

## My Sexual Health Plan

1. At this point in my life, engaging in sexual activity with a partner is a good decision for me.

Yes/No/Depends on \_\_\_\_\_

Factors that might play into my decision-making (circle all that apply):

- My values, including religious values if any.
- The values of my parent(s), guardian(s), family.
- Who I can lean on for support. (If you feel like the only people you can lean on for support is your family, consider what you can trust them with in terms of your experiences).
- Whether I feel ready to deal with the potential risks and/or consequences.
- Whether I feel emotionally ready.
- Wanting to/curious about experiencing sexual pleasure with another person.
- Other: \_\_\_\_\_.

2. Consider the following circumstances in which you might feel “ready.” Circle all that apply:

- My desires and boundaries are consistently respected by my partner(s).
- My partner(s) listens to me.
- I trust my partner(s).
- My partner(s) and I communicate well.
- My partner(s) ask for my consent whenever we engage in physical and/or intimate touch.
- I feel safe and comfortable with my partner(s).
- I feel comfortable when naked with my partner(s).
- Other: \_\_\_\_\_.

3. If I were to engage in sexual activity, who would I feel comfortable with? Circle all that apply:

- Someone I don’t really know (e.g., first date, hook-up)
- Someone who’s a friend
- Someone who’s dating me and maybe other people too
- Someone who’s dating me exclusively
- Someone I’m married to
- Other: \_\_\_\_\_

4. How will I know if I'm interested in being sexual with someone?  
These are some signs that show me I am:

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5. These are activities I would like to explore:

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6. These are activities I am not interested in:

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7. Am I concerned about sexually transmitted infections (STIs) and unintended pregnancy? If so, what safer sex resources do I want to use? Where will I get them? Circle all that apply:

- Condoms (internal). Where? \_\_\_\_\_
- Condoms (external). Where? \_\_\_\_\_
- Dental dams. Where? \_\_\_\_\_
- Gloves. Where? \_\_\_\_\_
- Lubricant. Where? \_\_\_\_\_
- STI testing. Where? \_\_\_\_\_
- Pregnancy test. Where? \_\_\_\_\_
- A place to talk about unintended pregnancy. Where? \_\_\_\_\_
- Other: \_\_\_\_\_ . Where? \_\_\_\_\_

8. Questions about sexuality and sexual health that I have:

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9. Where can I get these questions accurately answered without judgement?

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10. My sexual health plan for the next year is to:

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