, and without using fear to increase anxiety – by making safe sex sexy and fun - the ‘Yes, no, maybe’ tool aims to increase levels of healthy sexual practice.

It might be argued that trying to promote higher levels of sexual agency and conversation about sexual desires – including but not limited to desires around safe sex – is too limited a goal for a safe sex project. Our research suggests that this is not the case – that for young people, support in developing the agency, language and skills to talk about what they want sexually is severely lacking in their sex education from schools and parents.

In our focus groups with the 14-16 year olds, when we asked young people how you would ask for what you want in a relationship (including what you want sexually) there was a strong consensus across groups that you shouldn’t say out loud what you want:

4.M.2: Oh with the whole how do you ask, ah, taking it to the next level, like usually, like you'd just sort of like suggest it with like body language and stuff. Like it wouldn't just be like, like you wouldn't just like walk up to a girl and just be like like to make out or stuff like that (talking over the top) .

..

4.M.1: You'd actually say it . . .

4.M.2: Like you'd just go with what you've already done and just like sort of work your way up slowly.

Fac: Using body language.

4.M.2: Yeah.

Fac: And then how do you judge whether your partner's interested or not?

4.M.2: Well it's like hard to explain really, because if you see somebody like . . . if somebody like . . . if you see their body language like you can kind of just like read it and know (McKee, Watson & Dore 2014, p. 659)

They rejected the idea of asking explicitly for what you want, instead saying that you should be 'subtle' or use 'hints'. There was general agreement among the young people that the one thing you should never do is ask explicitly for what you want from a relationship: the more acceptable approach was 'saying something else which suggests what you want to ask' (18.M.2). Researchers have noted the continuing dominance of romantic ideals in Western culture such as 'love at first sight' and 'soul mates' (Hefner & Wilson 2013). One important element of such ideals is an assumption of absolute agreement – that it is isn't necessary to discuss and reach agreement about different desires and needs because the very fact of being in love means that you will agree about everything in an almost telepathic way. The idea of *talking* about what you would like to do sexually can seem like a betrayal of romantic ideals, turning sex into just one more chore to be managed. It is also risky – in the sense that it's much easier to retreat from a position of body language rather than if you've already exposed yourself by saying what you want out loud. In this context, if we can support young people in having fun, sexy and confident conversations about what they want sexually – including what they want in the realm of condom use and other

practices to prevent STIs, HIV and pregnancy – we believe that is an important achievement.

## **Conclusion**

The theme of this volume is ‘Sexual Health, Cultural Consumption and Parental Concerns of Children: anxiety over childhood and youth across cultures’.

Previous research has shown that sex education in the UK, Australia and America promotes anxiety about sex – ‘Just don’t have sex. Youll get pregnant and die’.

This chapter has described a project that attempts to ameliorate these discourses of anxiety by providing a way for young people to talk about sex – and in particular, safe sex – in ways that are fun and sexy rather than informed by fear. Nigel, one of the young people in our undergraduate focus groups, suggested that:

the list itself gives a list of things to give a sexual partner to find out what they are comfortable with and so having the ability to just outright say yes I want protected, or unprotected sex, I think that opens the door to have opinions voiced on that.

In a context where much sex education uses a concept of ‘risk’ to try to manage young people’s sexual practices, by presenting sex as a source of anxiety, understood as a biomedical practice, the ‘Yes, no, maybe’ list tries to shift the register of discussions. It presents the use of prophylactics as one among many sexual options that young people might consider. It lists them as a possible sexual practice that can be talked about, among others that exist purely for pleasure. It encourages young people to develop their own sexual agency, to decide for themselves what their pleasures and preferences are, and to have open and assertive communication with partners about their desires, in a non-confrontational context that avoids the heat of the sexual moment and allows those conversations in themselves to be sexy. It does not attempt to protect them from their sexual desires, nor to control their sexual practices. It tries to make these discussions fun, and respects the decisions they make. Ultimately, the ‘Yes, no, maybe’ list resolutely does not encourage young people to see sex as a source

of anxiety. The feedback from our focus groups suggests that the tool may have been successful in this aim.

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### **Appendix: 'Yes, no, maybe' List**

You can use this list at any point in your relationship – with your new boyfriend(s) or girlfriend(s) to work out what you're into, with your partner of thirty years to add a bit of spice to your relationship, or with a stranger (or strangers) you've just taken home as you plan what to do for the rest of the evening. Take a copy each and go through it individually. Decide what you think sounds sexy, giving the acts a mark from 0 (Never!) through 3 (Maybe ...) to 5 (Definitely!). Be as honest as you can – that's the fun. If there's something that you're not particularly into, but you'd be happy to do it if your partner's really into it, give it a 3. You can skip anything that's not relevant to you because you don't have the right body parts. The list is structured so that it starts with stuff that's suitable for beginners, moves through the everyday stuff, and ends up with the most advanced things. If you're getting uncomfortable feel free to stop at any time. And if there's anything you want to do that's not on the list, add it at the end.

Then go through your lists together and see what you have in common – you might be surprised!

Remember – no judgment. The aim is to find ways to make your sex hotter and more fun – not to attack your partners for their different pleasures.

If you find that this survey raises issues in your relationship, contact ASSERT (Australian Society of Sexuality Educators, Researchers and Therapists) - [jmklug@bigpond.com](mailto:jmklug@bigpond.com), 0419 760 852. They can put you in touch with a counselor who can provide support in working through any issues.

### Beginners

<p style="text-align: center;"><b>SEX ACT</b></p> <p style="text-align: center;">(The thing you'll be doing)</p>	<p style="text-align: center;">Doing it to your partner</p> <p style="text-align: center;">Yes? No? Maybe? (Score 0-5 - 0 = Never, 3 = Maybe, 5 = Definitely!)</p>	<p style="text-align: center;">Having it done to you</p> <p style="text-align: center;">Yes? No? Maybe? (Score 0-5 - 0 = Never, 3 = Maybe, 5 = Definitely!)</p>
Blow job (oral sex on a man)		
Cuddling		
Cyber Sex (sex over the internet)		
Dirty Talk		
Dry Humping (rubbing your bodies together with clothes on)		
Edging (delaying orgasm)		
Erotic Massage		
Exhibitionism (showing off erotically for one or more watchers)		
Eye contact		
Feathers (stroking your partner with them)		
Fingering (Anal)		

Fingering (Vaginal)		
Food Play (spreading food on naked bodies)		
Giving compliments		
Going down (oral sex), on a woman		
Kissing (no tongues)		
Kissing (French - with tongues)		
Lap Dance		
Massage (not erotic)		
Masturbating yourself while your partner watches		
Mutual Masturbation (doing each other)		
Nipple Play (tweaking, nibbling, sucking)		
Phone Sex		
Watching pornography together		
Quickies (short, quick sex on the run)		
Role Play (pretending to be different characters)		
Sex in the Dark		
Sexting		
Striptease		
Vaginal sex		

Vibrators		
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Everyday

<b>SEX ACT</b> (The thing you'll be doing)	Doing it to your partner  Yes? No? Maybe? (Score 0-5 - 0 = Never, 3 = Maybe, 5 = Definitely!)	Having it done to you  Yes? No? Maybe? (Score 0-5 - 0 = Never, 3 = Maybe, 5 = Definitely!)
69 (mutual oral sex)		
Blindfold		
Butt Plugs/Toys		
Domination and Submission (role playing where one partner orders the other one around)		
Facials (cum on the face)		
Feet (playing with someone's feet, sucking on their toes)		
Group sex (orgies)		
Handcuffs		
Open Relationship (having sex with other people when you are in a relationship)		
Pearl necklace (cum on the chest and neck)		

Positions for penetrative sex – Penetrator On Top		
Positions – Doggy style (rear entry)		
Positions – Side by Side		
Positions – Sitting		
Positions – Standing		
Positions – Penetrator on Bottom		
Spanking		
Titty Fucking		
Tying up (with rope or scarves)		

Advanced

<b>SEX ACT</b> (The thing you'll be doing)	Doing it to your partner  Yes? No? Maybe? (Score 0-5 – 0 = Never, 3 = Maybe, 5 = Definitely!)	Having it done to you  Yes? No? Maybe? (Score 0-5 – 0 = Never, 3 = Maybe, 5 = Definitely!)
Anal sex		
Public Sex		
Rimming (licking anus)		
Rough Play (pulling hair, treating each other roughly)		
Sex Clubs		

Sex Parties		
SM (Erotic Pain Play)		
Strap-On Play (using a strap-on dildo)		
Threesome		
Unprotected sex (barebacking)		
Urine Play		
Voyeurism (watching other people)		

Other ideas!

<b>SEX ACT</b> (The thing you'll be doing)	Doing it to your partner  Yes? No? Maybe? (Score 0-5 - 0 = Never, 3 = Maybe, 5 = Definitely!)	Having it done to you  Yes? No? Maybe? (Score 0-5 - 0 = Never, 3 = Maybe, 5 = Definitely!)


**References**

Allen, L. 2008, 'They Think You Shouldn't be Having Sex Anyway': Young People's Suggestions for Improving Sexuality Education Content', *Sexualities*, vol. 11, no. 5, pp. 573-594.

Bay-Cheng, L.Y. 2003, 'The trouble of teen sex: the construction of adolescent sexuality through school-based sexuality education', *Sex Education: Sexuality, society and learning*, vol. 3, no. 1, pp. 61-74.

Buckingham, D. & Bragg, S. 2004, *Young People, Sex and the Media: the facts of life?*, Palgrave Macmillan, London.

Carmody, M. 2009, *Sex and Ethics: young people and ethical sex*, Palgrave Macmillan, South Yarra, Victoria.

Chronaki, D. 2017, 'What does news teach about sex? Young people's understandings of the media framing of sexuality', in L. Allen & M.L. Rasmussen (eds), *The Routledge Handbook of Sexuality Education*, Routledge, London, pp. 423-438.

Corinna, H. & Turett, C.J. undated, *Yes, no, maybe so: a sexual inventory stocklist*, Scarleteen, viewed 11th September 2017 2017  
[http://www.scarleteen.com/article/advice/yes\\_no\\_maybe\\_so\\_a\\_sexual\\_inventory\\_stocklist](http://www.scarleteen.com/article/advice/yes_no_maybe_so_a_sexual_inventory_stocklist).

Dyson, S. 2010, *Parents and Sex Education: parents' attitudes to sexual health education in WA schools*, Department of Health, WA, Melbourne.

Easton, D. & Hardy, J.W. 2009, *The Ethical Slut: a practical guide to polyamory, open relationships and other adventures*, 2nd Edition edn, Celestial Arts, Berkeley, California.

Faulkner, J. 2010, 'The innocence fetish: the commodification and sexualisation of children in the media and popular culture', *Media International Australia*, no. 135, pp. 106-117.

Glickman, C. 2010, 'Yes/No/Maybe Lists', *Charlie Glickman*, viewed 2 May 2014  
<http://www.charlieglickman.com/2010/03/12/yesnomaybe-lists/>.

Halstead, M.J. & Reiss, M.J. 2003, *Values in Sex Education: from principles to practice*, Routledge and Farmer, London and New York.

Hefner, V. & Wilson, B.J. 2013, 'From love at first sight to soul mate: the influence of romantic ideals in popular films on young people's beliefs about relationships', *Communication Monographs*, vol. 80, no. 2, pp. 150-175.

- Kirby Institute 2012, *HIV, Viral Hepatitis and Sexually Transmissible Infections in Australia Annual Surveillance Report 2012*, The Kirby Institute for Infection and Immunity in Society, UNSW.
- McKee, A. 2004, 'Is Doctor Who political?', *European Journal of Cultural Studies*, vol. 7, no. 2, pp. 223-259.
- McKee, A. 2012, 'The importance of entertainment for sexuality education', *Sex Education*, vol. 12, no. 5, pp. 499-510.
- McKee, A. 2013, 'Why are children the most important audience for pornography in Australia?', in A. Moran & K. Aveyard (eds), *Watching Films: New perspectives on movie-going, exhibition and reception*, Intellect Books, pp. 89-100.
- McKee, A. 2016, *FUN! What entertainment tells us about living a good life*, Palgrave Macmillan, London.
- McKee, A., Albury, K., Dunne, M., Grieshaber, S., Hartley, J., Lumby, C. & Mathews, B. 2010, 'Healthy Sexual Development: A Multidisciplinary Framework for Research', *International Journal of Sexual Health*, vol. 22, no. 1, pp. 14-19.
- McKee, A., Watson, A.-F. & Dore, J. 2014, 'It's all scientific to me': focus groups insights into why young people don't apply safe sex knowledge', *Sex Education*, vol. 14, no. 6, pp. 652-665.
- Mitchell, A., Patrick, K., Heywood, W., Blackman, P. & Pitts, M. 2014, *5th National Survey of Australian Secondary Students and Sexual Health*, Australian Research Centre in Sex, Health and Society, La Trobe, Victoria.
- Morpheous 2008, *How to Be Kinky: A Beginner's Guide to BDSM*, Green Candy Press, n.p.
- Parks, L. 2010, *Aussie youth play it safe when it comes to sex info*, Family Planning New South Wales, viewed 12 August 2010 <[http://www.fpnsw.org.au/851916\\_3.html](http://www.fpnsw.org.au/851916_3.html)>.
- Peterson, R.A. 2001, 'On the use of college students in social science research: insights from a second-order meta-analysis', *Journal of Consumer Research*, vol. 28, no. 3, pp. 450-461.
- Quantum Market Research 2008, *Sex - Telling it like it is: A parent and teen insight*, Marie Stopes International, Melbourne.
- Sears, D.O. 1986, 'College sophomores in the laboratory: influences of a narrow base on social psychology's view of human nature', *Journal of Personality and Social Psychology*, vol. 51, no. 3, pp. 515-530.
- Smith, A., Agius, P., Dyson, S., Mitchell, A. & Pitts, M. 2009, *Secondary Students and Sexual Health 2008: results of the 4th national survey of Australian secondary students, HIV/AIDS and sexual health*, Australian Research Centre in Sex, Health and Society, La Trobe University, Melbourne.
- Sorenson, A. & Brown, G. 2007, *Report on the Sexual Health Education of Young People in WA*, WA Health, Perth, WA.
- Tacchi, J., Jewell, D. & Donovan, J. 1998, 'Teenage health in Bristol: A qualitative study of pregnant and non-pregnant young women', *Unpublished paper*.

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<sup>i</sup> Key: 16<sup>th</sup> refers to the 16<sup>th</sup> focus group; F specifies the group members were female; the final number gives the participant number in the group.

<sup>ii</sup> A film which parodies this tendency in sex and relationships education.