

Tell us what you think about young people's sexual health services

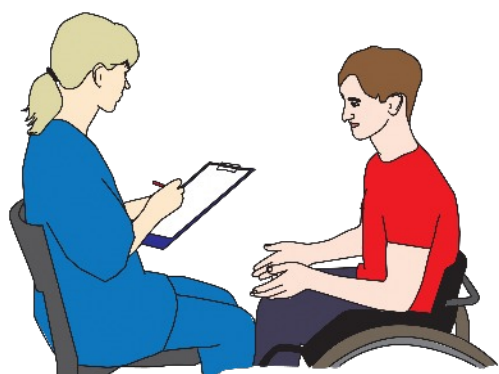


This is an EasyRead version of
Tell Us What You Think About Sexual
Health Services for Young People.

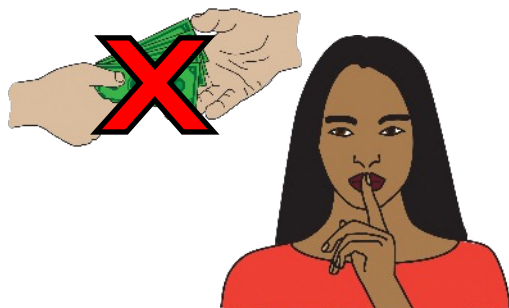
What this is about



We are Newcastle City Council.



We are looking at our sexual health services for young people.



These services are free and private.



They help you with relationships, growing up and staying healthy.



We want to know:

- what works well



- what could be better



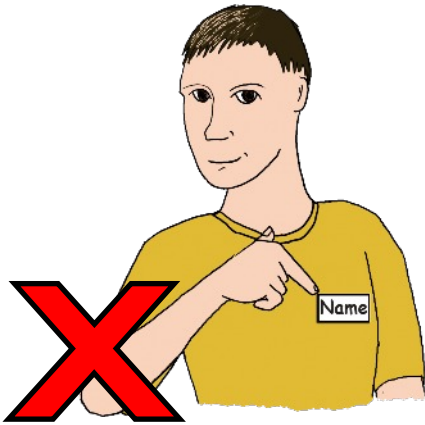
- how we can make services better.



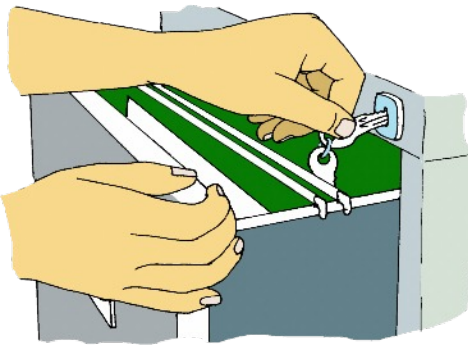
This will make sure that our sexual health services in Newcastle meet your needs.

Keeping your information safe

You do not need to tell us your name.



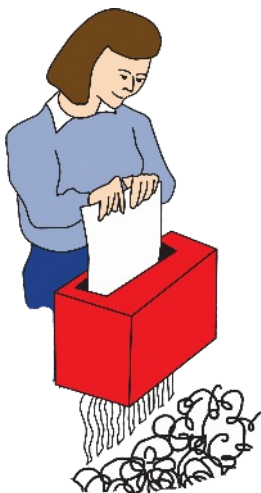
We will keep your information safe.



We will use your information to write a report. This will not show anyone's names or details.



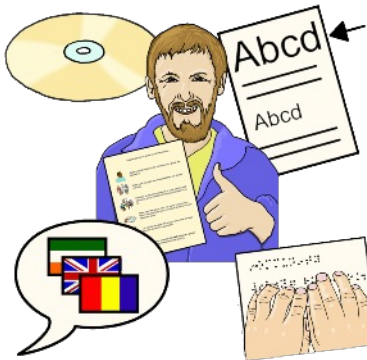
Your information will be destroyed after we have finished this work. If you change your mind about us having your information please tell us and we will destroy it.





When you have finished the survey
save a copy with your answers. Email
your saved survey to:

QHCP@newcastle.gov.uk



If you want to talk to anyone or need
this survey in a different format.



Email:

QHCP@newcastle.gov.uk



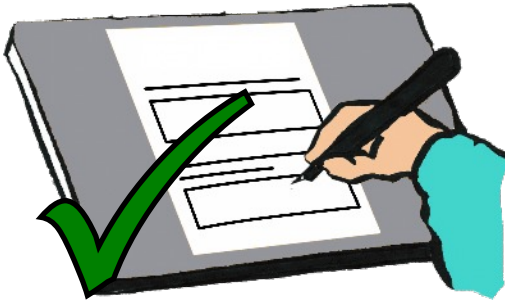
Phone:

0191 211 5055



Thank you for taking part.

Part 1



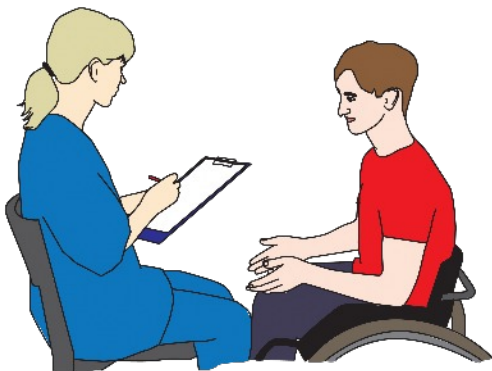
These questions make sure you go to the right section next.



1. How old are you?

11-15 years old

16-25 years old



2. Have you ever used a sexual health service?

This could be for being tested for a sexual disease, condoms, contraception or support with pregnancy.

Yes, now go to Part 3

No, now go to Part 2

Do not want to say, now go to Part 2

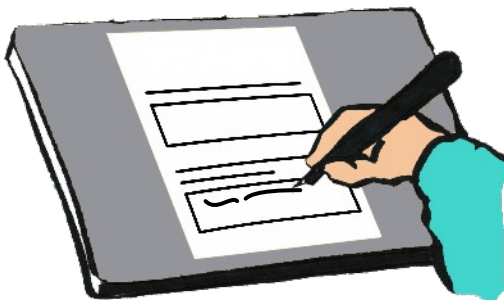
Part 2 Questions if you have not used a sexual health service



What you tell us is private.



We do not know who is giving the answers.



If you do not want to answer a question you can pick 'do not want to say' or you can miss it out.



3. Where would you go if you had any questions about sexual health?

It is ok to say 'I do not know'.

Tell us here



4. What stops you from using sexual health services?

You can tick more than one box



Where it is



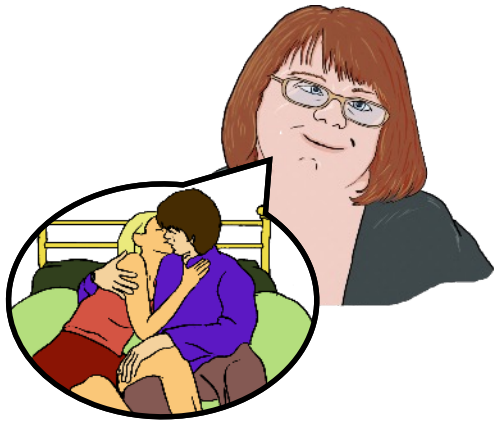
Feeling shame about using a sexual health service

Not knowing where to go



I have not needed to use one

Something else, please tell us what



5. What would make you feel more relaxed asking for support about relationships or using a sexual health service?

You can tick more than one box



Privacy

Friendly staff



Being able to book online or use services that are online

Local clinics or drop ins in my area



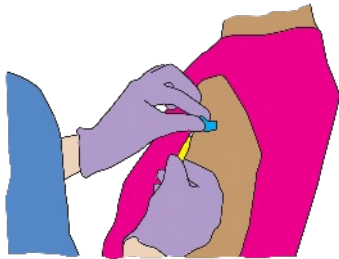
Clear and useful information

Something else, please tell us what



6. What kind of support would you want from a sexual health service?

You can tick more than one box



Testing for sexual diseases

Advice or being given contraception



Testing for pregnancy and support



Relationship support

I do not want to say

Something else, please tell us what

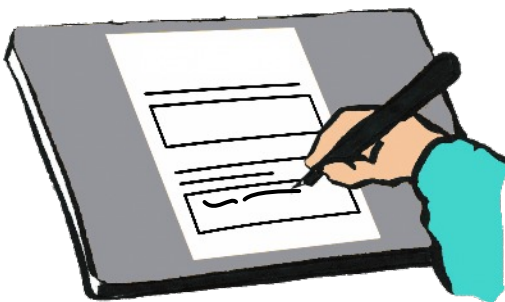
Part 3 Questions if you have used a sexual health service



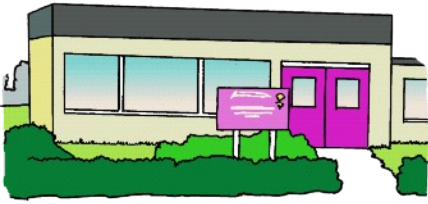
What you tell us is private.



We do not know who is giving the answers.



If you do not want to answer a question you can pick 'do not want to say' or you can miss it out.



7. What sexual health service did you use?



School nurse

Local sexual health clinic



A young person's sexual health clinic

Online sexual health service



GP

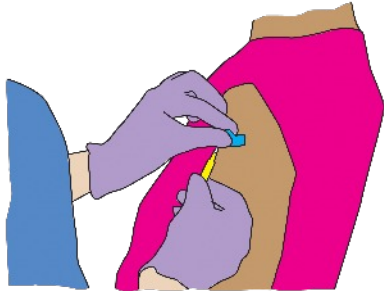
I do not want to say

Something else, please tell us what



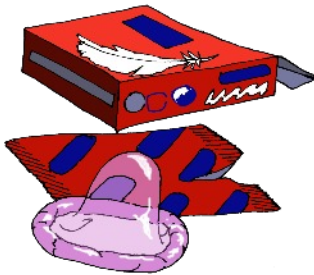
8. What did you use the service for?

You can tick more than one box



Testing for sexual disease

Advice or being given
contraception



Testing for pregnancy and
support

Relationship support

I do not want to say



Something else, please tell us what



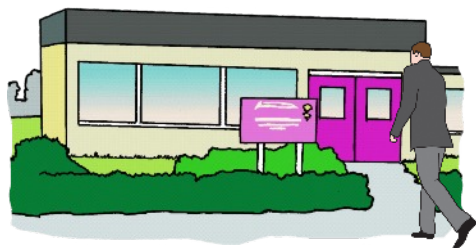
9. What did you find helpful about the service?

You can tick more than one box



Friendly staff

Where it was



Privacy

Easy to talk to someone



The information, support or service I got

The right support for me



I did not find the service helpful

Something else, please tell us what



10. What could have been better about the service?

You can tick more than one box



The way the staff treated you

Waiting time

Where it was

More privacy



The information, support or the service I got

Nothing



Something else, please tell us what



11. Did you feel safe and respected?

Yes

No

Please tell us why

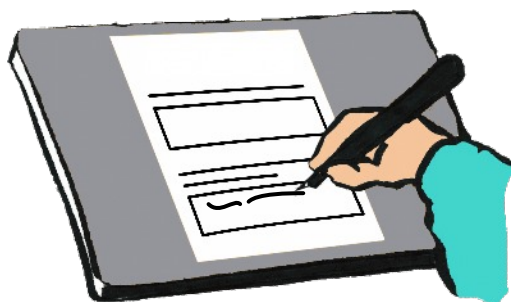
Part 4 Questions for everyone



What you tell us is private.



We do not know who is giving the answers.



If you do not want to answer a question you can pick 'do not want to say' or you can miss it out.



12. What worries you about sex or relationships?

You can tick more than one box.



Growing into an adult or body changes

Feeling I have to have sex or be in a relationship



Talking about sex, feelings or relationships

Knowing how not to go too far and to be able to say no or yes

Knowing what a good relationship is



Getting the right information or advice

Feeling not sure about my sexuality or my gender

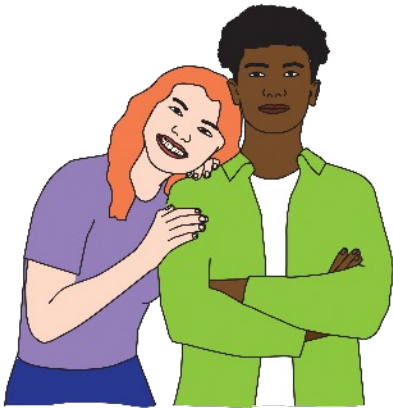
continued on the next page



Worrying about sexual diseases, pregnancy or contraception

How what has gone on in the past may affect how I feel about sex or relationships

I do not have any worries about sex or relationships



Something else, please tell us what



13. If you could make a sexual health service, what sort of things would it have?

Tell us 2 or 3 things that would be important for your sexual health service.

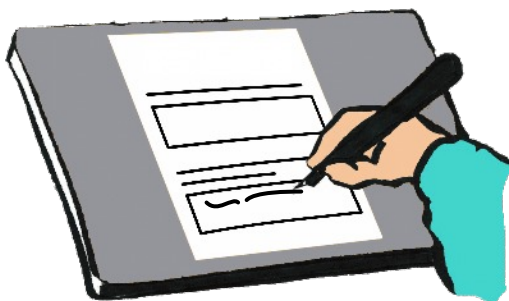
Part 5 About you



What you tell us is private.



We do not know who is giving the answers.



If you do not want to answer a question you can pick 'do not want to say' or you can miss it out.



14. How old are you?

11-13 years old

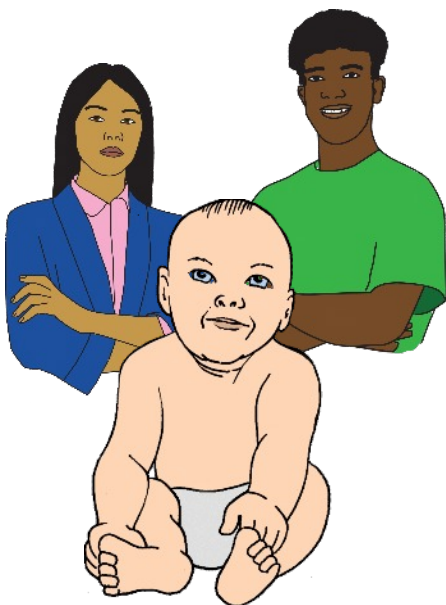
14-16 years old

17-19 years old

20-22 years old

23-25 years old

Do not want to say



15. When you were born what sex were you?

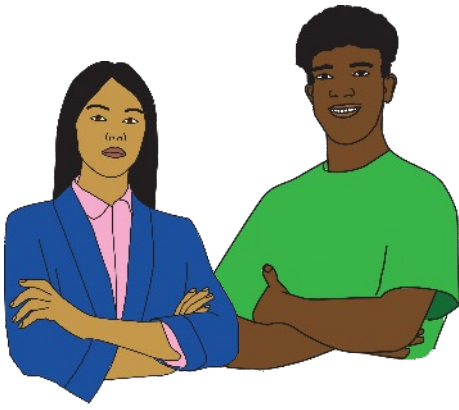
Male

Female

Intersex

Do not want to say

Other, please tell us what



16. Please tell us your gender

Male (boy or man)

Female (girl or woman)

Non-binary

Do not know how to name myself

Do not want to say

Other, please tell us what



17. What is your sexuality?

Heterosexual / straight

Lesbian

Homosexual / gay

Bisexual

continued on the next page



Pansexual

Asexual

Queer

Do not know what to call myself

Do not want to say

Something else, please tell us what



18. What ethnic group are you?

For example, you could be White British, Black Caribbean, Asian Pakistani, Chinese, Arab, Gypsy or Irish Traveller or something else.

Please tell us what



19. Are you in education, work or training?

School

College

University

Apprenticeship

Full time job

Something else, please tell us what



20. Are you in care or have you been in care?

This could be living with foster carers, in a children's home or living with someone who is not your parent.

Please tell us

Credits



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Ref ISL191 25. October 2025.

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