Healthy Sexual Development by Age

Starting at birth through age 2, children:
• Learn about love and trust through their relationships with caregivers.
• Focus on developing a sense of trust (trust vs. mistrust).
• Learn about their bodies through the sense of touch.
• May express basic distinction between males and females.
• Explore their genitals—which is as common as tugging on their ears, touching their toes, or sucking on their fingers or thumbs.
• May experience spontaneous reactions that appear sexual, but are not (e.g., erection, lubrication).
• Have no inhibitions about nudity.

You can help facilitate healthy sexual development during infancy by:
• Using correct terms for body parts (including private parts).
• Model “comfortable” touch by not forcing the child to hug or kiss anyone. Instead, ask the child if they want to hug or kiss someone, and let them know it’s OK if they don’t want to.
• Begin modeling consent by stopping a tickle session as soon as the child says “stop.”
• Talking to children about boundaries as opportunities occur (e.g., when the child is getting dressed, during diaper changes or during doctors’ appointments).

From ages 2 to 5, children:
• Develop language to describe genitalia.
• Should be able to identify and understand the various body parts of individuals that were assigned male or female at birth.
• May know or ask about the basics of human reproduction (e.g., babies grow inside mother’s belly).
• Occasionally masturbate as a soothing technique.
• Engage in consensual and playful genital exploration with children of the same age (e.g., playing house or doctor).
• May show curiosity regarding genitalia or adult bodies (e.g., going to the bathroom or bathing with parents, trying to see mommy naked, etc.)
• Have no inhibitions about nudity, and may enjoy taking diapers off or running around naked after a bath.

Toddlerhood and Preschool

You can help facilitate healthy sexual development during toddlerhood and preschool years by:
• Reinforcing the use of correct terminology to describe genitalia (e.g., saying “vagina” and “penis” instead of “hooha” or “pee pee”).
• Teaching children about boundaries, body safety and privacy.
• Explaining the difference between wanted and unwanted touch (e.g., welcome and positive vs. unwelcome and uncomfortable).
  — Model the importance of privacy (e.g., during bathing and toileting), and clarify what is appropriate and inappropriate.
  — Help children understand that touching yourself can feel good, is OK, and can be done in private.
  — Use everyday opportunities to teach children fundamentals of sexuality (if children ask questions).
Middle Childhood

From ages 5 to 8, children:
- May use “potty humor” or jokes to describe body parts and their functions.
- Have a deeper understanding of gender roles and identity (e.g., understand physical, behavioral, and emotional distinctions between males and females).
- Are more deliberate with masturbation (transitioning to pleasure seeking).
- May consensually explore genitalia with children of the same age (same sex or opposite sex).
- Become more modest and want more privacy.
- May occasionally talk about sex with peers, tell “dirty” jokes, or play games related to sex and sexuality.
- Should understand puberty and human reproduction (some children, especially girls, will show early signs of puberty).

You can facilitate healthy sexual development during middle childhood by:
- Respecting a child’s need or request for privacy.
- Teaching children that masturbation is OK, but that it is an activity that should occur in private.
- Being clear with children about how to respect people’s boundaries and privacy.
- Discussing bodily responses—especially those that are precursors to sexual response (e.g., “it feels good to touch one’s genitals”)—and what is and is not appropriate when interacting with peers.
- Teaching children about male and female puberty around age 7 or 8.
- Modeling healthy, intimate adult relationships with effective communication.

Late Childhood

From ages 9 to 10, children:
- Should know the reproductive process, or the “birds and the bees”.
- Have an increased need for privacy, and may seek more independence.
- Better understand social norms of masturbation.
- Start showing anxiety related to puberty (e.g., when it will happen, how it occurs, and how to prepare).
- May begin growing breasts (females).
- Should be aware of:
  - The life cycle and sexual development at all stages.
  - Correct terminology to describe body parts for males and females.
  - Non-stereotyped gender roles.
  - Basic facts about personal hygiene.

You can facilitate healthy sexual development during pre-adolescence by:
- Beginning to educate children on how to prepare as early signs of puberty begin.
  - Discuss the menstrual cycle with females before their first cycle, and teach them about feminine hygiene products.
  - Educate both males and females about developing oilier skin, increased sweating, hair growth, changes to genitals, etc.
- Teaching children about the social and emotional aspects of puberty, and help them process any new emotions and needs they may have.
- Continuing to provide age-appropriate education to children about sexuality, sexual behaviors, and healthy relationships.
From ages 11 to 13, children:
- Experience rapid physical, emotional and behavioral changes.
- May become self-conscious, embarrassed or awkward due to the rapid changes taking place.
- May experience changes in their voice and maturing of the penis and testicles (males).
- May begin their menstrual cycles (females).
- Begin growing pubic hair (both males and females).
- Are influenced greatly by peers (e.g., growing interest in fitting in, dressing or talking the same as friends).
- Develop romantic feelings and may express interest in dating.
- Require privacy and value it highly.
- May develop oilier skin, increased sweating, hair growth, changes to genitals, etc.

You can facilitate healthy sexual development throughout early adolescence by:
- Talking with children about sexual development, and assuring them that the changes and feelings they are experiencing are normal.
- Encouraging and practicing open communication while respecting their need for privacy.
- Beginning to educate children about rights and responsibilities in their friendships and relationships.
- Building on their current knowledge about personal hygiene and helping them weigh their options when it comes to maintaining bodily changes.
- Educating them about consent (e.g., what it means, why it matters, etc.).
- Asking children what they think about safe sex, see where they stand on this subject, and then build on their responses.
- Providing accurate and developmentally appropriate information about what safe sex is. If they are uncomfortable or chose to not discuss the topic, have reliable resources readily available for them to review on their own.

From ages 14 to 17, children:
- Value independence and are less dependent on caregivers.
- May complete puberty, as well as the physical transition from childhood to adulthood.
- Have increased sexual feelings and fantasies, including the desire for physical closeness with a partner.
- Have the capacity to progress into intimate, mature and long-lasting relationships.
- Continue to experience peer pressure to engage in sexual activities or intercourse, whether they feel ready to or not.
- Have a clear understanding of safe sex, pregnancy and sexually transmitted infections.
- May choose to express sexuality in various ways (individually or through shared sexual activities).

You can facilitate healthy sexual development throughout middle adolescence by:
- Teaching teens that we all have numerous options when it comes to experiencing intimacy and expressing love.
- Discussing factors that influence decisions regarding sexual intercourse (e.g., age, mutual consent, protection, contraceptives, etc.).
- Reminding teens they are able to make decisions as they grow older, and be sure to provide resources and information to help them develop their critical thinking skills.
- Being a trusted resource and reminding teens that you are available to answer any questions they may have. If you do not have the answer to a question (which is OK!), be honest and either let them know you’ll get back with them, or find the answer together.