

C O N S E N T



Let's Talk About Consent

A Guide for Youth Workers exploring the concept of consent with young people





Acknowledgments

This guide was written by Louise Monaghan, Training Consultant, National Youth Health Programme. Assistance was provided by Rachael Treanor, Manager, and Lisa Harold, Project Officer in the National Youth Health Programme.

A sincere thank you to Moira Germaine, Education and Training Manager, Sexual Health and Crisis Pregnancy Programme for her assistance in developing this guide.

The National Youth Council of Ireland

The National Youth Council of Ireland is the representative body for voluntary youth organisations in Ireland. We use our collective experience to act on issues that impact on young people.
www.youth.ie

National Youth Health Programme

The National Youth Health Programme (NYHP) is a partnership between the National Youth Council of Ireland, the Health Service Executive (HSE) and the Department of Children, Disability, Equality, Integration and Youth www.youth.ie/health

Written by: Louise Monaghan, Consultant Trainer with the National Youth Health Programme with support from Lisa Harold, Health Promotion Officer and Rachael Treanor, National Youth Health Programme Manager.

Design: www.Brandcentral.ie

First published by the National Youth Council of Ireland in 2020

All rights reserved.

National Youth Council of Ireland

National Youth Health Programme

3 Montague Street, Dublin 2, D02V327

www.youth.ie

T: 01 478 4122

E: info@nyci.ie

Registered Charity Number: CHY 6823



An Roinn Leanaí
agus Gnóthai Óige
Department of
Children and Youth Affairs





Contents

Introduction	6
Background to the development of this booklet	6
Aim of this Guide	8

Section 1: Key definitions

Defining Sexual Health	10
Defining Consent	10
Defining Sexual Consent	10
The Concept of Assent	11
Consent-Compliance-Coercion-Force	12
Sexual Misconduct	14
Rape and Sexual Assault	14

Section 2: Consent and the Law

Sexual Consent	17
The Legal Age of Consent	18
Persons in Positions of Authority	19
The Definition of a Child	19
Permission to Marry	19
Medical Procedures and Consent	20
Contraception	20
Abortion	20
Digital Age of Consent	21

Section 3: Working with Young People on the Concept of Consent

Why is it Important to work with Young People	23
On the Concept of Consent?	23
Sexual Competence	23
Consent and Healthy Boundaries	23
Accepting a 'No' and Handling Rejection	24
Sexual Health Literacy	25

Section 4: Important Messages about Sexual Consent for both Young People and Adults

Consent, Sexual Health Support and Help-Seeking	29
Considerations for Youth Organisations when Working on Consent	30
Support Agencies	34
Additional Information on Consent	34



Introduction

The National Youth Health Programme (NYHP) is a partnership between the National Youth Council of Ireland (NYCI), the Health Service Executive (HSE) and the Department of Children, Disability, Equality and Integration. The NYHP works towards making a defining contribution to the development of effective youth health promotion practices which support young people to make healthy and positive choices.

Background to the Development of this Guide

The everyday practice of Youth Work is challenged by a broad range of factors relating to young people's health and wellbeing. Addressing the issue of consent with young people is an important priority for youth organisations today. Anecdotal evidence suggests that there is a lack of clarity as well as a certain amount of misinformation with regard to the concept of consent and this is having an impact on young people's sexual health. Additionally, there is a lack of comprehensive research and accompanying training programmes on the issue of consent aimed at young people in Ireland. Whilst there have been some developments in this area,



particularly in relation to work carried out in third level colleges, such as the Active* Consent work in NUIG and the BodyRight Programme from the Dublin Rape Crisis Centre (DRCC), there are very few programmes in Ireland aimed at younger people that specially address consent. Research conducted by NUI Galway's Active* Consent Programme in partnership with the Union of Students in Ireland (USI) in 2020 highlighted the level of sexual violence and harassment experienced by students in higher education institutions. Key findings included the following:

- 29% of females, 10% of males, and 28% of non-binary students reported non-consensual penetration by incapacitation, force, or threat of force during their time in college.
- Just over half of first year students reported experiencing sexual harassment in the form of some form of sexual hostility since beginning college. This rose to 62% for second year students, and 66% for undergraduate students in third year or higher.
- Over half of students with a disability reported an experience of sexual misconduct by any tactic (56%), compared with 42% of other students.

In order to get a clearer picture in relation to the youth sector, the NYHP in 2019, conducted research with youth organisations 'Consent and the Youth Sector- what do we know?' using online survey and focus groups. The purpose of this rapid needs assessment was to inform the NYHP about the issues surrounding consent for young people and, in turn, to build the capacity of the youth work sector to support young people in addressing these issues in their lives and in their relationships. Additionally, this needs assessment will support the NYHP to develop and signpost resources and information on consent for the youth work sector in order to:

- Explore the main issues surrounding consent
- Clarify the concept of consent
- Facilitate young people to address the issue of consent in their lives and in their relationships.

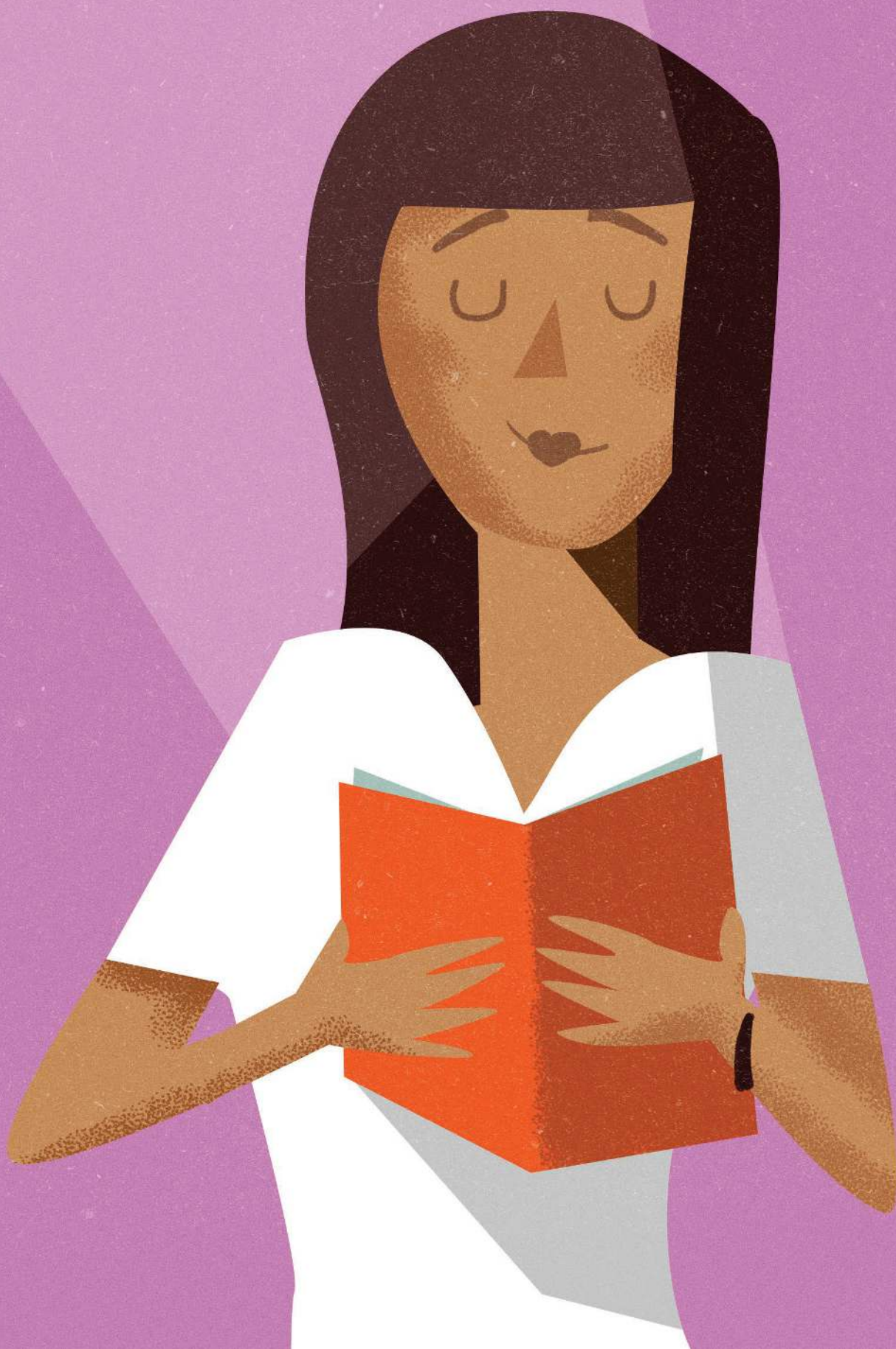
For more information on this report, please [click here](#)

Aim of this Guide

This guide has been developed in response to one of the recommendations arising out of this research and aims to provide workers and volunteers with additional information and signposting to enable them to address the issue of consent with the young people they work with. The booklet is part of a wider response by NYHP to the issue of consent and is accompanied by a booklet for young people as well as a one-day training programme for workers and volunteers. Further information is available on youthhealth.ie

Section 1:

Key Definitions





Defining Sexual Health

The World Health Organization has defined sexual health as: 'a state of physical, emotional, mental and social wellbeing in relation to sexuality; that is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence'. (WHO, 2006). This definition provides a useful backdrop to the concept of consent.

Defining Consent

It is important to remember that the concept of consent is much broader than its application to sexual activity. Consent may be defined as permission for something to happen or agreement to do something. Furthermore, it is a concept which is relevant throughout the life course. Much of the discussion and debate on this issue focuses on young people. However, adults also need to be very clear as to the nature and meaning of consent.

Defining Sexual Consent

Sexual consent is defined in Irish law and to summarise, a person consents to a sexual act if he or she freely and voluntarily agrees to engage in that act. ([Source: Click here Gov.ie](#))

The Criminal Law (Sexual Offences Act) 2017 provides a legal definition of sexual consent as follows:

"9. (1) A person consents to a sexual act if he or she freely and voluntarily agrees to engage in that act.

This legislation goes on to outline the conditions under which consent cannot be given, as well as some additional considerations, which are outlined further on in this resource.



The Concept of Assent

Education about consent should begin early in a child's life in order for them to fully grasp the concept. We are often directed to the law for guidance on the various ages at which an individual can legally consent to various interventions or actions, e.g. medical treatment, participation in research, etc. This can sometimes lead to the assumption that a child or young person who does not meet the age requirement should not have their views or wishes taken into account. This is where the concept of assent comes into play. The National Consent Policy (HSE 2019) defines assent as 'an expression of willingness or affirmative agreement to a health or social care intervention given by a young person who is not legally authorised or has insufficient understanding to be competent to give full consent'. This means that even when children and young people are not legally capable of giving consent, reasonable efforts should be

made to ensure that they understand the particular circumstance and the implications of their agreement in this circumstance. This is an important building block in terms of supporting an evolving understanding of consent. Assent takes account of the child's human rights as well as their developing autonomy. It is also about involving the child or young person in the overall decision making process, not just getting a 'yes' from them or getting them to go along with the situation. This is also about showing respect to the child or young person. This concept very much aligns with the ethos of youth work and its strong emphasis on youth participation, giving young people opportunities to make their views known and their voices heard.



Consent – Compliance – Coercion – Force

(Dublin Rape Crisis Centre Consent Resource)

'When considering the concept of consent, it is important and helpful to tease out the grey areas which lie between Consent and Force. The Dublin Rape Crisis Centre, in its awareness and education youth programmes, references consent and other definitions whereby:



Consent is

The voluntary agreement in a relationship where there is equal power, to engage in a sexual act



Compliance is

Pressure from within, doing what I believe the other wants, what I think will happen if I do/don't....



Coercion is

Being compelled to do what others want. Pressure from outside, what will happen if I don't....



Force is

No Consent. Psychological, physical force or blackmail used so as to leave the person no choice



Where there is Consent, all parties are agreeing voluntarily and with equal power and agency, to engage in a sexual act or acts. However sometimes a person may be internally placing pressure upon themselves to take part in sexual acts they are not fully comfortable with, or even that they do not want to be involved in at all. This is what we are calling compliance: the pressure comes from within, perhaps trying to meet the expectations of others, or what they think everyone else does, or what they think they should themselves be doing. The other/s involved may know nothing of this pressure, there is no sexual crime happening, but the person who complies in this way may be harming themselves, pressuring themselves into a situation that feels violating.

Where there is any pressure from outside we move into the area of coercion. This can be quite subtle or quite overt. If, for example, one person in a relationship declines sexual activity and the other gets moody or even sulks for a couple of days, this is coercion and puts pressure on the

other person to agree to sexual activity in the future. That agreement cannot be considered to be fully consensual. The other person may make barbed comments in public, or retaliate by flirting with others. They may threaten to end the relationship, to withhold money, or to tell others there is something wrong with the other person.

Even where this behaviour may not lead to sexual activity that would be considered to constitute a crime, coercion very easily becomes a form of force. Force includes blackmail, psychological and emotional force, as well as physical force’.

This is an educational resource for information and is not a legal interpretation of consent.

(Reproduced with kind permission from Dublin Rape Crisis Centre Youth Programmes 2020
<https://www.drcc.ie/>)

Sexual Misconduct

The Framework for Consent in Higher Education Institutions (2019) defines sexual misconduct is any form of unwelcome behaviour of a sexual nature that may be subject to disciplinary proceedings (in the context of a higher education institution). This includes crimes of sexual violence, sexual cyberbullying of any kind including non-consensual taking and/or sharing of intimate images, creating, accessing, viewing or distributing child pornography material online or offline, stalking behaviours whether online or offline in a sexual context, and any verbal or physical harassment in a sexual context. Sexual misconduct can be committed by a person of any gender and it can occur between people of the same or different genders. It is often gender targeted and perpetrated to demean, diminish and intimidate. Sexual misconduct may occur between strangers or acquaintances, including people involved in an intimate or sexual relationship.

(Source: [Safe, Respectful, Supportive and Positive Ending Sexual Violence and Harassment in Irish Higher Education Institutions](#)).

Rape and Sexual Assault

Rape

Rape is provided for by section 4 of the Criminal Law (Rape) (Amendment) Act 1990 as follows:.

- (1) In this Act “rape under section 4 ” means a sexual assault that includes—
 - (a) penetration (however slight) of the anus or mouth by the penis, or
 - (b) penetration (however slight) of the vagina by any object held or manipulated by another person.
- (2) A person guilty of rape under section 4 shall be liable on conviction on indictment to imprisonment for life.
- (3) Rape under section 4 shall be a felony.”

Rape is a gender-neutral offence for both the victim and the perpetrator.

Aggravated Sexual Assault

This is sexual assault aggravated by serious violence, or the threat of serious violence, or is such as to cause severe injury, humiliation or degradation of a grave nature to the victim.

Sexual Assault

This is a sexual attack with a less serious level of violence than aggravated sexual assault. There are two parts to this offence: there must be intentional assault, and an aura of indecency.

(Source: What is Sexual Violence? Department of Justice and Equality. 2019 gove.ie No Excuses)

Technically, the word “assault” also covers actions which put another person in fear of an assault.

Consent and Rape Culture

Although it is indisputable that sex without consent is rape, the concept of consent is often contested, both in courtrooms and in the discourse about sexual violence. Learning about consent is vital in combatting what is sometimes referred to as ‘rape culture’ and supporting survivors of sexual assault, by helping people

to understand that sexual activity without consent is a crime, where only the perpetrator can be blamed.

The Oxford English Dictionary defines rape culture as ‘A society or environment whose prevailing social attitudes have the effect of normalizing or trivializing sexual assault and abuse’ (Oxford English Dictionaries, 2018).

Common examples include casual references to rape or attempted rape in song lyrics, ‘jokes’ and ‘banter’ about rape, and ‘victim blaming’. Victim blaming occurs when responsibility and blame is placed on the victim instead of the perpetrator. These attitudes and myths can be seen in views such as “women provoke sexual assault by the way they dress and act” and “if the victim didn’t scream, it wasn’t rape.” This can have a negative impact on victims who want to seek help, due to fears of being judged and blamed for their experience.

Section 2:
**Consent and
the Law**



In addition to an understanding of the broad concept of consent, there are additional legal considerations which must be taken into account and about which young people, staff and volunteers need to be aware of.

Sexual Consent

Consent is where there is free and voluntary agreement to engage in a sexual act with someone else. It is a crime to engage in a sexual act with someone who has not given consent. This law is set out in the Criminal Law (*Sexual Offences*) Act, 2017

A “sexual act” is described by law as:

- Sexual intercourse (vaginal or anal)
- Penetration of the anus or mouth by the penis
- Penetration of the vagina by an object, or
- Aggravated sexual assault

It is important to know that even if you consent to a sexual act, you are absolutely free to change your mind before the act begins or at any time before it ends.

The law protects people in certain situations who are not considered able to give consent, even if they have said “Yes”. For example, a person is not able to give free and voluntary consent if they are:

- Forced, threatened with force or have a well-founded fear that force will be applied
- Asleep or unconscious
- Affected by alcohol or some other drug
- Mistaken as to the nature and purpose of the act
- Mistaken as to the identity of any other person involved in the act
- Unlawfully detained at the time at which the act takes place
- A person with a physical disability which prevents them from communicating consent
- Or if someone else consented on their behalf

There may be other situations where free and voluntary consent cannot be given but these are some of the most common. (Source: [Department of Justice & Equality. 2019. Consent](#))



The Legal Age of Consent

The law says that a person must be 17 years of age to be able to consent to engaging in a sexual act. This means that a young person under the age of 17 is not legally old enough to consent to a sexual act even if they want to. Remember, it is a crime to engage in a sexual act with someone who has not, or cannot, give consent. The age of consent is the same for all persons, regardless of gender or sexual orientation. (Source: *Sexual Health and Crisis Pregnancy Programme*.)

The law recognises that younger people may be engaging in sexual activity with each other and has introduced a 'proximity of age' defence. This is sometimes called the "Romeo and Juliet Defence". This means that if a person has been charged with an offence of engaging in a sexual act with a person between the ages of 15 and 17 years he or she can put forward a defence but only if all of these conditions apply:

- the age difference between the two parties is not more than two years
- agreement was given freely and voluntarily
- neither party felt exploited or intimidated
- neither person is a person in a position of authority

So, for example, this defence may be open to two 16 year olds, or to a 16 year old and an 18 year old, but only if all the conditions above are present. It may ultimately be up to a court of law to decide if there was actually free and voluntary consent in these circumstances.

The law in this area is complex. The consent of the Director of Public Prosecution is always required for any prosecution of a child under the age of 17 years. It is advised that where any formal charges have been brought around underage sexual activity, even where it does not appear to be abusive, legal advice should immediately be sought. (Source: [*Sexual Health and Crisis Pregnancy Programme*](#))



It is also important to remember that consent extends to sexting – sending, receiving or forwarding of images, videos & text that are sexually explicit. The depiction of children & young

people (under 18) in a sexually explicit manner in images, videos or in written text may have serious legal implications.

For more information on sexting, please see NYHP's [‘Let’s Talk about Sexting’](#) tool.

Persons in positions of authority

It is a serious offence for a person who is, or has previously been, in a position of authority over a child, to engage in a sexual act with a child or young person who is under the age of 18 (regardless of the fact that the legal age of consent is 17). Such a young person can never legally consent to engaging in a sexual act with a person who is, or who has previously been, in a position of authority over them.

A full list of persons considered to be in a position of authority is set out in the law, which includes, for example, family members, carers, teachers and sports coaches. ([Source: Sexual Health and Crisis Pregnancy Programme](#))

The Definition of a Child

The United Nations Convention on the Rights of the Child defines a child as any person under the age of 18 unless the relevant domestic law specifies an earlier age. In Ireland, in many pieces of legislation such as the Child Care Act 1991 and the Children Act 2001, a child is defined as anyone under the age of 18.

Permission to Marry

It was previously possible for a 16-year-old or 17-year old to seek permission from a court to get married. If permission was granted and they married, they were then deemed to be an adult under many pieces of legislation, even though they were under 18. Since 1 January 2019, a court can no longer grant such permission.



Medical procedures and consent

In general, children aged 16 or over may give consent to surgical, medical or dental procedures themselves, without requiring the consent of their parents or guardians. This is provided for in the Non-Fatal Offences Against the Person Act 1997. It is the practice to get parental consent to medical procedures for children under 16 even though it is not entirely clear that parents have the ultimate decision. Previously, the Supreme Court held that a health board (now the Health Service Executive) did not have the right to insist on a test being carried out on a child without parental permission. This case involved the PKU or heel pin-prick test, which is usually carried out on babies shortly after birth. The Supreme Court held that only in exceptional circumstances would the court intervene and make an order contrary to the wishes of the parents. It remains to be seen whether the Supreme Court would reach the same decision in light of the new Article 42A of the Constitution.

Contraception

There is no set minimum age in Ireland for getting contraceptive advice and prescriptions. The age of consent to sexual activity is 17 and it is a criminal offence to have sex with a person under 17. This means that providers of contraceptive services may refuse to provide those services to people under 17. (*Source: Relate. The Journal of Developments in Social Services, Policy and Legislation in Ireland. Children and the law in Ireland. Volume 47 Issues 1-2 ISSN 0790-4290*)

Abortion

Like other medical procedures, a child aged 16 or over may consent to have an abortion. However, for the consent to be valid, the doctor providing the service must be confident that the child fully understands the information she receives. A child aged 16 or 17 will normally be encouraged to involve their parents or another supportive adult. However, a child over 16 has the right not to involve an adult. In exceptional circumstances, a child aged 15 or under can choose to have an abortion and not involve her parents or another



supportive adult. She can do this only after undergoing an appropriate assessment and if the doctor believes the child is capable of consenting. Generally, all information concerning an abortion must remain confidential. However, regardless of whether an abortion is performed or not, a doctor is under a statutory obligation to report the following to Tusla, The Child and Family Agency:

- A child under 15 who is involved in sexual activity
- A child aged 15 or 16 who is involved in sexual activity with someone who is at least two years older
- A child under 17 who the doctor believes is at risk of sexual abuse or harm
- A child under 17 who the doctor believes has been sexually abused or harmed

(Source: [*Relate. The Journal of Developments in Social Services, Policy and Legislation in Ireland. Children and the law in Ireland. Volume 47 Issues 1-2 ISSN 0790-4290*](#))

Digital Age of Consent

Consent is also important for online interactions and relationships. The digital age of consent refers to the age at which a person can consent to the holding and processing of their personal data online. It is unlawful to process the data of a child who is under the age of consent without the consent of a person who holds parental authority. Under Article 8 of the General Data Protection Regulation (GDPR), each EU member state was free to fix a digital age of consent between the ages of 13 and 16. Ireland chose to set the digital age at 16 through Section 31 of the Data Protection Act 2018. (Source: [*Relate. The Journal of Developments in Social Services, Policy and Legislation in Ireland. Children and the law in Ireland. Volume 47 Issues 1-2 ISSN 0790-4290*](#))

Section 3:

Working with Young People on the Concept of Consent



Why is it Important to Work with Young People on the Concept of Consent?

All young people need to know the importance of building healthy relationships and respecting the rights of others. This is not something that can be addressed in a one off session, but rather should be something which is integrated throughout a variety of programmes and interventions and not just confined to sexuality programmes. It is also important for young people to see consent modelled in their daily lives, in their interactions with friends, family and workers in a variety of settings.

Sexual Competence

An important indicator of sexual health in adolescence is the extent to which young people develop what is referred to as sexual competence or sexual readiness.

This concept is used in sexual health promotion to draw attention to the importance of young people being supported in achieving:

- (a) absence of regret
 - (b) willing sexual encounters (i.e. not under duress)
 - (c) autonomy of sexual decision-making (i.e. based on personal preferences rather than being drunk or through peer pressure)
 - (d) reliable use of contraception.
- The concept of consent is threaded through all of these areas and a comprehensive sexuality programme should take account of them. This will enhance the understanding of the breadth of the concept of consent

and its importance in relation to many aspects of sexual activity. (Source: [*Sexual Health and Crisis Pregnancy Programme*](#))

Consent and Healthy Boundaries

The issue of consent is linked to an understanding of healthy boundaries. Facilitating people to acknowledge and respect other people's personal boundaries can help create a society where no one feels ashamed to willingly engage in, or to reject, sexual activity, at a time that is legally and personally right for them. Education about consent is also important in building healthy and respectful relationships and preventing sexual violence. Whether it's holding hands, kissing, touching, intercourse, or anything else, it's really important for everyone in the relationship to feel comfortable with what's happening and to pay attention to the issue of consent at all times.

Consent needs respect and communication in order to know and respect a person's own boundaries as well as the boundaries of others.



Understanding consent means that a person has the skills to leave a situation that doesn't feel comfortable, and respects when other people want to do the same. Therefore, a topic like consent should be explored in the context of learning about healthy relationships and should not be solely limited to consenting or not consenting to sexual activity. If young people are only taught how to say 'no' to sexual experiences, they are unlikely to understand the nuances of consent and communication when they do become sexually active, and they are unlikely to have the sexual literacy or confidence to seek experiences which are pleasurable and desirable.

All children and young people have a right to learn about bodily autonomy, their rights, and how to respect the rights of others. An understanding of general concepts such as trust, respect, safety and communication is important early in life and these concepts may be more concretely tied to an understanding of sexual consent for young people who are older. Those who have learned about

consent and boundaries will be better able to recognise abuse and to protect themselves and others from abuse and unhealthy relationships as they get older.

Accepting a 'No' and Handling Rejection

In addition to all of the competencies (knowledge, skills and attitudes) already highlighted, there is an additional competency to be taken into account in relation to consent. That is the whole notion of competency in relation to accepting a refusal or a 'No'. This may or may not involve accepting rejection. Sometimes, someone is saying 'no' to a particular activity at a particular time and they are not rejecting the person. Whatever the case, it is important to acknowledge an absence of consent and to act accordingly and appropriately. When working on the areas of assertiveness and communication, the skill of being able to ask respectfully for what you want is a good first step to be quickly followed on with the skill of accepting the answer, even if it's 'No'.



This may come with feelings of hurt, disappointment or even anger. However, everyone needs to learn to manage these feelings in a safe and appropriate manner. If asking was more normalised, then perhaps people wouldn't feel as much pressure to act without permission in the hope that it was ok, wanted, seen as masterful, etc.

Sexual Health Literacy

Health literacy is the "ability to access, understand, evaluate and communicate information as a way to promote, maintain and improve health in a variety of settings across the life-course". Literacy skills are essential to sexual health and applying learned information to make decision about health in this context means being able to communicate with sexual partners about consent. Sexual health literacy also refers to the person being fully equipped for autonomous decision- making. This is also necessary to enable people to critically reflect on sexual content accessed through pornography, where the concept of consent is largely absent.

Section 4:

Important Messages about Sexual Consent for both Young People and Adults



When it comes to sexual consent, there are some important ideas to understand and talk about:



- The law says that a person must be 17 years of age to be able to consent to engaging in a sexual act. This means that a young person under the age of 17 is not legally old enough to consent to a sexual act even if they want to. Remember, it is a crime to engage in a sexual act with someone who has not, or cannot, give consent. The age of consent is the same for all persons, regardless of gender or sexual orientation.



- Consent should be freely given. Agreeing to do something is consent only if it's voluntary. If a person feels forced or bullied, or there's something to lose by saying 'no' (e.g., safety or a relationship), it's not consent.



- 'No' always means 'no' whether given verbally or non-verbally. A lack of affirmative positive, freely given 'yes' is also a 'no'.



- A 'yes' isn't consent if someone is coerced. Examples of coercion are if the person pressures, pesters, threatens, guilt trips, blackmails, intimidates, bullies, or harasses someone.



- Both partners agree to consent and both have a clear understanding of what they're agreeing to. A consent conversation includes asking, answering and negotiating.



- Consent is a positive, voluntary, active and conscious agreement to engage in sexual activity. When someone is consenting, they agree and are confident in their decision to consent. Body language and verbal language should both give the same positive message.



- Everyone feels safe and comfortable. Safety and comfort (with themselves, their body, their partner and the situation) creates an environment where each person can freely take part in the consent conversation.



- For consent to happen, a person needs to have the chance to communicate 'no'.



- Consent is ongoing. One person asks permission for an activity and another person gives it or declines it. This conversation continues as the activity continues or changes. The person who starts the sexual contact or who wants to move to the next level of intimacy is the one who must ask for and clearly get consent before continuing with the sexual contact.



- Consent can be taken away at any time before or during sexual activity. At any point, someone can change their mind and withdraw consent. Consent given before the activity doesn't apply to any activities that happen later.



- You cannot assume consent because people are in a relationship. You cannot assume consent just because it was given for the same activity before. Permission must be asked for and given each time an activity begins, changes, or continues.



- Consent cannot be assumed or implied. Flirting, clothing, sexual texts or social media communication is not consent.



- Communication that is not clear or is confusing is not consent. If there is any uncertainty that someone is agreeing to do something, the person starting the activity must ask permission, then wait until permission is clearly given before starting anything.

- Silence, not answering, or not resisting physically is not consent.



- People who are drunk, high, sleeping or unconscious cannot give consent, either legally or practically. To have clear communication about consent, both people should be sober and alert.

(Adapted from Teaching sexual health)

Please remember, legal consent is the bare minimum necessary when involved in sexual activity. A good sexual experience requires the people involved to care about the their own and their partner's pleasure and wellbeing. It should not just be about what is technically legal or illegal but how good the experience can be for the people involved.

Please see the accompanying guide for young people 'Young People. Let's Talk about Consent' available on www.youthhealth.ie

Consent, Sexual Health Support and Help-Seeking

Work on the concept of consent always brings the possibility that someone (young person or adult) may disclose something that has happened to them that was not consensual. In some cases, this may involve misconduct, harassment, assault or rape. 'Help-seeking' or 'support-seeking' following harassment or assault can be difficult due to barriers such as the experience of shame and embarrassment, concerns about confidentiality, and the fear of not being believed. The Active* Consent research found that a significant number of students who reported experiencing rape and assault said they had not disclosed the incident to anyone prior to taking part in the research. There are also barriers in relation to

limited knowledge about how to report an issue and access specialised services. The stages involved in seeking help or support typically involve:

- **Stage 1:** Knowledge and beliefs – People's awareness and appraisal, the ability to define and recognise harassment, assault, or rape.
- **Stage 2:** Expressing the need for help – Experiences of stigma (including self-stigma), expectations for disclosure, reporting and help-seeking.
- **Stage 3:** Knowledge of sources of help and how to access help – Access to knowledge about services available.
- **Stage 4:** Willingness to access the help that is available – Self-efficacy concerning help-seeking, decision-making about pros and cons of reporting or personal help-seeking.

Source: [Safe, Respectful, Supportive and Positive Ending Sexual Violence and Harassment in Irish Higher Education Institutions.](#)

This means that work on consent needs to address these stages and workers and volunteers should be clear on how to assist young people (or indeed adults) on how to access the relevant support agencies.



Considerations for Youth Organisations when Working on Consent

Youth organisations are primarily concerned with the safety and wellbeing of the young people they work with and are committed to helping them to develop to their fullest potential. Child protection concerns and legal implications are ever present in relation to young people and consent and these must be recognised and addressed accordingly. Notwithstanding this, there is huge value in organisations adopting a sex and sexuality positive approach to working on all aspects of relationships and sexual health, including consent. This involves promoting the concept that developing the attitudes, skills and behaviours that make asking for and giving real consent to sexual activity possible will enhance people's sexual experience rather than limit it. Some of the specific considerations in this regard are as follows:

Ensure that staff and volunteers are provided with relevant training and resources to enable them to do work on consent with young people and to ensure that they are clear about and can meaningfully model consent for the young people they work with

Use opportunities that present in order to integrate/promote agreed messages about the broader concept of consent across a range of programmes and interventions which build young people's communication, assertiveness and help seeking skills as well as the skill of accepting rejection.

Health literacy and sexual health literacy should be addressed as part of a comprehensive sexuality programme and the impact of pornography should also be addressed.

Programmes, responses and interventions in relation to consent should be monitored and evaluated on an ongoing basis.



Trigger warnings

Considering the nature of discussions involving consent, there are likely to be topics that may make some young people, and indeed workers or volunteers, feel uncomfortable, such as references to rape or sexual assault. This should be made clear to people at the outset of any work in this regard. Every effort should be made to provide 'trigger warnings' to help people avoid potentially upsetting content if they wish. For example, if you know that something that you are about to discuss is potentially upsetting, give a trigger warning before talking about the subject and allow time for participants who want to leave momentarily to do so. It is also wise to avoid talking about bad personal experiences or role-playing bad experiences to prevent upsetting anyone.

Challenge perceptions and misconceptions

This includes challenging gender stereotypes and some of the traditional messages with regard to consent, e.g. Girls are not the only ones who might want to take it slow. Also, it's not a boy's job to initiate the activity (or anything else, really). It also includes critically examining and challenging some of the messages and stereotypes portrayed in music, media and especially in pornography, where consent is largely absent.



Challenge common myths with facts

There are numerous examples of myths that exist in relation to consent and sexual violence. It is important to talk about these and challenge them with factual information. The Dublin Rape Crisis Centre has produced '[Debunking rape myths. Overview resource by Dublin Rape Crisis Centre](#)' (2020), which highlights a number of common myths and provides the challenging factual information. These include the following:

MYTH: You can provoke rape by your dress and behaviour.

FACT: How you dress and what you do is never reason for assault.

MYTH: If you didn't say no, it was not rape.

FACT: It is not always possible to say 'no'.

This resource by the Dublin Rape Crisis Centre provides more detailed information on each myth and accompanying fact and you can [access here](#).

7 Personal and Social Outcomes (UBU)

The vision of UBU – Your Place Your Space ([UBU.gov.ie](#)) is one where all young people are enabled to realise their maximum potential, by respecting their rights and hearing their voices, while protecting and supporting them as they transition from childhood to adulthood. 7 Personal and Social Outcomes for young people have been identified in this regard as follows: Communication Skills. Confidence & Agency. Planning & Problem Solving. Relationships. Creativity & Imagination. Resilience & Determination. Emotional Intelligence. These outcomes align with building the capacity of young people to understand and the broad concept of consent in their daily lives, as well as the concept of sexual consent, when it arises.



Ensure inclusivity

This includes looking at consent from the perspective of all genders and orientations and not taking a heteronormative approach to this work. It also involves being culturally aware with regard to minority ethnic groups as well as taking account of work with young people with additional needs.

Signposting resources for parents

Parents have a critical role to play in relation to their child's overall sexual health and development and, of course, in relation to helping their child/young person to understand the concept of consent. Workers and volunteers have highlighted the need for parents to be able to access resources in this regard. The Sexual Health and Crisis Pregnancy Programme has developed a variety of resources to support parents in relation to all aspects of relationships and sexual health and wellbeing which are available at healthpromotion.ie

Sexual health policy

Youth organisations should develop and implement a sexual health policy in order to support this work and embed the concept of consent within a holistic approach to sexual health. NYHP provides a one-day training programme in this regard. For more information, please go to youthhealth.ie.

Links with Child Protection and other policies

Workers and volunteers need to be familiar with their reporting responsibilities under the Children First legislation and guidance. Other relevant policies include complaints policy, bullying and sexual harassment policy, referral policy, critical incident policy. Workers and volunteers should be aware of the need to engage with relevant support agencies, should the need arise.

Support Agencies

- An Garda Síochána 999/112
or visit www.garda.ie
- Túsla. The Child and Family Agency
<https://www.tusla.ie/>
- Rape Crisis Network National
24-hour Helpline on 1800 77 88 88
<http://www.drcc.ie/>
- ISPCC www.ispcc.ie/ /
Teenline- 1800833634
- Crisis Textline Ireland –
text TALK to 50808
- Jigsaw www.jigsaw.ie
- Spunout www.spunout.ie

Additional Information on Consent

- [B4U Decide](#): Training on the B4U Decide resource is available from the [National Youth Health Programme](#)
- Department of Justice and Equality (2019) [Consent](#).
- Dublin Rape Crisis Centre [Training Programmes](#) and [Resources](#)
- [The Real U Foroige](#): Training on The Real U resource is available from Foroige. Please contact training@foroige.ie
- ESHTe: Ending Sexual Harassment and Violence in Third Level Education
- National Consent Policy. Part 2. Children and Minors. Health Service Executive. Quality and Patient Safety Division (2019).

- [NUIG. Active*Consent](#)
- [Safe, Respectful, Supportive and Positive. Ending Sexual Violence and Harassment in Irish Higher Education Institutions](#)
- Sexual Health and Crisis Pregnancy Programme. [Legal age of consent](#).
- Spunout: [What is consent? Consent Quiz](#).
- Rainn. [What consent looks like](#).
- [USI 'What is Consent'](#)
- Your Body Your Rights. [A guide to Consent, Contraception and more for Young Minority Ethnic Women](#). Cairde. Health Information and Advocacy Centre.
- [100 Consent campaign page](#)
- [ThinkUKnow](#) (note: this is a UK website with a different legal/services framework)

Video clips on Consent

[Tea and Consent](#)

[Consent Explained](#)

[Consent & Communication](#)

[Consent is a Yes](#)

[Cycling Through Consent](#)

[Talk Pants with Pantosaurus](#)

[Disability & Sexuality](#)

[Healthy vs Unhealthy relationships](#)