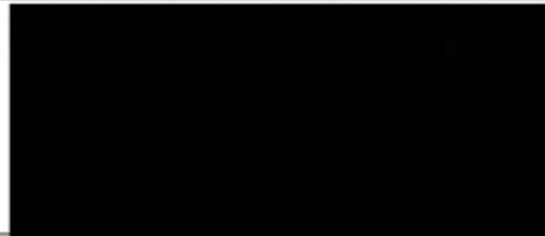


**IN THE MATTER OF THE ROYAL COMMISSION
INTO FAMILY VIOLENCE**

ATTACHMENT GC-12 TO STATEMENT OF GILLIAN ANNE CALLISTER

Date of document: 4 August 2015
Filed on behalf of: The State of Victoria
Prepared by:
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This is the attachment marked 'GC-12' produced and shown to **GILLIAN ANNE CALLISTER** at the time of signing her Statement on 4 August 2015.

Before me:



**An Australian legal practitioner
within the meaning of the
Legal Profession Uniform Law (Victoria)**

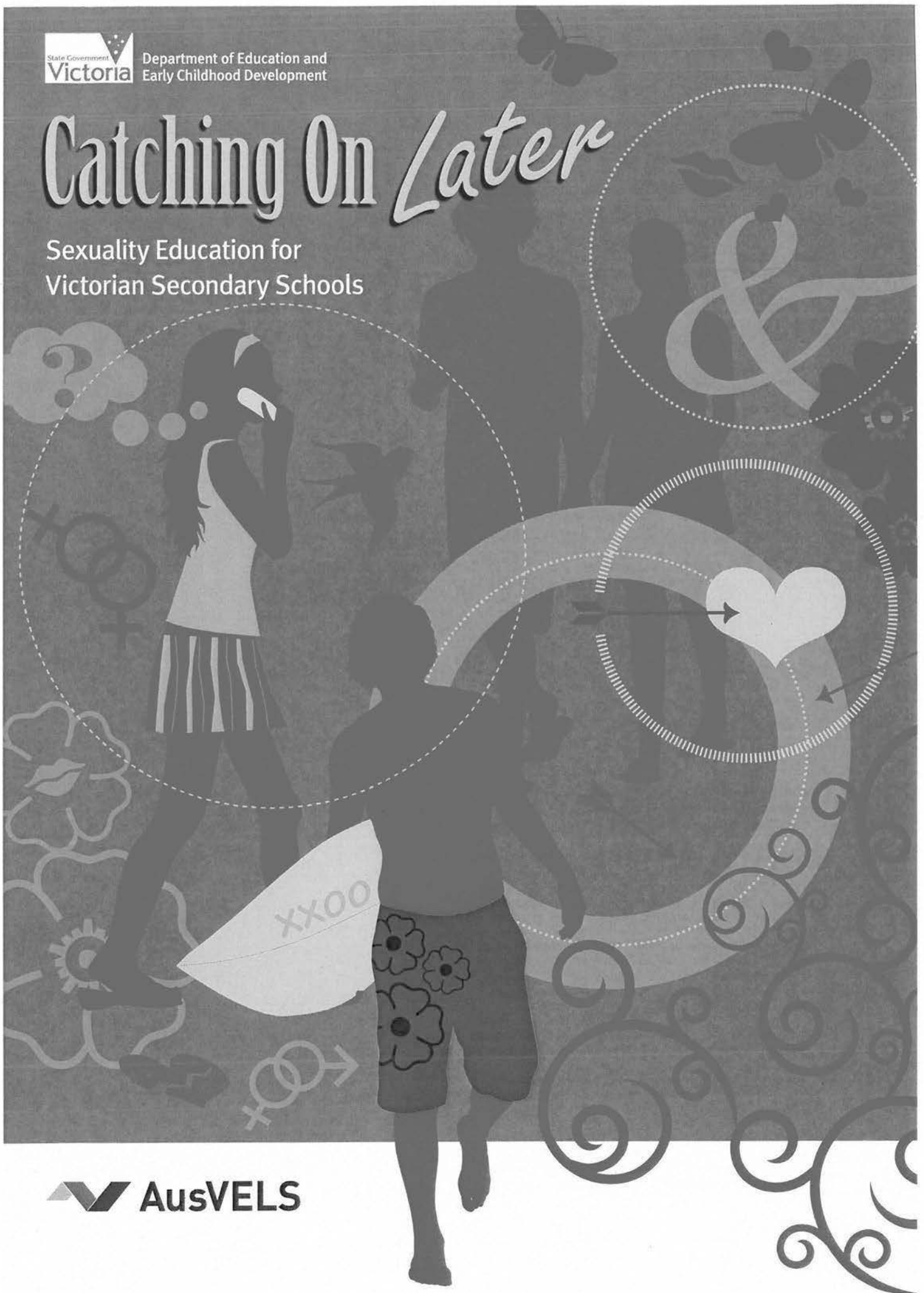
Attachment GC-12



Department of Education and
Early Childhood Development

Catching On *Later*

Sexuality Education for
Victorian Secondary Schools



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Introducing *Catching On Later*





Introduction

Through the use of the sexuality education activities found in this curriculum resource, Victorian secondary schools can feel confident their students are being provided with essential learning about sexual health and respectful relationships through the schools' core health education curriculum. *Catching On Later* is backed by the very latest research into sexuality education, and is strongly supported by the Australian Curriculum in Victoria (AusVELS) and Department of Education and Early Childhood Development (DEECD) sexuality education policy.

Catching On Later will help young people understand the life stage they are in – their sexual development, their desire to link up with peers and the emotional impact of the many changes that are taking place in their lives. These are changes in their bodies, their relationships, the amount of freedom they have and the level of demands and expectations placed on them. For all of these reasons they need new knowledge and skills in the sexual health area and an opportunity to use their new cognitive abilities to make sense of their world and develop a personal ethic to guide their decisions. They need to develop a capacity to understand the conflicting messages they receive about bodies, sexuality, and popularity, and a chance to learn where help and support is available before it is needed. Both schools and home have vital and complementary roles to play in the rapidly shifting scenario of adolescent development.

What makes school-based sexuality education programs important and different to the lessons children learn from home is that the lessons and discussions are carried out among peers. Beliefs about what everyone else is doing are a crucial part of a child's decisions about how they will behave. A young person's peer group is a force that can influence them strongly. It can challenge unhelpful and damaging beliefs and behaviours, and provide more positive ways of addressing the questions of adolescents. How to be liked, how to be cool, how to fit in and avoid embarrassment, are early issues. As adolescence progresses, questions around the social and moral aspects of sexual behaviour, contraceptive use, managing abstinence or avoiding unwanted sex, become more important.

This resource is designed to assist teachers to explore these issues in the classroom. There are lessons which are specifically designed to increase the basic knowledge that is central to managing sexual health, but more commonly these lessons facilitate the exploration of the social world of young people and help them with the many decisions they face in that world. Teachers with restricted time need to select a balance of these elements to make up a well-rounded program.

With the publication of *Catching On Later*, every compulsory school year level in Victoria is now supported in the provision of comprehensive, developmentally appropriate, essential learning about sexual health, sexual identity and relationships. *Catching On Later* is a natural progression from *Catching On Early*. Teachers who have students in their classes where *Catching On Early* has been used as the primary school resource will notice that students are familiar with some of the content and pedagogy of particular activities. However, it is the intention of *Catching On Later* that *all students* feel comfortable with the pedagogy; therefore, content and activities have been carefully provided for those students who are well-prepared *as well as* for those who have not had comprehensive sexuality education in their primary school years.

Underpinning documents

Catching On Later is based on elements of documents and research considered to be of great importance to sound education in general and sexuality education in particular. These include:

- Australian Curriculum in Victoria (AusVELS), DEECD <<http://ausvels.vcaa.vic.edu.au/>>
- *International Technical Guidance on Sexuality Education*, UNESCO, 2009 <<http://www.unesco.org/new/en/hiv-and-aids/our-priorities-in-hiv/sexuality-education/>>

AusVELS

AusVELS is the Foundation to Year 10 Curriculum for all Victorian government and Catholic schools, outlining what is essential for all Victorian students to learn during their time at school from Foundation (F) to Year 10. Implementation of the AusVELS framework is from 2013. Australian curriculum Health and Physical Education will be implemented later, subject to Victorian education ministerial approval.

Each of the AusVELS domains is structured by eleven levels associated broadly with the years of schooling, from Foundation (Prep) to Year 10. The levels represent typical progress of students at key points within the stages of learning. It is recognised that students progress at individual rates and may demonstrate achievement at a particular level earlier or later than is typical. The box below compares the current (2012) VELS levels with the AusVELS levels. *Catching On Later* is for students from AusVELS levels 7–10.

Nominal school year level	VELS level	AusVELS level
Prep/Foundation	1	Foundation
1	2	1
2		2
3	3	3
4		4
5	4	5
6		6
7	5	7
8		8
9	6	9
10		10

For more information refer to the Australian Curriculum in Victoria website: <<http://ausvels.vcaa.vic.edu.au/>>.

For information related to Shape of the Australian Curriculum: Health and Physical Education, see 'Health and Physical Education', Australian Curriculum, Assessment and Reporting Authority (ACARA): <<http://www.acara.edu.au/hpe.html>>.

Links with AusVELS Levels 7 & 8

Matrix of classroom activities and AusVELS

Sexuality Education Activities

7	LEARNING SEQUENCE	1		2		3		4		5			6		
		1	2	3	4	5	1	2	1	2	3	4	1	2	
HEALTH AND PHYSICAL EDUCATION – health knowledge and promotion															
Key concepts found within the learning focus															
→	physical, social and emotional changes during adolescence							●		●	●	●	●		●
→	the influence of family on personal identity and values											●			
→	community attitudes and laws influencing the sense of right and wrong							●		●	●	●		●	
→	sexual health of young people (e.g. safe sex, contraception, abstinence, prevention of STIs)														
→	access reliable information about health issues				●		●			●				●	
→	barriers and enablers to accessing health services														
INTERPERSONAL DEVELOPMENT – building social relationships															
Key concepts found within the learning focus															
→	respect for the individuality of others and acknowledgement of diversity of individuals											●	●		
→	differing values and beliefs held in local, national and global contexts and the impact these have on relationships														
→	the influences of peers on behaviour											●	●		
→	various forms of bullying and the consequences for the bully and the victim														
→	strategies to build and maintain positive social relationships	●	●	●	●		●		●		●	●	●		

Matrix of classroom activities and AusVELS

Teacher's choice Sexuality Education Activities

7	LEARNING SEQUENCE	1		2	
		1	2	1	2
HEALTH AND PHYSICAL EDUCATION – <i>health knowledge and promotion</i>					
Key concepts found within the learning focus					
→ physical, social and emotional changes during adolescence		●			
→ the influence of family on personal identity and values			●		
→ community attitudes and laws influencing the sense of right and wrong					
→ sexual health of young people (e.g. safe sex, contraception, abstinence, prevention of STIs)					
→ access reliable information about health issues					
→ barriers and enablers to accessing health services					
INTERPERSONAL DEVELOPMENT – <i>building social relationships</i>					
Key concepts found within the learning focus					
→ respect for the individuality of others and acknowledgement of diversity of individuals					
→ differing values and beliefs held in local, national and global contexts and the impact these have on relationships					
→ the influences of peers on behaviour					
→ various forms of bullying and the consequences for the bully and the victim					
→ strategies to build and maintain positive social relationships					
→ AusVELS LEVELS 7 & 8 • sexuality and sexual health				●	●
→ AusVELS LEVELS 9 & 10 • sexuality and sexual health				●	●

Sexuality Education Activities

8	LEARNING SEQUENCE	1			2		3			4		5			6
		1	2	3	1	1	2	3	1	2	1	2	3	4	1
HEALTH AND PHYSICAL EDUCATION – health knowledge and promotion															
Key concepts found within the learning focus															
→ physical, social and emotional changes during adolescence					●	●		●	●				●		
→ the influence of family on personal identity and values		●				●						●	●		
→ community attitudes and laws influencing the sense of right and wrong				●				●			●	●	●	●	●
→ sexual health of young people (e.g. safe sex, contraception, abstinence, prevention of STIs)												●	●	●	
→ access reliable information about health issues				●	●								●	●	●
→ barriers and enablers to accessing health services															
INTERPERSONAL DEVELOPMENT – building social relationships															
Key concepts found within the learning focus															
→ respect for the individuality of others and acknowledgement of diversity of individuals			●			●			●	●	●				
→ differing values and beliefs held in local, national and global contexts and the impact these have on relationships		●				●	●	●	●		●	●			
→ the influences of peers on behaviour							●	●		●	●	●	●	●	
→ various forms of bullying and the consequences for the bully and the victim							●	●							
→ strategies to build and maintain positive social relationships			●				●		●	●					

Links with AusVELS Levels 9 & 10

Matrix of classroom activities and AusVELS

Sexuality Education Activities

9 & 10	LEARNING SEQUENCE	1							
		1	2	3	4	5	6	7	8
HEALTH AND PHYSICAL EDUCATION – health knowledge and promotion									
Key concepts found within the learning focus									
→ factors influencing the development of identity		●	●		●	●		●	●
→ variations in relationships over time					●				
→ sexuality and sexual health			●					●	
→ assumptions, community attitudes and stereotypes about young people and sexuality		●	●	●	●	●	●	●	●
→ support strategies for young people experiencing difficulties in relationships or with their sexuality				●				●	●
→ policies/practices related to sexual harassment, homophobia and discrimination		●	●		●			●	
INTERPERSONAL DEVELOPMENT – building social relationships									
Key concepts found within the learning focus									
→ complex social conventions when interacting with others			●			●		●	
→ local and global values and beliefs, and the impact on their own and others' social relationships		●	●	●		●	●	●	
→ barriers to achieving positive relationships								●	
→ strategies that could be used to overcome barriers to effective relationships				●				●	
→ skills and strategies to prevent and resolve conflict				●	●			●	

Matrix of classroom activities and AusVELS

Sexuality Education Activities

9 & 10	LEARNING SEQUENCE	2						3	
		1	2	3	4	5	6	1	2
HEALTH AND PHYSICAL EDUCATION – <i>health knowledge and promotion</i>									
Key concepts found within the learning focus									
→	roles and responsibilities in sexual relationships	●	●		●	●	●	●	
→	factors influencing the development of identity								●
→	variations in relationships over time								
→	sexuality and sexual health				●	●			
→	assumptions, community attitudes and stereotypes about young people and sexuality							●	●
→	support strategies for young people experiencing difficulties in relationships or with their sexuality			●	●		●		●
→	policies/practices related to sexual harassment, homophobia and discrimination								●
INTERPERSONAL DEVELOPMENT – <i>building social relationships</i>									
Key concepts found within the learning focus									
→	complex social conventions when interacting with others			●	●			●	●
→	local and global values and beliefs, and the impact on their own and others' social relationships							●	●
→	barriers to achieving positive relationships	●	●						●
→	strategies that could be used to overcome barriers to effective relationships	●	●	●	●		●		●
→	skills and strategies to prevent and resolve conflict				●		●		

Sexuality Education Activities

9 & 10 LEARNING SEQUENCE ACTIVITY NUMBER	4													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14
HEALTH AND PHYSICAL EDUCATION – health knowledge and promotion														
Key concepts found within the learning focus														
→ roles and responsibilities in sexual relationships				●			●		●	●	●			
→ factors influencing the development of identity												●		
→ variations in relationships over time								●				●		
→ sexuality and sexual health	●		●	●		●	●		●	●	●	●	●	
→ assumptions, community attitudes and stereotypes about young people and sexuality						●				●	●	●		●
→ support strategies for young people experiencing difficulties in relationships or with their sexuality					●	●		●			●			
→ policies/practices related to sexual harassment, homophobia and discrimination												●		
→ Medicare				●										
INTERPERSONAL DEVELOPMENT – building social relationships														
Key concepts found within the learning focus														
→ complex social conventions when interacting with others									●		●			
→ local and global values and beliefs, and the impact on their own and others' social relationships											●			
→ barriers to achieving positive relationships								●		●	●			
→ strategies that could be used to overcome barriers to effective relationships									●	●	●			
→ strategies for managing peer influence on relationships												●	●	
→ skills and strategies to prevent and resolve conflict											●	●		

Links with the UNESCO *International Technical Guidance on Sexuality Education*

The UNESCO *International Technical Guidance on Sexuality Education* (2009) explains what sexuality education is and why it is important. The guidelines are organised around six key concepts:

- relationships
- values, attitudes and skills
- culture, society and human rights
- human development
- sexual behaviour
- sexual and reproductive health.

There are 23 topics associated with these key concepts (see table below). Each of the topics is linked to learning objectives for four distinct age groups: 5–8 years, 9–12 years, 12–15 years, and 15–18+ years.

Catching On Later will focus on the age group 12–15 years. UNESCO's six key concepts, associated topics and learning objectives specified for this age group have been considered in the planning and development of curriculum materials for this resource.

It is suggested that teachers become familiar with the *International Technical Guidance on Sexuality Education* resource. The PDF can be found at:

<<http://unesdoc.unesco.org/images/0018/001832/183281e.pdf>>.

Six key concepts and related topics (UNESCO, 2009)

<p>Relationships 1</p> <ul style="list-style-type: none"> > families > friendship and romantic relationships > tolerance and respect > long-term commitment, marriage and parenting 	<p>Values, attitudes and skills 2</p> <ul style="list-style-type: none"> > values, attitudes and sources of sexual learning > norms and peer influence on sexual behaviour > decision-making > communication, refusal and negotiation skills > finding help and support 	<p>Culture, society and human rights 3</p> <ul style="list-style-type: none"> > sexuality, culture and human rights > sexuality and the media > the social construction of gender > gender-based violence including sexual abuse, exploitation and harmful practices
<p>Human development 4</p> <ul style="list-style-type: none"> > sexual and reproductive development > reproduction > puberty > body image > privacy and bodily integrity 	<p>Sexual behaviour 5</p> <ul style="list-style-type: none"> > sex, sexuality and the sexual life cycle > sexual behaviour and sexual response 	<p>Sexual and reproductive health 6</p> <ul style="list-style-type: none"> > pregnancy prevention > understanding, recognising and reducing the risk of STIs, including HIV > HIV and AIDS stigma, care, treatment and support

For further information, see the tables of learning objectives in Volume II of the *International Technical Guidance on Sexuality Education*, UNESCO, 2009, pp. 74–99.

Support for schools

DEECD provides a comprehensive sexuality education website to support schools in the delivery of sexuality education. A range of learning and teaching resources for Victorian primary and secondary schools as well as specific webpages for principals, parents, external providers and teachers are available on the DEECD website. All materials support a comprehensive, whole-school learning approach to sexuality education. The website can be accessed at: <http://www.education.vic.gov.au/school/teachers/teachingresources/social/physed/Pages/sexualityed.aspx>

DEECD's *School Policy and Advisory Guide* (2011) includes a focus on sexuality education within the 'Health Education Approaches' section. It explains that comprehensive, inclusive sexuality education is a compulsory part of a government school's health education curriculum, to be taught and assessed by teachers. The full section can be accessed at: <http://www.education.vic.gov.au/school/principals/spag/curriculum/Pages/health.aspx>.

DEECD also provides the *Supporting Sexual Diversity in Schools policy* (2008). The policy emphasises inclusive learning and teaching. Learning in the AusVELS Health and Physical Education domain provides specific references to same-sex attraction, homophobia and discrimination. The Interpersonal Development domain addresses building positive relationships and bullying issues. Schools must support, respect and be inclusive of sexuality diversity including same-sex attraction. The full policy can be accessed at: <http://www.education.vic.gov.au/school/teachers/teachingresources/social/physed/Pages/forprincipals.aspx#6>.

User notes

Selecting activities for your class

Catching On Later encompasses AusVELS levels 7–10 and the age range 11–16 years. It is important that sexuality education is age-appropriate, and this is indicated in this resource through the year-level divisions. Please note that AusVELS Levels 9 and 10 are a revised version of *Catching On for Years 9 and 10* (DEECD 2004).

It is acknowledged that these levels will not neatly reflect the maturity or understanding of all students so teachers are invited to make a selection of activities across the levels to best respond to the needs of their particular class. However, we recommend that the activities are taught sequentially as much as possible.

Managing sensitivity issues in the classroom

Student disclosures and confidentiality

When teaching health education, classroom teachers often face confidentiality issues. In order to safeguard students, all members of staff who teach health education should engage in relevant professional training that includes techniques such as protective interrupting. Protective interrupting is where a teacher interrupts a student as they begin to disclose personal information. The teacher might suggest the student rephrase the statement in the third person, or suggest the issue be discussed privately after class.

Teachers should try to anticipate potential issues or problems and take steps to avoid students making personal disclosures. This would include teachers ensuring that ground rules are set before discussions take place, as well as encouraging students to always relate information in the third person.

Students and parents/guardians have a right to privacy and confidentiality. Teachers need to be sensitive to a range of family structures and not presume that all students come from a nuclear family. Teachers should never ask students to disclose information about their own or their families':

- sexual activity
- sexual preference
- blood-borne virus status
- drug use (licit or illicit).

Under duty-of-care requirements, teachers are not able to promise absolute confidentiality to students. Where a teacher forms a belief on reasonable grounds that a child is in need of protection from physical injury resulting from abuse, neglect or sexual abuse, there is a legal obligation under the *Children, Youth and Families Act 2005* to make an official report.

It is important for teachers of health education to be familiar with the appropriate procedures and policies relating to the safety and wellbeing of students. For further information, read the sections 'Student Safety - overview' and 'Supervision of Access (Duty of Care)' in the *School Policy and Advisory Guide*, 2011, DEECD: <<http://www.education.vic.gov.au/management/governance/spag/default.htm>>.

Student collection of sensitive information or data

In the survey activities in this resource, students may be asked to collect data about their out-of-school life; for example, to list all the drugs kept in their home or to ask personal questions of other people. Such surveys can place undue pressure on students and therefore the design of these activities must be carefully monitored and evaluated. The principal must approve any personal survey. Teachers should be conscious of issues relating to disclosure of personal information (see the 'Information privacy' section of the *School Policy and Advisory Guide*, 2011, DEECD: <<http://www.education.vic.gov.au/management/governance/spag/default.htm>>)

Teacher comment on controversial issues

In the context of health education, teachers will need to address controversial topics relating to politics, religion and moral values. A number of these topics will be appropriate and important to discuss in the context of a comprehensive health curriculum. Such topics include:

- sexual activity, including age of consent, contraception, pregnancy, abortion and sexually transmissible infections (STIs)
- sexual identity and sexual orientation
- drug use, including alcohol and tobacco
- relationships, including family relationships
- power, violence, rape and sexual abuse
- mental health, including depression
- reproductive technology, such as IVF
- divergent beliefs and views.

Teachers have a responsibility to ensure that students are provided with opportunities to consider such issues systematically and objectively, and to become aware of the diversity of views held.

Teachers must not promote their own personal preferences in these matters. They should refrain from deliberate acts or words that attempt to impose upon students, or to use students for the propagation of, their own beliefs, opinions and practices. Schools must be able to assure the community that these requirements are met.

AusVELS Level

7

Sexuality education activities



User notes specific to AusVELS Level 7

The questions and concerns of young people as they enter secondary school can vary considerably. Some may have been exposed to a comprehensive and ongoing sexuality education program in their primary school while others may have attended a one-off class. There may be students who have had no prior opportunity to learn about and discuss sexual health. As well, there will be significant variation in the level of parental communication regarding sexual health, ranging from extensive to none at all.

For these reasons, the first section of this resource, AusVELS Level 7, also includes optional learning sequences under the title 'Teacher's choice'. 'Establishing common ground' can be used to increase knowledge or for revision, as determined by the students' level of understanding in these areas. 'Another aspect of sexuality and associated responsibilities' covers sexually transmissible infections (STIs) and contraception. Depending on the maturity and prior knowledge of your students, this learning may or may not be suitable for this age group at this time.

The core learning sequences at this level (the first set from 1 to 6) focus on relationships and the concept of sexuality, and what these mean for the adolescent. They include skill-building activities to enable healthy decision-making.

Relationship-building activities

If you and your students have a positive working relationship, you may not find it necessary to use the activities focused on getting to know each other. Relationship-building activities are at the start of the first three learning sequences.



Finding a common ground

When you begin your unit of sexuality education, it's likely you will have a choice of starting points depending on what, if any, sexuality education has been taught prior to the commencement of your unit.

The way you introduce an activity can influence how well it is received. For example, if some of the students have done a similar activity to the one you are about to do, but most of the class has not, it's often good to introduce it by saying something like: 'I know some of you may be familiar with this activity so it will be revision, and I'll be interested to see how much you can remember.' Another method is to let those who are familiar with the material explain the key messages as they recall them. You can then build on this knowledge.

LEARNING SEQUENCE

1

Building classroom culture

- 1 Let's get started
- 2 Ground rules – what's the point?
- 3 Designing our own classroom rules
- 4 Communication and body language
- 5 Question Box

AusVELS LEVEL 7

INTERPERSONAL DEVELOPMENT – *building social relationships*
› strategies to build and maintain positive social relationships.

1 Let's get started



LEARNING INTENTIONS

- To provide an opportunity for the students and teacher to get to know each other.
- To establish a norm for participating in an interactive classroom.

Preparation and materials

- stopwatch or clock

Introduction

Sexuality education requires a high degree of trust. Students should be able to trust that the information you provide is current and accurate. They should also be able to trust that they can participate in open and sometimes sensitive discussions without fear of ridicule.

Positive relationships can lead to a high degree of trust but they don't just happen. Building relationships between the students, and between the students and the teacher, is worth spending time on.

Activities that allow students to mix with their classmates and share information can help develop positive relationships. It's good to start with easy, non-threatening activities. 'Let's get started' is a simple activity that requires very little equipment or preparation. It offers you an opportunity to:

- *Get to know the students.* If the students don't know one another or you don't know them, this is an opportunity to get a tiny glimpse of what they're like.
- *Set the stage.* It's good for students to understand, right from the start, that they will need to mix and interact with one another in this class. This activity is a simple and safe step in promoting that notion.

Instructions

- 1 When all your students have arrived for class, ask them to line up alphabetically, according to their last names, along the back and sides of the classroom. A first initial may be used where there are identical surnames. Time how long it takes to complete the task.
- 2 To check the task has been done correctly (and to help you learn the names of your students), ask them to say their last names aloud in the order in which they are standing.
- 3 If they know each other well, ask them to say the name of the person next to them.
- 4 Now repeat the initial task but have the students order themselves according to first names.
- 5 Repeat the task using birthdates.
- 6 Finally, repeat the task according to students' proximity to school, choosing a unit of measure that is appropriate for your class (e.g. number of blocks, kilometres, number of train or tram stops, or the time taken to get to school).

- 7 By the end of these tasks (you do not need to use all of them), you and the students should be better acquainted and the students will be getting used to contributing information during activities. If you like, you can now ask them to do one of the tasks again to see if they can improve on their time.
- 8 When you have finished the activity, ask them to take their seats in the order in which they are standing. If you think they might feel unhappy or threatened by this, let them know that in the next lesson they can sit where they like. This is one way of getting them to mix without you asking them directly to move away from their friends.

Teacher advice

If the students know each other they can do these tasks without speaking. If they do not know one another, you may need to allow them to talk or use sign language. Timing the tasks helps to move the activity along and gives them a bit more spark.

? Discussion questions

- Did you know all the names of the students in our class?
- Are you sitting next to the person you would normally sit with in your classes?
Have you ever had a lengthy conversation with this person?
- Why do we often move to the same group or persons when we're at school?
- How does this prevent us from developing new ideas or questioning old ideas?
(If we only exchange opinions with our friends, who tend to have similar perspectives, we may never see things from a different point of view.)

Wrap up

In order to develop as a person, it's important to explore new ideas and to connect these ideas to our own experiences. Some of the activities in sexuality education will require us to investigate, develop and test new ideas. It is important that we are able to clearly explain our ideas and opinions to others, and support them with facts if necessary.

2 Ground rules – what’s the point?



LEARNING INTENTIONS

- To provide students with an opportunity to build positive relationships.
- To develop shared expectations for learning and interacting within the classroom.

Preparation and materials

- ✓ A3 copies of the game board, one per group
- ✓ 5¢ or 10¢ coins or other flat game markers, one coin per group

Introduction

In order to create a safe environment for teaching sexuality education, participants need to develop an understanding of the importance of agreed expectations and rules regarding conduct within the classroom. Before asking students to contribute their ideas regarding acceptable ways to interact, it’s good to demonstrate why it’s important to have these rules and guidelines.

In part A of this activity, students get to explore the reasons behind establishing a set of agreed, acceptable behaviours. In part B, they are required to develop their own set of rules. Depending on the time available, you might like to complete the extension activity before wrapping up.

A Instructions

- 1 Ask students to think about some schoolyard, backyard or beach games they have played with their classmates, family or friends. (Some examples may be board games, card games, down-ball, basketball, keepings-off, beach cricket, and taking turns on the trampoline).
- 2 Ask for two or three volunteers to briefly describe the rules of one of these games to the class.

Discussion questions

- Did everyone in the class have the same rules for the same game?
- How many of you played beach cricket? What was your rule for hitting the ball into the water? Why was that a rule?
- Did anyone play games where the youngest player was given special considerations? Have you ever played a board game where the youngest member gets the first turn? What’s the purpose of this?

B Instructions

- 3 Divide the class into groups of four and hand out a game board and coin to each group.
- 4 Explain to the students that the object of the game is to be the first to score 21 points by sliding the coin from the starting circle at the bottom of the game board towards the marked court at the top of the page. Do not provide any further guidance or rules.
- 5 Let the students play the game for about five minutes.

? Discussion questions

- Ask students to put up their hands if they scored 21 points.
- Who had the first turn and how was this decided? Was this a fair way to decide this?
- Did everyone get a turn in the time allowed? If any of the groups had participants who did not get a turn, ask them how it felt to be waiting.
- When was each turn over? How was this decided?
- What happened if the coin landed on the line?
- What happened if the coin went off the board?
- Are there ways of making this game better?

Wrap up

A game is not that different from a classroom. For everyone to learn and enjoy the sexuality education classes, we need to understand the point of having agreed rules of conduct, and then we need to set our own standards of behaviour for interacting within our class. We need to consider the following points when we are designing our classroom rules:

- Does everyone feel safe?
- Does everyone get a chance to contribute to the lesson?
- Do we value everyone's contribution?

EXTENSION ACTIVITY >>

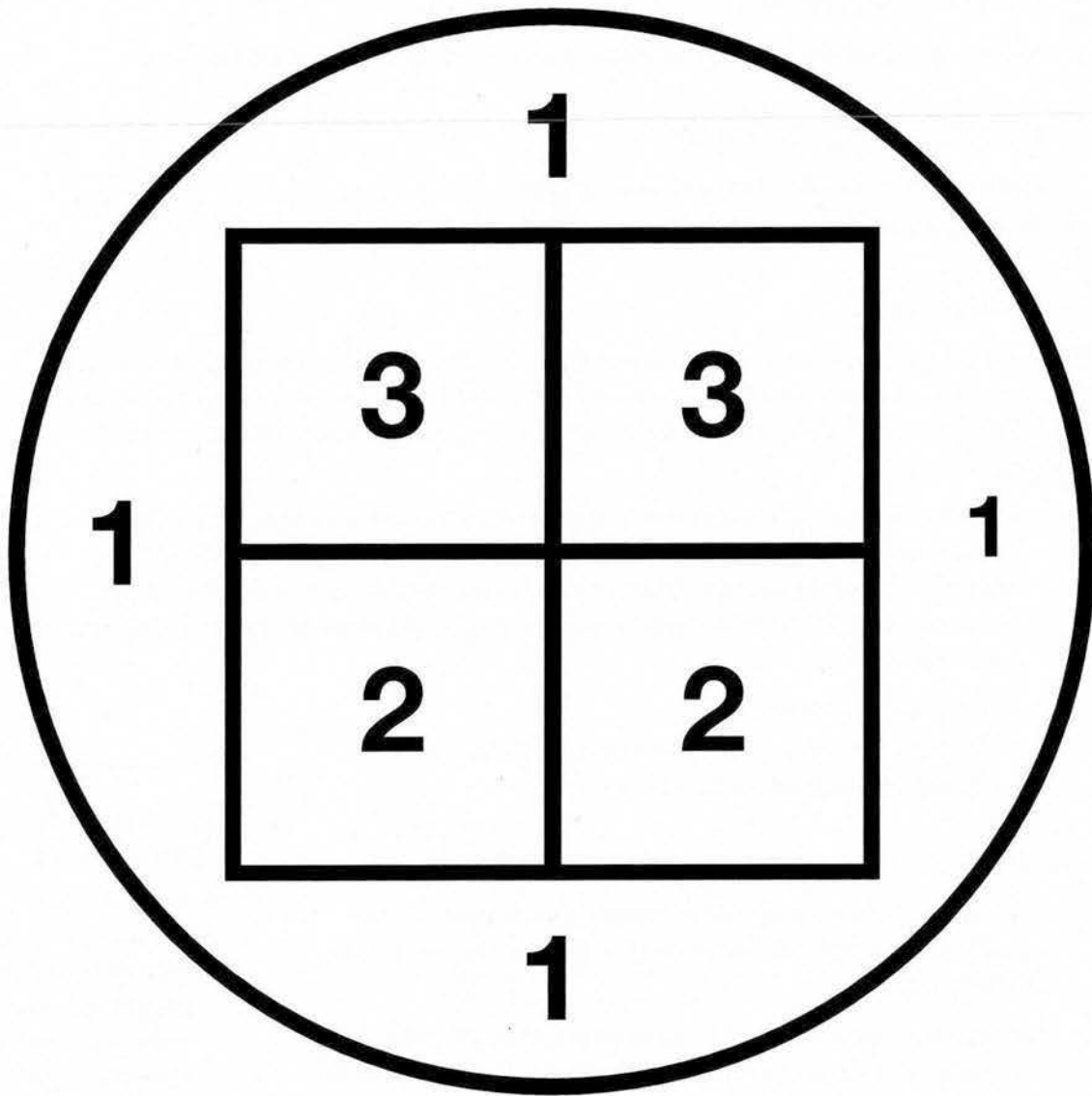
- 1 Ask students to return to their group and write up their own set of rules for how they will play the game. Allow the students about 15 minutes to do this.
- 2 When they have finished, ask them to play the game and modify the rules where necessary.
- 3 Once they have played the game in their own group, ask one participant from each group to teach their version of the game to another group. You only need to allow about five minutes for this, as it is not important that the game has a result.

? Discussion questions

- Ask the students who were teaching the new groups how they found this experience. Were they listened to?
- Ask the participants in the groups what they found difficult about learning the new rules.
- Which was more important in this exercise – listening and learning new rules, or arguing about how your own rules were better?

LEARNING SEQUENCE 1 Activity 2 • Game Board

AusVELS Level 7 Learning Sequence 1



START

3 Designing our own classroom rules



LEARNING INTENTION

- o To develop shared expectations for learning and interacting within the classroom.

Preparation and materials

- ✓ whiteboard for brainstorming and recording ideas
- ✓ large paper and coloured markers (for the list of rules to be displayed)

Introduction

If you did not have time to complete this activity in the same lesson as the previous activity in this learning sequence ('Ground rules – what's the point?'), ask students to think now about the main things they learned playing the board game. Read out the below wrap up from the previous activity.

A game is not that different from a classroom. For everyone to learn and enjoy the sexuality education classes, we need to understand the point of having agreed rules of conduct, and then we need to set our own standards of behaviour for interacting within our class. We need to consider the following points when we are designing our classroom rules:

- Does everyone feel safe?
- Does everyone get a chance to contribute to the lesson?
- Do we value everyone's contribution?

Instructions

- 1 Ask students to brainstorm all the things they can think of that would make this class setting as good as possible. Record these on the board.
- 2 Once you have gathered all the contributions, look at language that might be inappropriate (this is also an opportunity to discuss what sort of language will be used in the class). If you find any inappropriate language in the contributions, ask, 'Would this make someone feel unsafe or unwilling to participate?' Change the language that is inappropriate.
- 3 Put similar suggestions into groups, and for each of these groups write one representative statement.
- 4 You may find that the students suggest consequences rather than ground rules – these can be removed or rewritten. Remind students that we are looking for statements that tell us how our class environment should be, not how it shouldn't be.
- 5 Ask the students if there are any statements that don't need to be included. Debate these to determine whether or not to remove them.



BRAINSTORMING TIPS FOR TEACHERS

- accept all ideas
- add your own ideas, as you are a part of the class too
- use prompts, such as earlier comments by students, to promote contributions
- record all suggestions.

- 6 Make up your final list. Ensure you write them as statements of how to interact with each other rather than how not to interact with each other. Display these somewhere in the room for easy reference.
- 7 Go back to the points you started with to see if they have been adequately covered. Does everyone feel safe? Does everyone get a chance to contribute to the lesson? Do we value everyone's contribution – not necessarily for what it is but just because they made it?

Discussion questions

- o Who should be responsible for ensuring that we stick to these rules? Could we all share this responsibility?
- o How will you let each other know when someone has behaved in a way that does not reflect the agreed classroom rules? Hopefully we can all be sensitive about how this is done so that no one needs to feel guilty or ashamed. Demonstrate how this might look by setting up a role play.

ROLE PLAY

Ask three students to participate in a staged classroom discussion. Student A gives a response to a question asked by the teacher. Student B, in a stage whisper, says, 'Do you think anyone really cares what you think?' A number of students and the teacher have overheard this comment. What is the best way to deal with the situation? Suggest that Student C says to Student B, something like, 'That's a bit unfair. Whatever we want to say, we should be able to feel safe saying it.'

Wrap up

While we are getting used to the ground rules we have established for our classroom, maybe we should keep them displayed where we can all see them. We may also need to remind each other what they are, so it's important to phrase the reminder in a way that's respectful, and to accept a reminder graciously.

SAMPLE GROUND RULES

- listen to each other respectfully
- everyone has a right to speak
- when speaking, stick to the point
- wait for the person speaking to finish before replying
- when giving an example, speak in the third person or make up a name
- try to support each other
- respect each other's cultural traditions, beliefs, values, and languages.

Modified from Ollis and Mitchell (2001, p.10)

4 Communication and body language



LEARNING INTENTION

- To identify processes that will support learning goals through the awareness of good communication.

Preparation and materials

- ✓ prepare the cards 'Topics for discussion', one per pair of students
- ✓ prepare the cards 'Behavioural cues', one per pair of students
(You may need to duplicate the cards to have enough for all the pairs. It is OK if some are the same.)

Introduction

In this activity students will have the opportunity to understand how body gestures and facial expressions deliver both positive and negative messages. They will be able to practise the use of body language that conveys interest and see the significance of this in successful communication.

Instructions

- 1 Ask the students to form pairs and designate Person A and Person B.
- 2 Each person in the pair is given a card. Person A has a 'Topics for discussion' card and Person B has a 'Behavioural cues' card.
- 3 The pairs do not share the information on their cards with each other.
- 4 Person A begins a conversation on their topic with Person B. During the discussion, Person B acts out the behaviour described on their card. Allow the discussion to run for no longer than two minutes as it is sometimes difficult to maintain.
- 5 Ask participants to describe to the class the body language being used and how it felt.
- 6 Brainstorm a list of positive signs that indicate interest; for example, eye contact, positioning of the face, gestures, and verbal acknowledgements. Record this list on the board. (You may want to add some ideas from the list 'Communication tips', below.)
- 7 Repeat the exercise but this time Person B uses the active listening techniques listed on the board. Again, ask the participants to describe how it felt.
- 8 It is worthwhile swapping the roles of Person A and Person B. Person A selects a topic and Person B demonstrates what active listening looks and sounds like.

Wrap up

Body language can be more powerful than words. We're not always aware of our body language. If we want to get a message across to someone we really care for and are interested in, it's worth making a concerted effort with our body language.

It is always obvious when body language doesn't match the words being used. Inconsistent body language can imply insincerity or dishonesty.

As well as using body language to convey interest, it's important to ask questions and offer responses that encourage the conversation. Active listening is a way of paying attention and responding in a manner which helps the speaker to feel listened to, and in which both speaker and listener gain a mutual understanding of what is being said.

COMMUNICATION TIPS

- Find and maintain a comfortable level of eye contact and try not to be distracted by sights or noises around you.
- Check out the speaker's body language and facial expression for cues as to how they are feeling.
- Check your own body language and facial expression. Are you smiling, frowning, neutral etc.? Any of these may be appropriate for the conversation as they can indicate that you understand what is being said. Are you positioned at a similar level to the speaker and is your stance open and friendly?
- Show you are listening by making short verbal comments such as 'yes' or 'uh-huh' and/or smile or nod.
- Seek clarification or paraphrase something that has been said to show that you are listening and following the conversation.
- Unless you are asked for advice or your opinion, there is no need to give it.

LEARNING SEQUENCE 1 Cards • Topics for discussion

**TOPICS FOR DISCUSSION**

Select one the following topics to discuss with your partner:

- your favourite TV show
- your favourite movie
- the best holiday you have ever had
- your most embarrassing moment
- your pet or favourite animal
- your favourite song or band.

**Person
A**

TOPICS FOR DISCUSSION

Select one the following topics to discuss with your partner:

- your favourite TV show
- your favourite movie
- the best holiday you have ever had
- your most embarrassing moment
- your pet or favourite animal
- your favourite song or band.

**Person
A**

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**Person
A**

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Select one the following topics to discuss with your partner:

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- your favourite movie
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- your most embarrassing moment
- your pet or favourite animal
- your favourite song or band.

**Person
A**

LEARNING SEQUENCE 1 Cards • Behavioural cues

**BEHAVIOURAL CUES**

- Behave as if you are not interested or don't care.
- Yawn, roll your eyes etc.

**Person
B**

BEHAVIOURAL CUES

- Interrupt every time they say something.
- Top their story with a better, more fantastic, one of your own.

**Person
B**

BEHAVIOURAL CUES

- Be an active listener.
- Nod your head, ask questions and maintain eye contact.

**Person
B**

BEHAVIOURAL CUES

- Behave as if you would rather be somewhere else.
- Look at the clock, your watch or your phone.

**Person
B**

BEHAVIOURAL CUES

- Do not make eye contact.
- Look out the window or somewhere else.
- Fidget with things such as a pen, paper, your clothing etc.

**Person
B**

5 Question Box



LEARNING INTENTION

- To support students to generate and investigate questions.

Preparation and materials

- one lidded box with a slot cut into the top (shoe box or other small box)
- strips of paper of equal size, one for each student

Introduction

Due to the nature of sexuality education, teachers need to give students an opportunity to ask questions anonymously. Teachers can then provide students with correct information in response to these questions. The Question Box can promote inquiry and provide an opportunity to present new, engaging content which reflects the real world of students as asked for by them.

This activity is ideal for the end of every lesson. Completing it at the end of the lesson gives you time to find the most up-to-date information before reporting back. In the beginning there may be questions that have been put in just to test what sort of reaction they will get. Treating each question seriously is the best way to respond. If you are unsure how to respond to a particular question, you could read it in class and say that you weren't sure what this meant, and would the person who wrote it please write the question again in another way that will help you to understand it. This rephrased question can be placed, anonymously, in the Question Box at the end of the lesson along with all the other questions.

Instructions

- 1 Bring into class the prepared box with the slot for posting questions.
- 2 Hand out strips of paper of equal size to help keep the questions anonymous.
- 3 Give the students time to think about something they would like to know the answer to.
- 4 Ask everyone to write their question on the paper provided. If they can't think of a question they can write something they would like to know more about. If they are unable to do that, they can write that they 'have no question at this time'. Making sure that everyone writes something down helps to keep the questions anonymous.
- 5 As the students leave the room at the end of the lesson ask them to drop their questions into the Question Box for you to respond to at the start of the next lesson.

VARIATION

Using the strips of paper, ask students to comment anonymously on the lesson you've just had. You might ask, for example: What do you think was the purpose of this lesson? What was the most interesting part? What would you change to make it better? What was missing? Students can post their responses on the way out of class.

LEARNING SEQUENCE

2

Needs assessment and priority setting

- 1 Introducing me
- 2 Think back

AusVELS LEVEL 7**HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion***

- › physical, social and emotional changes during adolescence
- › access reliable information about health issues
- › barriers and enablers to accessing health services.

INTERPERSONAL DEVELOPMENT – *building social relationships*

- › strategies to build and maintain positive social relationships.

1 Introducing me



LEARNING INTENTION

- To provide students with an opportunity to build positive relationships.

Preparation and materials

- sticky notes (super-sticky if possible), one per student
- coloured markers or pens which are bold and bright enough to be clearly visible on the sticky notes
- open space where students can move around easily

Introduction

If you used the Question Box in your last lesson, answer the questions at the beginning of class.

Prior to starting this activity, revisit the list of shared expectations around classroom conduct that was developed in Learning sequence 1, activity 3, 'Designing our own classroom rules'.

This activity has been included to provide students with another quick way of getting to know each other. The teacher should participate if there are an odd number of students.

Instructions

- 1 Give a sticky note to each person.
- 2 Ask the students to write the name they like to go by at the top of the sticky note. Now ask the students to write three statements about themselves – two must be true and one false, but not necessarily in that order. The statements should not be too obvious so that they can easily disguise the false statement.
- 3 Have the participants stick their notes onto their left shoulders. Ask everyone to find a partner and stand together.
- 4 Read your partner's note and discuss what is written on it. Take a guess at which statement is false.
- 5 After two or three minutes, check that everyone has finished. Allow a little more time if required.
- 6 When everyone has finished, ask students to move onto a new partner and repeat instructions four and five.
- 7 Finish the activity when everyone has visited five classmates.

Teacher advice

If you think the students in your class will move only within their friendship group, you can facilitate greater circulation by creating an inner and outer circle. First ask students to select a partner then assign the numbers one and two to the students within each partnership. Ask all the number ones to form an inner circle facing outwards, and the number twos to form an outer circle facing in towards their partners. Continue with instructions four and five above. When it is time to change partners, have the outer circle move two places to the right and begin the process again. Repeat until all students have visited five classmates.

Discussion questions

- Were there any surprises? Ask each student to introduce their final partner to the class using the two true statements.

(This activity was modified from *Taught Not Caught*, The Clarity Collective, 1990, p. 48.)

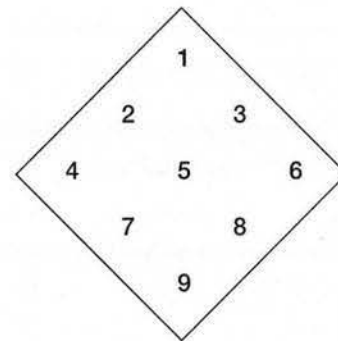
2 Think back

LEARNING INTENTIONS

- To provide students with an opportunity to remember what they have learned in sexuality education in order to establish prior knowledge.
- To provide students with the opportunity to connect prior knowledge with the setting of learning goals within sexuality education.
- To recognise and alleviate the embarrassment that young people may feel in talking about sexuality.
- To establish language that is age-appropriate and respectful for use in the school setting.

Preparation and materials

- statement cards, one set per pair of students
- draw the diamond shape on the board as shown opposite



Introduction

Explain to the class that as we are about to begin a unit of work on sexuality, this activity is a warm-up exercise based on the sexuality education they received in primary school. 'Sexuality' might be most easily explained to students as involving puberty and sexual development in general, babies, bodies, sexual feelings and relationships.

Instructions

- 1 Begin by asking the group the following questions:
 - Did you have sexuality education at primary school?
 - Did you learn about puberty?
 - Did you learn how babies are conceived?
 - What else did you learn?
 - Is there anything you wanted to learn about but didn't?
 - Why do you think you weren't taught some things?
- 2 Write the following statement on the board: *In sexuality education, it is important for us to learn...*
- 3 Ask the students to work in pairs and give each pair a set of the ten statements.
- 4 Now ask the pairs to prioritise the statements into a diamond shape with their number one learning priority at the top, two and three on the next row, four, five and six on the middle row, seven and eight next below, and number nine, the least important priority, on its own at the bottom (there will be one left over).

- 5 When the students have finished creating their diamond, ask each pair to join up with another pair. They should then work together with one set of statement cards to create a diamond that they all agree represents a good order of priorities. Hopefully being able to list some priorities on the same level will make it easier to compromise.
- 6 Ask each group of four to feed back their top three priorities. Write these on the board. Discuss why the groups thought these were the most important priorities. As part of the class, the teacher should also have some input into this discussion.
- 7 Ask the students what they would include if they were designing a sexuality education program for their year level.

Teacher advice

It is important at this time to ensure that what the students feel they need to know is covered. If they need to know more about the physical changes of puberty, menstruation or reproduction, use the activities in AusVELS Level 7 'Teacher's choice', Learning sequence 1.

VARIATIONS

At instruction 7, if you wish, you could develop and use coloured voting cards with green meaning 'yes, I would like this topic included', yellow for 'unsure and need more information before I can decide' and red for 'no, it's not of interest'. Students could vote individually, in pairs or in groups. The teacher records the votes next to the topics.

Alternatively, you could use an interactive whiteboard voting system to determine the order of priorities (1, 2 or 3) for each group. Write the ten statements on the board and ask one student from each group to come up to the board and assign the coloured dots to the matching idea. On an interactive whiteboard the dots are used like a cut and paste so this is a very good visual.

What it might look like after three groups have voted.

- Is this normal?
- About body image 1
- About romance 2 2
- About sex 1 1
- About contraception 3
- How to ask questions and get help 3
- About human reproduction
- How to manage friendship
- About getting along with family 2
- About sexually transmissible infections (STIs) 3

LEARNING SEQUENCE 2 Statement cards • We need to learn...



We need to learn...

IS THIS NORMAL?

All about physical and sexual development.

We need to learn...

HOW TO ASK QUESTIONS AND GET HELP

How to get help when you just want to ask a small but embarrassing question, or when you are worried and upset.

We need to learn...

ABOUT BODY IMAGE

Tips on feeling OK about myself and my body.

We need to learn...

ABOUT HUMAN REPRODUCTION

How does pregnancy occur?

We need to learn...

ABOUT ROMANCE

What is love? What does love feel like? Why or why not have romantic relationships at this age? What are the different kinds of romantic relationships?

We need to learn...

HOW TO MANAGE FRIENDSHIP

Tricks and tips for getting on with each other.

We need to learn...

ABOUT SEX

Making up my mind – personal values about being sexual including how we treat one another.

What's the right age?

When is 'it' considered sex?

We need to learn...

ABOUT GETTING ALONG WITH FAMILY

How to manage conflict between me and other family members.

I just want to be me – not like my brother or sister.

With more privileges come more responsibilities.

We need to learn...

ABOUT CONTRACEPTION

What is it and how does it work?

Who needs to use it?

We need to learn...

ABOUT SEXUALLY TRANSMISSIBLE INFECTIONS (STIs)

What are they and how to prevent them?

LEARNING SEQUENCE

3

Demonstrating prior knowledge

- 1 Matched pairs
- 2 Changes
- 3 What's in the bag?
- 4 The Little Book of Conception to Birth

AusVELS LEVEL 7

HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion*

› physical, social and emotional changes during adolescence.

INTERPERSONAL DEVELOPMENT – *building social relationships*

› strategies to build and maintain positive social relationships.

1 Matched pairs



LEARNING INTENTION

- To provide students with an opportunity to build positive relationships.

Preparation and materials

- ✓ prepare cards 'Matched pairs', one set

Introduction

Young people who do not know each other well, and who may be reluctant to step outside of their comfort zones to talk with one another, need to practice verbal and non-verbal skills that can promote communication and help build relationships. This activity provides a quick and non-threatening way for young people to share information and then discuss what skills are needed to do this. This is important as sexuality education requires discussion in pairs and groups, not necessarily just with close friends.

Instructions

- 1 Hand out one card to each student. Include yourself if there are an odd number of students.
- 2 Participants then have to wander around the room until they find the other half of their pair. The pairs might be opposites (e.g. 'night' and 'day') or two words that often go together (e.g. 'egg' and 'bacon').
- 3 When everyone has found their partner, ask the pairs to spend two minutes (one minute each) answering this question: 'What's your favourite meal and who prepares it for you?'
- 4 Ask each pair to introduce their partner to the class using the information they were just given.



Discussion questions

- What social skills were needed to participate in this activity? (If necessary, revisit the active listening skills discussed in AusVELS Level 7 Learning sequence 1, activity 4, 'Communication and body language'.) Possible answers might include: making eye contact; listening; and body language that suggests interest in the other person (e.g. nodding, smiling).
- Was there anything about the organisation of the activity that assisted you to do this? For example, the instructions were simple; no one was left out; the question was safe.

LEARNING SEQUENCE 3 Cards • Matched pairs

**Wet****Dry****Up****Down****Salt****Pepper****Eggs****Bacon****Night****Day**

LEARNING SEQUENCE 3

Cards • Matched pairs

**Left****Right****Hello****Goodbye****Lost****Found****Cat****Dog****Front****Back**

LEARNING SEQUENCE 3 Cards • Matched pairs

**Hot****Cold****Knife****Fork****First****Last****Fish****Chips****Yes****No**

LEARNING SEQUENCE 3

Cards • Matched pairs

**Stop****Go****Rain****Shine****Big****Little****Fast****Slow****Easy****Hard**

2 Changes



LEARNING INTENTIONS

- To provide students with an opportunity to demonstrate what they have learnt in sexuality education, to establish prior knowledge and set learning goals.
- To recognise and alleviate the embarrassment that young people may feel in talking about sexuality.
- To establish language that is age-appropriate and respectful for use in the school setting.

Preparation and materials

- ✓ A3 copy of the worksheet 'Physical changes in puberty', one per group
- ✓ set of four information sheets 'Physical changes', 'Social changes', 'Emotional changes' and 'Cognitive changes', for teacher-use

Introduction

This activity can be used to check prior knowledge as well as providing a learning opportunity to those students who have not been exposed to all the information contained on the worksheet. This should help establish a shared understanding within the class of what puberty entails.

Introduce this activity by acknowledging that most students have probably covered this information in primary school but that it's always good to see what everyone remembers, and to check that what they remember is accurate.

Teacher advice

There is a lot of information contained in the teacher information sheets. The purpose of this is to outline the less-explained aspects of adolescent development – the emotional, social and cognitive changes – in order to highlight how changes beyond the physical affect young people's experience of adolescence and their behaviours and choices around sexuality. Some 'changes' are hard to categorise as either a social or emotional event and it is not critical that students make the distinction. What is important is that the students can appreciate that these elements of development combine and affect their lives.

Instructions

- 1 Divide the class into groups of four. Hand out the worksheet 'Physical changes in puberty' to each group.
- 2 Ask the students to brainstorm as many physical changes that occur during puberty as they can remember. List them under the headings of 'Female', 'Both' or 'Male'. Tell the students they have just five minutes to do this and that their target is to come up with 15 changes.
- 3 When the time is up, ask each group to count the number of changes they were able to remember and report this number to the rest of the class.
- 4 The group with the most changes then reads them out and the other groups tick off the ones they have that are the same and add the ones they don't to their own lists. Make sure to correct any misinformation.
- 5 Ask the other groups to report any changes to the class that have not been mentioned. Once again, groups should add these to their own lists if they don't already have them. Use the teacher information sheet 'Physical changes' to add any changes that the students have not mentioned. The list can also be used to help explain some of these changes.
- 6 Ask the class how easy it was to remember all the physical changes. What did they notice about the list that they made? Many changes occur to both males and females, and some changes for males and females are quite similar.
- 7 For the next part of the activity, ask the groups to turn over the paper and brainstorm for five minutes other changes that take place around this time, e.g. social and emotional changes, and changes at home. Remind the students that when they are brainstorming the changes at home, these may vary quite a bit among them but to list all of them.
- 8 To report back to the class, this time ask one group to read three items from their list then move onto a new group. Continue around the groups until there are no more new items. Once again, use the teacher information sheets, 'Emotional changes' and 'Social changes' to add anything the students have not mentioned. The lists can also be used to help explain some changes.

Wrap up

Read the information sheet 'Cognitive changes' and discuss the implications of these for young people.

Following the steps for using the Question Box in Learning sequence 1, activity 5, ask students to write down any questions they may have about the changes in puberty which will be answered in the next lesson.

Physical changes

GROWTH SPURT

Bones continue to grow until about age 15 for girls and two years longer for boys. That's why men often end up 13 cm taller than women and seem to sprout extra-long legs and arms before the body catches up.

BREAST DEVELOPMENT

This is the first sign of puberty in girls. Breasts may grow unevenly with one breast larger than the other. Breasts are tender and sensitive during this phase but the tenderness stops once the breasts are more fully developed.

Hormones can also cause boys' breasts to develop slightly. This is quite common and usually wears off after a year or so.

BECOMING FERTILE

The puberty phase of life is said to be complete when the body is physically capable of reproduction. This is usually reached by age 13 for girls and 14 for boys, though obviously there is some variation.

MENARCHE

The first menstrual period.

MENSTRUATION

Girls can have their first period anywhere between ages nine and 15, with the average age currently at 12.5 years. This means she has begun ovulating and could become pregnant if she had sexual intercourse. During ovulation the egg (or *ova*) is released from the ovaries. A lining builds up in the uterus ready to 'nest' the egg when it arrives. If the egg is not fertilised, the body 'sheds' the egg and the tissue lining through the vagina.

SPERMARCHE

The first ejaculation. This means the male body has now started making sperm.

NOCTURNAL EMISSIONS

An involuntary emission of semen during sleep, usually accompanied by a *wet dream* (an erotic dream accompanied by ejaculation of semen).

OILY HAIR

During puberty the sebaceous glands produce extra oil which can make your hair look shiny and greasy.

PUBIC AND UNDERARM HAIR

Sometimes this starts before periods or sperm production has begun.

BODY ODOUR

Increasing sweating and an 'adult' body odour.

WEIGHT GAIN

Both males and females gain weight during puberty. By the end of puberty males have heavier bones and nearly twice as much muscle. This muscle develops mainly during the later stages of puberty. Girls' fat tissue increases to a greater percentage of the total body than in males, and the hips grow wider.

BODY HAIR

Hair on arms and legs becomes darker and thicker. Facial hair growth begins in the later teen years for boys.

DEVELOPMENT OF INTERNAL AND EXTERNAL SEX ORGANS

- Female external sex organs: the vulva which includes the labia, vaginal opening and clitoris.
- Female internal sex organs: vagina, uterus and ovaries.
- Male external sex organs: scrotum and penis.
- Male internal sex organs: testes.

SEXUAL FEELINGS BECOME STRONGER

Males and females can have sexual feelings any time in their lives but these get much stronger around puberty.

PIMPLES

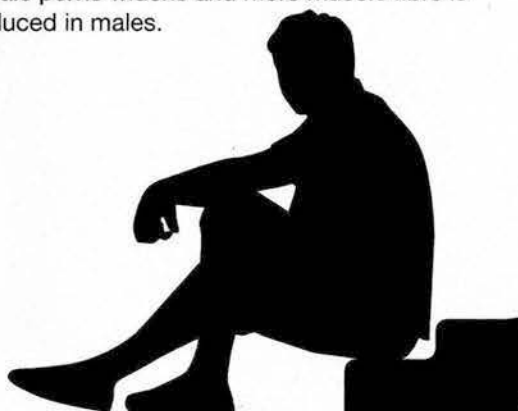
The skin's oil glands will produce excessive amounts of sebum – a light yellow, oily fluid.

VOICE GETS DEEPER

As bones, cartilage and vocal cords grow, your voice starts to sound like an adult's.

BODY SHAPE CHANGE

Female pelvis widens and more muscle fibre is produced in males.



Social changes

CHANGING FRIENDSHIPS

Between the ages of 10 and 14, young people tend to hang out with others of the same sex and choose friends who are most like them.

From around the age of 14, teenagers become more able to appreciate and enjoy friendships with people whose interests, appearance and beliefs are different to theirs, and they may broaden their friendship group to include both boys and girls.

PEERS ARE VERY IMPORTANT

You start to place a higher value on friendship and want to spend more time with friends. Family are still very important but you are adding friends to your 'support crew'.

DISAGREEMENTS AT HOME

There may be more disagreements with family – about what to wear and doing homework, for example – as you practice your new thinking powers and try to connect more with friends.

HAVE MORE OR DIFFERENT RESPONSIBILITIES

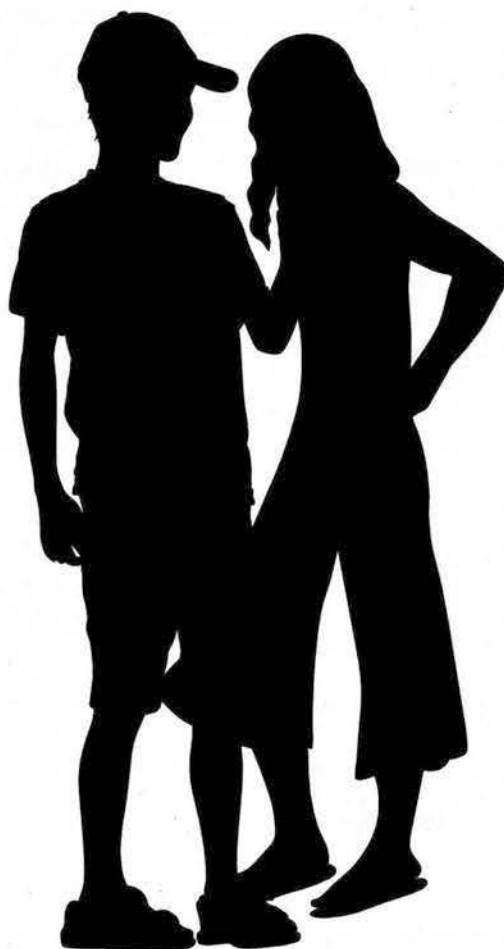
You probably have the responsibility of looking after your own room which may be a room you share with a brother or sister. You may be asked to prepare your own lunches or possibly pick up younger family members on your way home from school.

MIGHT WANT A BOYFRIEND OR GIRLFRIEND

This is where you can start to feel a real difference among your peers. It can be difficult if all your friends seem to be with someone and you would like to be, but most people at this age will not have a relationship.

MORE UNSUPERVISED TIME

Allowed to go out more, enjoy more unsupervised time on the computer, and perhaps have your own mobile phone.



Emotional changes

EXPERIMENTING WITH A DIFFERENT 'YOU'

You become interested in trying different styles, different music, etc. You may be aware of an inner life that seems separate to the body, and be questioning and learning who you are as well as imagining a 'possible you' in the future. One part of figuring out who you are relates to your gender: what kind of male or female you would like to be, or are. There are many strong messages around telling you how to be male or female.

LOTS OF CHANGES, A NEW SOCIAL CROWD AND STRONGER EMOTIONS CAN BE REALLY HARD IF THINGS ARE GOING WRONG IN YOUR LIFE

Not knowing how to sort these things out can lead to trying to find love and comfort, or just acceptance and belonging, through sex, or numbing feelings with alcohol. The tendency of ads, and of young people, to romanticise some adult habits can make it even more difficult to make sense of these emotions.

FEELINGS OF LOVE AND PASSION MAY START

And heartbreak.



REQUIRED TO MAKE MORE DECISIONS AND VERY CONSCIOUS OF WHAT PEERS THINK ABOUT YOU

You care a lot about what everyone else is doing which tends to guide your decisions.

REQUIRED TO SOLVE MORE PROBLEMS

Because you can now think in a more complicated way, life can get more complicated too BUT you are also more capable of learning positive ways to approach problems.

SEXUAL ATTRACTION

Another part of learning about yourself is noticing who you are sexually attracted to. This can change and keep on changing.

VERY CREATIVE TIME OF LIFE

Lots of thoughts, ideas, and strong feelings.

LEARNING HOW TO GET ALONG WITH OTHERS AND HOW TO BE A GOOD FRIEND

Young people place a high value on the qualities of loyalty, frankness (honesty), trust and being able to share private thoughts and feelings.

GROUP MEMBERSHIP VS. ROMANTIC RELATIONSHIP

At this age people tend to be more concerned with learning how to get on with 'the herd' rather than an intense one-on-one romantic relationship. Sometimes there is a higher priority on the acceptability of the boyfriend or girlfriend to their group than in their relationship with that person.

GET REALLY UPSET WHEN TREATED UNFAIRLY

Sense of fairness and justice may be very important to you.

CRAVING FOR PRIVACY

You want to work things out for yourself rather than being told.

FEAR OF BEING TEASED

Vulnerable to rejection and more self-conscious which can lead to feelings of loneliness or isolation.

Cognitive changes

THE BRAIN REACHES ITS MAXIMUM SIZE DURING ADOLESCENCE BEFORE GOING THROUGH 'PRUNING' AND REORGANISATION

There are more 'thinking power' cells (grey matter) but connections need some streamlining to enable you to get faster access to seeing consequences.

BRAIN PRUNING

The brain is pruning back the connections you aren't using now so skills you practice during adolescence (e.g. communication and friendship skills, problem-solving, playing a sport, etc.) are more likely to stick with you for the rest of your life.

YOU CAN DO MENTAL TASKS THAT CHILDREN CANNOT DO

You are more able to consider a range of options, which means you can hold them in your head and sort through them better than you were able to as a child. You can set distant goals instead of only aiming for what's good in the next hour. You can cope with shades of grey. You can ignore or screen out irrelevant information and you can pay attention and concentrate.

CHILDREN CAN DO SOME MENTAL PROCESSES FASTER THAN YOU!

It seems that reading others' emotions gets harder at this stage of life, maybe because there is so much going on in your brain. This can make emotional situations trickier and more confusing. It also means that putting yourself in other people's shoes and imagining how they are feeling is harder for you now than it will be when you are an adult. This may be one reason why young people can be 'unthinkingly' cruel to one another.

MORE RISK-TAKING




You want to take more risks and stretch yourself beyond your former limits, which is good for learning and for your self-esteem. Of course there is also the kind of risk-taking that can be very dangerous for how you feel about yourself too.

ONLY PARTIALLY DEVELOPED MECHANISMS FOR CONTROLLING EMOTIONS

You are shifting from acting on gut reactions to being able to stop, think and take a more intellectual, considered approach. You'll need to practice this for a while.



Physical changes in puberty

FEMALE 	BOTH 	MALE 

3 What's in the bag?



LEARNING INTENTIONS

- To provide students with an opportunity to demonstrate what they have learnt in sexuality education, to establish prior knowledge and set learning goals.
- To recognise and alleviate the embarrassment that young people may feel in talking about sexuality.
- To establish language that is age-appropriate and respectful for use in the school setting.

Preparation and materials

One mystery bag for each group containing:

- | | |
|--|---|
| <input checked="" type="checkbox"/> large piece of cardboard or poster board | <input checked="" type="checkbox"/> a piece of aluminium foil |
| <input checked="" type="checkbox"/> two ping pong balls | <input checked="" type="checkbox"/> two uninflated balloons |
| <input checked="" type="checkbox"/> string | <input checked="" type="checkbox"/> glue |
| <input checked="" type="checkbox"/> coloured wool | <input checked="" type="checkbox"/> pair of scissors |
| <input checked="" type="checkbox"/> clay | <input checked="" type="checkbox"/> adhesive tape |
| <input checked="" type="checkbox"/> two paper or plastic cups | <input checked="" type="checkbox"/> coloured markers |
| <input checked="" type="checkbox"/> handful of pipe cleaners | <input checked="" type="checkbox"/> any other materials you think will work |

Introduction

This activity has been included to determine students' prior knowledge of the male and female reproductive systems. It also provides an opportunity, where necessary, to enhance student knowledge regarding reproduction. The posters that are made in this session will be used in the next activity to discuss conception.

Instructions

- 1 Divide the class into groups of four or five.
- 2 Allocate either the female or male reproductive system to each group and ask them to depict it as a collage using the contents of the mystery bag.
- 3 In their groups, students should spend a little time planning the collage to determine which materials will best suit the various parts of the reproductive system. If you think they might have trouble doing this activity, offer each group a diagram of the relevant reproductive system (they can be easily obtained through the internet, for example, via a Google image search). Ask students to label the various parts (see lists below).
- 4 When everyone has finished, get students to sit in a large circle and display the collages in the centre in order for everyone to admire their works of art.

Female reproductive system	Male reproductive system
fallopian tube	penis
ovary	urethra
uterus	urethral opening
cervix	bladder
the external os	prostate gland
vagina	seminal vesicle
vaginal opening	vas deferens
urethral opening	epididymis
clitoris	testicle
labia	scrotum
pubic hair	pubic bone
anus	bowel
bowel	anus
bladder	pubic hair
urethra.	glans.

Discussion questions

- Is it easier to remember the reproductive parts of the female or male? Why?
- Do you think that participating in this activity will help you to remember the reproductive organs? Why?
- What was something new or interesting that you learned from this activity?

Wrap up

To ensure that everyone understands the changes of puberty and the reproductive organs, use the Question Box at the end of class so that students can indicate any points they would like clarified at the start of the next lesson.

(This activity was modified from *Taught Not Caught*, The Clarity Collective, 1990, p. 115.)

4 The Little Book of Conception to Birth



LEARNING INTENTIONS

- To provide students with an opportunity to demonstrate what they have learnt in sexuality education in order to establish prior knowledge and set learning goals.
- To present new content.
- To provide a strategy for students to organise new and existing knowledge.

Preparation and materials

- ✓ A3 copies of the template 'The Little Book of Conception to Birth', two per student (one is for drafting)
- ✓ pairs of scissors
- ✓ coloured markers
- ✓ fine-line coloured markers
- ✓ equipment for viewing YouTube video on how to make the book (make sure you have taught yourself first!)
<<http://www.youtube.com/watch?v=KPqlulX6ocw&feature=youtu.be>>



Introduction

There are several ways for women to conceive: artificial insemination, in vitro fertilisation (IVF) and, most commonly, sexual intercourse. This activity is concerned with conception through sexual intercourse but it's important to inform students that there are families where the other methods are better and more appropriate. It is also important to recognise that there are families where the young person is adopted or fostered and/or where the parents are of the same sex.

Instructions

- 1 Ask the students to sit in a large circle. They will each need a pencil and one copy of the template 'The Little Book of Conception to Birth'. Explain that they will each be writing their own story of conception and they need to use the spare template for taking notes and drafting their book.
- 2 Briefly describe artificial insemination and IVF and why it is appropriate to have these methods available. (For more information, use the 'Assisted reproductive technology' cards in AusVELS Levels 9 and 10, Learning sequence 4, activity 8, 'Fertility and forming a family' and this useful website – <<http://www.varta.org.au/what-is-assisted-reproductive-treatment-art/w1/i1004206/>>).
- 3 Place the collage posters from the last lesson in the centre of the circle. Using the posters as a visual aid, describe how conception takes place. ('Teacher notes' below are useful here.) At each step of the way, ask students if they need to have anything clarified.

- 4 Describe to the students some of the changes that occur to the egg from fertilisation to birth (i.e. zygote>embryo>foetus), referring to the notes provided on the Better Health Channel – <http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Pregnancy_week_by_week?open>.

It is also helpful to show images to go along with the discussion, with useful ones found on sites such as:

- WebMD – <<http://www.webmd.com/baby/ss/slideshow-fetal-development>>;
 - Baby Centre – <<http://www.babycenter.com.au/pregnancy/fetaldevelopment/>> and <<http://www.babycenter.com/fetal-development-inside-your-womb>>;
 - Wikipedia – <http://en.wikipedia.org/wiki/Prenatal_development>.
- 5 Ask the students to move back to their desks. Allow time for them to complete their notes, ask any questions they may have and finish their draft.
- 6 Demonstrate how the book is put together using the video or notes.
- 7 Students can either make the book now using their second blank template of ‘The Little Book of Conception to Birth’, writing out the final version once it’s finished, or else write the story onto the unfolded piece of paper then turn the paper into a book. Students can write in dot points, prose or even as a narrative, if they wish. Detail is important; however, they do not need to be excessive. After all, it’s meant to be a *little book*.

Teacher notes



Conception

In your description of conception, make sure you cover the following points:

- Eggs or ova are located in the ovaries of the female.
- Ovulation is the release of an egg and is most likely to occur about the middle of the menstrual cycle though this timing differs among females.
- Testicles are where the sperm are made.
- Epididymis is where sperm mature.
- Vas deferens is the narrow tube that the mature sperm travel along to get to the prostate gland.
- The prostate gland makes a fluid which combines with the sperm to create semen during sexual arousal.
- Arousal in the male and female occurs to aid vaginal sexual intercourse.
- In the female, arousal causes the vagina to become moist, ready to accept the erect penis.
- In the male, arousal causes the penis to fill with blood to make it firm, ready to enter the vagina.
- When vaginal sexual intercourse occurs many sperm are released.
- Fertilisation occurs if one sperm enters the egg in the outer portion of the fallopian tube.
- The fertilised egg travels down the fallopian tube.
- The fertilised egg enters the uterus.
- The fertilised egg embeds itself in the lining of the uterus where it is nourished and grows.
- It takes nine months from fertilisation to birth.



Stages of development

Pregnancy – week by week

The unborn baby spends around 38 weeks in the womb but the average length of pregnancy (gestation) is counted as 40 weeks. This is because pregnancy is counted from the first day of the woman's last period rather than the date of conception, which generally occurs two weeks later.

Pregnancy is divided into three trimesters:

- first trimester – conception to 12 weeks
- second trimester – 12 to 24 weeks
- third trimester – 24 to 40 weeks.

WEEK	DEVELOPMENT
1	This first week is actually the menstrual period. Because the expected birth date (EDD or EDB) is calculated from the first day of the last period, this week counts as part of your 40-week pregnancy, even though the baby hasn't been conceived yet.
2	The fertilisation of the woman's ovum (egg) by the man's sperm is known as conception and will take place near the end of this week. The gender and inherited characteristics are decided in that instant.
3	Thirty hours after conception, the cell splits into two. Three days later, the cell (zygote) has divided into 16 cells. After two more days, the zygote has migrated from the fallopian tube to the uterus. Seven days after conception the zygote burrows itself into the plump uterine lining.
4	The developing baby is tinier than a grain of rice. The rapidly dividing cells are in the process of forming the various body systems, including the digestive system.
5	The evolving neural tube will eventually become the central nervous system (brain and spinal cord).
6	The baby is now known as an embryo. It is around 3 mm in length. By this stage, it is secreting special hormones that prevent the mother from having a menstrual period.
7	The heart is beating. The embryo has developed its placenta and amniotic sac. The placenta is burrowing into the uterine wall to access oxygen and nutrients from the mother's bloodstream.
8	The embryo is now around 1.3 cm in length. The rapidly growing spinal cord looks like a tail. The head is disproportionately large.
9	The eyes, mouth and tongue are forming. The tiny muscles allow the embryo to start moving about. Blood cells are being made by the embryo's liver.

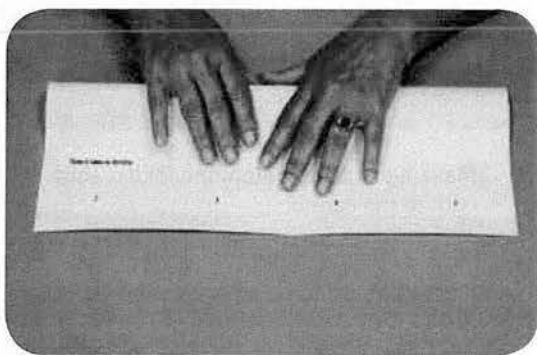
WEEK	DEVELOPMENT
10	The embryo is now known as a foetus and is about 2.5 cm in length. All of the bodily organs are formed. The hands and feet, which previously looked like nubs or paddles, are now evolving fingers and toes. The brain is active and has brain waves.
11	Teeth are budding inside the gums. The tiny heart is developing further.
12	The fingers and toes are recognisable but still stuck together with webs of skin.
13	The foetus can swim about quite vigorously. It is now more than 7 cm in length.
14	The eyelids are fused over the fully developed eyes. The baby can now mutely cry, since it has vocal cords. It may even start sucking its thumb. The fingers and toes are growing nails.
16	The foetus is around 14 cm in length. Eyelashes and eyebrows have appeared, and the tongue has tastebuds.
18-20	Interestingly, hiccoughs in the foetus can often be observed.
20	The foetus is around 21 cm in length. The ears are fully functioning and can hear muffled sounds from the outside world. The fingertips have prints. The genitals can now be distinguished with an ultrasound scan.
24	The foetus is around 33 cm in length. The fused eyelids now separate into upper and lower lids, enabling the baby to open and shut its eyes. The skin is covered in fine hair and protected by a layer of waxy secretion. The baby makes breathing movements with its lungs.
28	The baby now weighs about 1 kg (1,000 g) and measures about 25 cm from crown to rump. The crown-to-toe length is around 37 cm. The growing body has caught up with the large head and the baby now seems more in proportion.
32	The baby spends most of its time asleep. Its movements are strong and coordinated. It has probably assumed the 'head down' position by now, in preparation for birth.
36	The baby is around 46 cm in length. It has probably nestled its head into its mother's pelvis, ready for birth. If it is born now, its chances for survival are excellent. Development of the lungs is rapid over the next few weeks.
40	The baby is around 51 cm in length and ready to be born. It is unknown exactly what causes the onset of labour. It is most likely a combination of physical, hormonal and emotional factors between the mother and baby.

http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Pregnancy_week_by_week?open

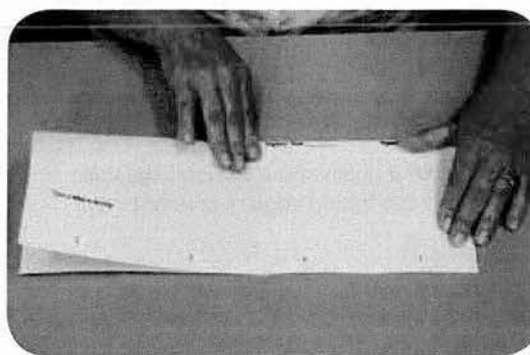
Teacher notes

Instructions for making a book

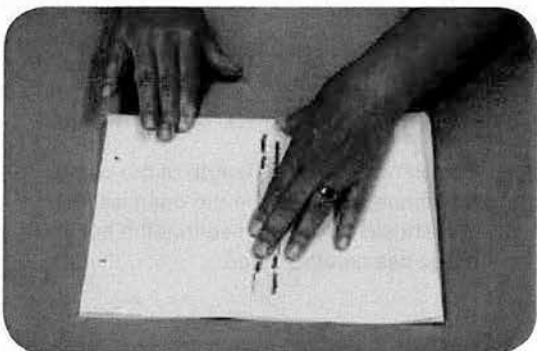
Video available at: <http://www.youtube.com/watch?v=KPqlulX6ocw&feature=youtu.be>.



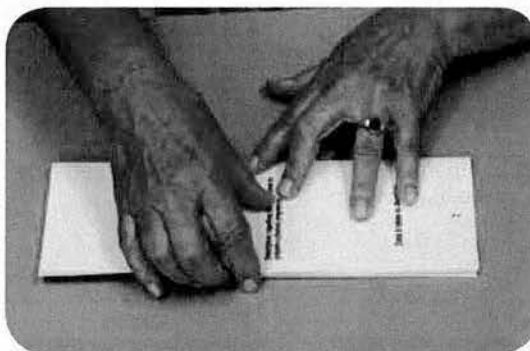
- 1** You will need the A3 template and a pair of scissors. Place the paper in front of you with the printed side down.



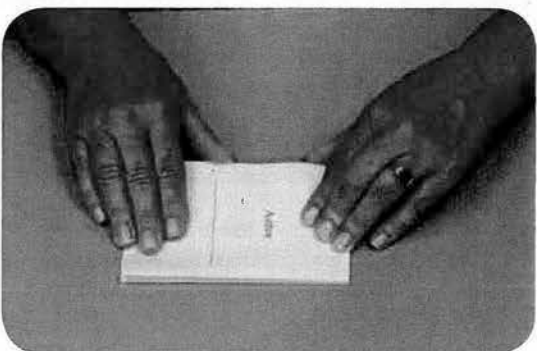
- 2** Fold the paper in half. Make a sharp crease with the edge of your fingernail.



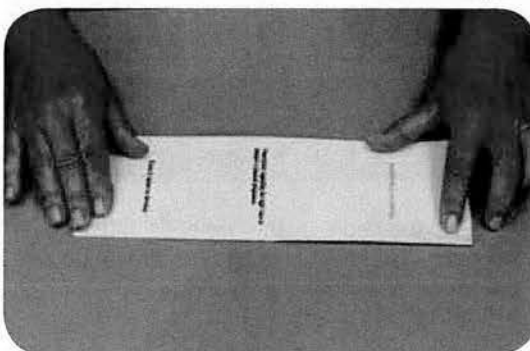
- 3** Open the paper, rotate it 180°, and, once again, fold the paper in half.



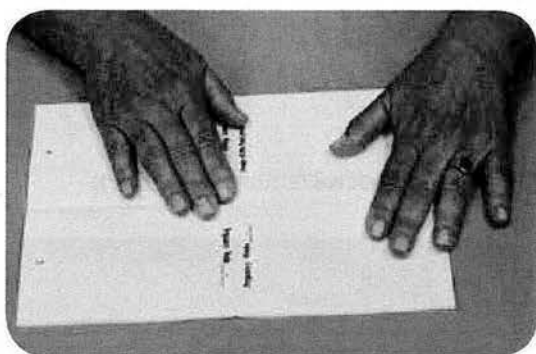
- 4** Leaving the paper folded, fold the paper in half again. Make a sharp crease.



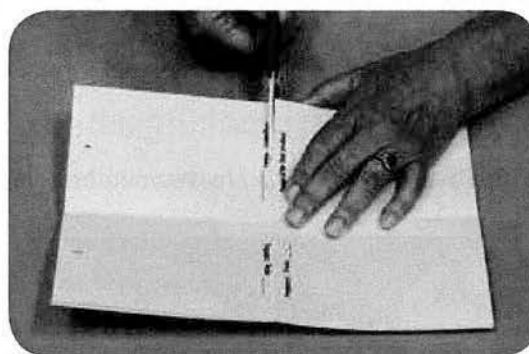
- 5** Now fold it in half once more and make another sharp crease along the fold.



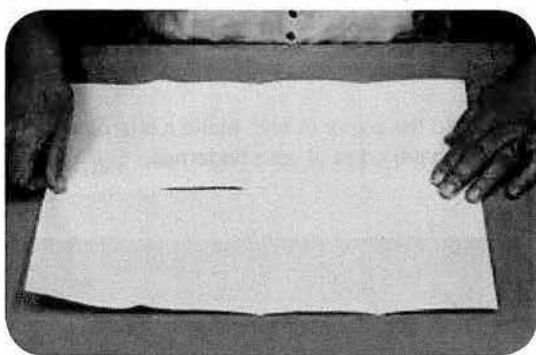
- 6** Unfold the last fold. It should look like this.



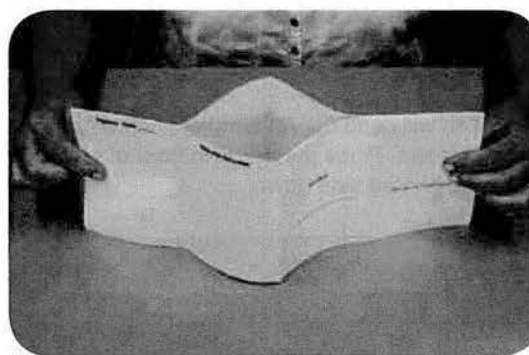
- 7** Unfold it again and it will look like this. Keep the folded edge near your body.



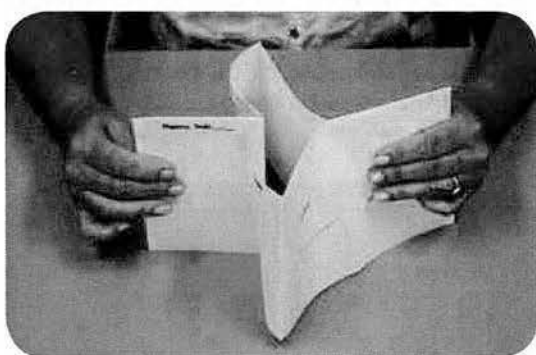
- 8** Make a cut starting from the folded edge right to the centre.



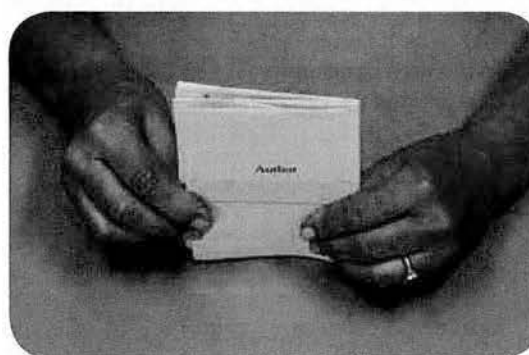
- 9** Open the paper out completely, printed side down.



- 10** Fold in half along the length of the paper and stand the paper on the open edges. You should be able to see that the cut you made has created a gap.



- 11** Hold the paper by the two ends and gently push towards the centre. You should be able to see your book taking shape.



- 12** Press the front cover towards yourself, lay the book flat and press all the edges once again. You are now ready to begin writing your book.

2

Time it takes to develop

Description regarding the right time
to prepare a planned pregnancy.

The Little Book of Conception to Birth

3

Conception:

Author

4

Pregnancy: Weeks ____ to ____

Image of the final product:

7

5

Pregnancy: Weeks ____ to ____

Pregnancy: Weeks ____ to ____

6

LEARNING SEQUENCE

4

Coping with change

- 1 Help Desk
- 2 Stepping into their shoes

AusVELS LEVEL 7HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion*

- › physical, social and emotional changes during adolescence
- › access reliable information about health issues
- › barriers and enablers to accessing health services.

INTERPERSONAL DEVELOPMENT – *building social relationships*

- › strategies to build and maintain positive social relationships.

1 Help Desk



LEARNING INTENTIONS

- To assist students to develop their own coping skills and strategies through the sharing of ideas.
- To engage students in speaking and listening through the Help Desk activity.

Preparation and materials

- ✓ copy of the worksheet 'How I feel about changing', one per group
- ✓ pairs of scissors, one per group
- ✓ voting cards 'Thumbs up, thumbs down', one set for each student (or you can use coloured pens or paper instead of the cards)

Introduction

This activity has two parts: gathering information, and then developing the FAQs and Help Desk. In the gathering information stage, students will attempt to find answers to questions around the changes in their bodies. In the FAQs and Help Desk stage, students are given an opportunity to present their newly acquired information.

Instructions

A Gathering the information

- 1 Divide the class into groups of three or four.
- 2 Hand out the worksheet and ask the groups to complete the T-chart. A brief reminder using the information sheets from the 'Changes' activity in Learning sequence 3 may be helpful here.
- 3 Once this has been completed, cut the worksheet into two parts: the 'what's good' column and the 'what's not so good' column. Now cut the responses to the 'what's good' column into single cards and put them in order, best to least good.
- 4 Ask each group to share their top three responses with the class. Discuss the similarities and differences.
- 5 Now cut the responses to the 'what's not so good' column into single cards and arrange these in order, most to least difficult.
- 6 Collect the top three or four responses (those which are most difficult) from each group.
- 7 Ask all the students to form a circle then place the top responses to the 'what's not so good' column on the floor in the middle.
- 8 Ask students to group any of the responses that are similar, allowing the group that has written the statement to clarify where necessary.
- 9 Each of the original groups is now assigned one of the statements – or group of statements if they are similar.

B Developing the FAQs and Help Desk

- 1 Back at their tables, ask the students to change the statement (or group of statements) into a question. For example, the statement 'I hate pimples!' could become 'What can I do about pimples?' Write the question at the top of a piece of paper – this will be the FAQs sheet.
- 2 Ask each group to brainstorm and record the strategies or advice they would use for dealing with, or helping someone else deal with, the issue.
- 3 To share the information with the class, set up a Help Desk with a panel of experts. The panel should consist of one expert (student) from each group. Experts may use the information from the newly developed FAQs sheets to help answer questions.
- 4 Remaining students can now ask a panel member a question. If they feel the reply is not of much use, they can ask for another possibility from the expert. If the expert or other panel members are unable to help, the Help Desk can take calls from listeners (any student in the class who may have an alternative strategy).

Teacher advice

You might like to hand out some questions on pieces of paper to get the Help Desk activity started. Some examples might be:

- When should I have a boyfriend/girlfriend?
- How can I get my parents to let me go to a mixed party?
- How can I get the girl/guy I like to notice me?
- Is it ever OK to put 'hot' photos of myself on Facebook?
- How can I stop my classmates teasing me about wearing a bra?

Discussion questions

- Where else can young people go to get help?

Brainstorm and record responses on the board. Now read out the suggestions one by one and ask students to use the 'Thumbs up, thumbs down' voting cards (or another method) to indicate which of the sources of help they are likely to use. Include a 'maybe' option (e.g. thumb pointing sideways). If you have an interactive whiteboard, you can use the voting tool for this exercise.

Repeat this procedure, asking students which of the sources they trust. Compare the responses.

- Why don't we always use the sources we trust?

Wrap up

Puberty is a time of change. It's sometimes helpful to be reminded that everyone goes through it, even your parents or carers. It's a time when your parents or carers often worry about how you are getting on but may not feel comfortable asking you about it.

Parents and carers want you to become more independent but they also want to keep you safe. In trying to keep you safe, they may still treat you like a young child. If this time is frustrating for you, it's probably just as frustrating for your parents or carers. Go easy on them so you can build up trust. One way is letting them know what you're up to, even when you think it's not important. If your plans change, ring and let them know you're OK. Another way might be to take on a few more responsibilities at home to show that you are capable and reliable.

It's important for us to know when we need to get help or more information. If we are worried about something or thinking about it frequently, it is probably something we should investigate further. It's OK to ask for help. Look for reliable trustworthy sources, and if you use the internet for advice, check to see where the information comes from. Sites that end in .gov and .org are usually more reliable than .com.

Remember that if you are using social networking such as Facebook to talk to friends about getting help or support, it's possible you may not get a reply in a timely manner.

Of the suggestions we have discussed today, which sources would you use? Do you have other sources of information beyond what we have already identified that you would like to share with the rest of the class?

EXTENSION ACTIVITY >>

Make the FAQs sheets into posters for display in the classroom. The posters could have some blank space at the bottom for other students to add ideas.

Set aside one lesson to invite guests to come and talk to the students. Use the information from the FAQs to work out who you could invite who might contribute to the strategies or solutions.

The list might include:

- student welfare coordinator
- school office staff
- someone from a local health centre
- school nurse.



HOW I FEEL ABOUT CHANGING

what's good	what's not so good

LEARNING SEQUENCE 4 Voting cards • Thumbs up, thumbs down



AusVELS Level 7 Learning Sequence 4

2 Stepping into their shoes

LEARNING INTENTIONS

- To provide students with an opportunity to feel empathy.
- To demonstrate the importance of respectful relationships.

Preparation and materials

- A3 copies of the shoeprints, two per group (or draw the shoeprints on newspaper)

Introduction

Conflict is common and normal in all families. It is important, however, that even in times of disagreement, communication remains open between the parents/carers and the young person. You often hear young people and adults alike say that no one understands them or knows what it's like. If we want young people to understand what it's like for someone else – in other words, be empathetic – we need to not only model empathy but also provide them with opportunities to practice it. During conflict with family members or friends, it's often good to stand back and try to see the situation from another point of view.

In this activity, students will get the opportunity to step into the other person's shoes to see what it's like. To begin, use the family scenarios with an adult and a young person. Move onto the friendship scenarios where the shoes are worn by two young people. In the friendship scenarios, it's sometimes less about a two way dialogue and more about learning how to treat each other in a way that we ourselves would like to be treated. For the friendship scenarios there are a few additional questions.

If possible let the students also come up with short scenarios of their own. Remind students that when writing the scenarios they should not identify real people.

Instructions

- 1 Start by demonstrating the first scenario. Place two pairs of shoes on the floor facing each other about a metre apart. (It may be helpful to label the shoes 'adult' and 'young person'.)
 - a Ask for two student volunteers and have one stand in the shoes of the adult and the other in the shoes of the young person.
 - b Read out the first scenario.
 - c Allow about a minute for both to think of all the reasons for getting what they want. The student standing in the adult's shoes tries to imagine all the things a parent might worry about. The student standing in the young person's shoes tries to think of ways of reassuring the adult that it will be OK.
 - d Start the role play with the young person asking the adult if they can go to the late movie. Allow both to make their arguments.
 - e After hearing from both sides, ask the rest of the class to contribute other arguments they have thought of for either the adult or the young person.
 - f Is there a way to achieve a solution that is OK for both? What might it be?

- 2 Now divide the class into groups of four. Hand out two pairs of shoes to each group, one pair for the adult and one for the young person.
- 3 Within each group, two students will take their place on a pair of shoes while the other two will stand ready to offer helpful arguments if needed.
- 4 Read out one of the scenarios and give the students a minute to think about their arguments. Now allow another three to five minutes for the students to role play and attempt to find a suitable solution to the problem.
- 5 Ask the groups to report back on the solution they came up with and then discuss, as a class, the value of the solutions you have heard. Are there any better?
- 6 Ask the two students in each group who were bystanders in the previous role play to now step onto the shoes. Repeat the role play and class discussion using a new scenario.
- 7 Repeat the role play at least another two times so that each student has the opportunity to play both the part of the adult and also the part of the young person.
- 8 Use the same process (instructions 3 to 5) to investigate the friendship scenarios. Pose the discussion questions below after each scenario.

SAMPLE FAMILY SCENARIOS

- You want to go out with a friend to see a movie but the movie doesn't start until 10:30 pm. Your dad has said no.
- Your mum is giving you a hard time because you haven't cleaned your room in three weeks and today you wore a rather dirty school uniform.
- You don't want your younger brother/sister to come into your room.
- You want to go to a party on Saturday but it's the same night as your family is going to visit your aunt for her birthday.
- Your parents/carers really don't like you hanging around with one particular kid. They think he/she is a really bad influence on you. You want to be allowed to hang out with her/him and be trusted to make good decisions.
- Ask students to come up with their own scenario, one they might like to try out in the role play.

SAMPLE FRIENDSHIP SCENARIOS

- You are having an argument with a friend about who gets to sit where on the bus.
- One of your friends has just written something nasty about your girlfriend/boyfriend on Facebook.
- You and your friends always sit on the same steps at lunchtime. Another student has sat down and you feel this is an intrusion of your space. Sort it out.
- At morning recess, you race out to the basketball court to secure one end of the court for you and your friends. You arrive at the same time as another group does and you have an argument about who gets to use the court.
- You have just received an email from a student at your school wanting to go out with you. You're not interested. Stand in their shoes and think about how it would feel to be that person. What would be the best way of letting them know you're not interested?
- You have been seeing someone for a couple of months but want it to end. Stand in their shoes and then decide how you will tell them it's over.

Discussion questions

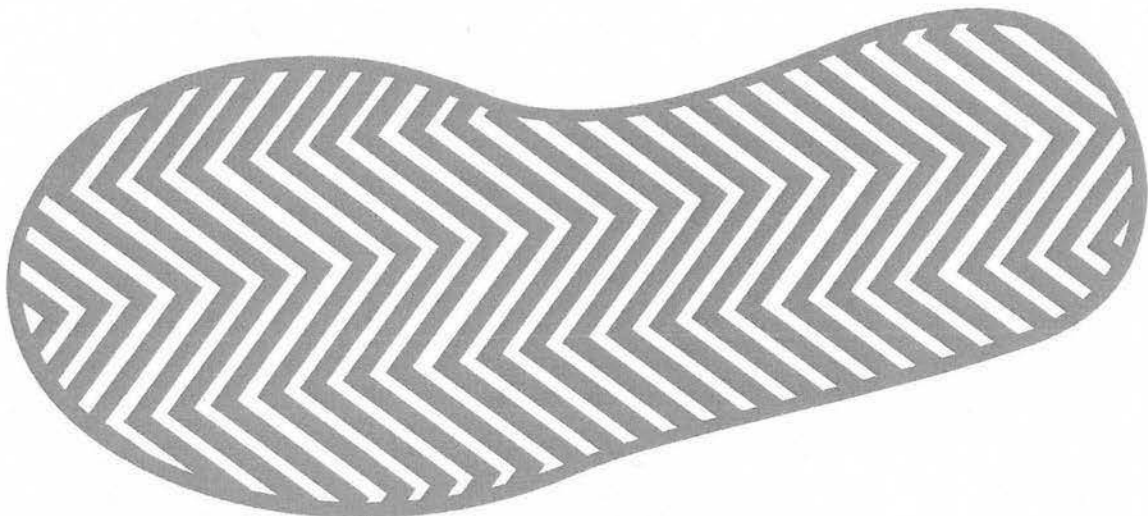
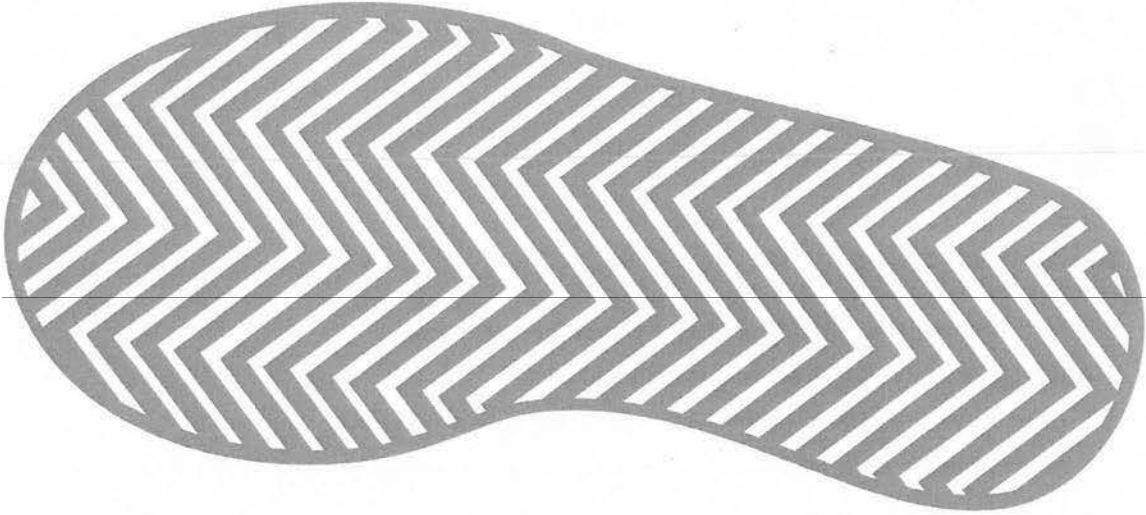
- What's the solution?
- Does it feel fair? If not, how does it feel?
- How could it be better?

Wrap up

Often young people are very private about what's happening in their lives during adolescence. Try talking to your parents and try to answer their questions even when they seem like they are just being nosy. By talking to your parents about what's happening in your life, you are helping them to understand you and increase the level of trust they have in you. As in the scenarios, if we can understand each other better it's more likely we'll find solutions to conflict and that you'll get the support you need when times get tough.

LEARNING SEQUENCE 4 Shoeprints

AusVELS Level 7 Learning Sequence 4



LEARNING SEQUENCE

5

Looking at sexuality

- 1 What is this thing called 'sexuality'?
- 2 What's the message?
- 3 Being 'X' – the importance of fitting in

AusVELS LEVEL 7

HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion*

- › the influence of family on personal identity and values
- › community attitudes and laws influencing the sense of right and wrong
- › sexual health of young people (e.g. safe sex, contraception, abstinence, prevention of STIs).

INTERPERSONAL DEVELOPMENT – *building social relationships*

- › respect for the individuality of others and acknowledgement of diversity of individuals
- › the influences of peers on behaviour
- › strategies to build and maintain positive social relationships.

1 What is this thing called 'sexuality'?



LEARNING INTENTION

- To introduce the concept of sexuality and present new content around this idea.

Preparation and materials

- whiteboard and markers

A definition of sexual health of adolescents

The sexual health of adolescents can be viewed as encompassing the issues of body image awareness, interpersonal relationships, decision-making, and sexual intimacy. Specific factors related to body image might include:

- feeling good about being male or female and feeling comfortable with bodily functions
- interpersonal relationships involving concerns such as being able to communicate feelings to others without being embarrassed and having respect for another's individuality
- decision-making, including being able to decide what is right for oneself and acting in personal best interests, and having a clear sense of personal values and acting in congruence with them
- sexual intimacy might deal with such issues as understanding the difference between sexual feelings and love, and knowing that one's personal feelings deserve respect from others.

(Brick, 1989, cited in Bruess and Greenberg, 2009, p. 7)

Introduction

Introduce the activity by using the information in the following script. You may read it or put it into your own words:

The transmission of information and values about sexuality forms a critical part of preparing students for adolescence and adulthood; however, there are many sources and types of information that young people are faced with which are often conflicting and confusing. The purpose of this activity is to identify the range of definitions and interpretations about sexuality.

The activity following this one in the current learning sequence is a progression of this exercise.

Instructions

- 1 Write the word 'sexuality' on the board.
- 2 Ask the students to brainstorm all the words that come to mind when they think of sexuality.
- 3 Record the responses from the students on the board. If they have a hard time getting started, help by giving a few of your own ideas, suggesting words that refer to sexual behaviour (sexual contact through to intercourse), sexual identity or sexual feelings.
- 4 Review the responses and summarise them to come up with a definition of 'sexuality'.
- 5 Write the following definition on the board:

'Sexuality can be a source of great pleasure and meaning in life. Sexual activity is only one aspect of sexuality. People experience sexuality through their physical feelings, emotions, thoughts, identity, and relationships. Cultural norms, individual experiences, and hormones all influence the way we understand and experience sexuality.'

International Sexuality and HIV Curriculum Working Group, 2009

- 6 Compare and discuss the two definitions.

Wrap up

All people can grow up to enjoy sex lives that are safe and satisfying and that are characterised by dignity, equality, responsibility, and mutual respect.

Through our discussions we see that many factors influence how we feel about our sexuality. Let's consider one of those factors – the media. The media includes films, television programs and ads, books, music and music videos, and electronic games. Our question is: what images do the media generate that influence our attitudes, feelings, and expectations about sexuality? This will be investigated in the following activity, 'What's the message?'

2 What's the message?



LEARNING INTENTION

- To prompt and structure inquiry regarding messages about sexuality.

Preparation and materials

Gather some of the following items and duplicate as necessary so that you have a package of four media items for each group. The media packages do not need to be identical but each item should appear in at least two of the packages for discussion purposes.

Sample media:

- books – a passage or picture from a current adolescent romance novel
 - magazines – pictures of any sort
 - television – pictures of the characters from a variety of programs (these can often be found on the internet)
 - art work advertising films (often found on the internet)
 - cover artwork for CDs
 - lyrics from a current popular song
 - artwork for television ads.
-
- A2 or larger paper, one piece per group
 - coloured markers, one set per group
 - glue sticks, one per group

Instructions

- 1 Divide the class into groups of four or five and hand out the paper, coloured markers, glue sticks and media packages.
- 2 Ask students to arrange and then glue all items along the top of the paper.
- 3 Beneath each item, ask the students to identify who the image is for (the target audience) and then brainstorm a list of words that come to mind. For example, 'nice', 'pretty', 'romantic', 'girlie', 'fun', 'strong' and 'brave'. Allow approximately five minutes for groups to complete this task.
- 4 Display all the lists at the front of the room or in a space where everyone can see the messages.
- 5 Ask students to identify similar messages on the posters and encode these by circling them with coloured markers, using different colours for the groups of similar messages.

Discussion questions

- Why are some of the messages similar? Why are the others different? Think about the limited time the media have available to make an impact, e.g. ads on television may only last 30 seconds. Will this limited time make a difference?
- Look again at the lists. Are there messages meant only for girls or only for boys? Which ones? Why?
- How does it make you feel about being female or male?
- If you were a 14-year-old male who hadn't gone through a growth spurt (in other words, the shortest male in the class) how might these messages make you feel?
- If you were an 11-year-old female who had developed breasts and hips, how might these messages make you feel?
- If a young person thought they might be gay because they often had romantic feelings for a person of the same sex, how would these messages make that person feel?
- Which of these messages might make a person feel uncomfortable talking about sexuality?
- Are there any of these messages that you think give the wrong idea about sexuality and young people? If so, which ones and why? Write a message that better portrays young people and sexuality.

Wrap up

We get messages from everywhere about how we should look, feel, behave, and respond. It's no wonder we can be confused. In what ways does a discussion like the one we have just had help us to decide which messages to consider, listen to, or act on?

3 Being 'X' – the importance of fitting in

LEARNING INTENTIONS

- To facilitate discussion regarding the influence of peers on behaviour.
- To develop an understanding of the importance of respect for the individuality of others.

Preparation and materials

- ✓ A3 paper, one sheet per group
- ✓ coloured markers, one set per group
- ✓ draw grids 1 and 2, as shown below, on the board

GRID 1				
0	0	0	0	0
0	0	0	0	0
0	X	0	0	0
0	0	0	0	0
0	0	0	0	0

GRID 2	
feelings	strategies 'X' might use

Introduction

When we are in new situations we may not know how to act and respond. Often we rely on the messages we receive from one another to try to work out how to 'fit in'. Research tells us that 'fitting in' and 'belonging' are two very compelling forces for young people at this time in their lives. The various strategies we might adopt to try to fit in and belong can help us feel stronger and more secure or can lead us to act in ways that are not so positive for our self-esteem and safety. We have looked at the messages we receive from various sources: what do we remember?

- Messages are all around us; they give us ideas about how to look, act and respond.
- They are sometimes confusing and can be helpful or unhelpful.
- Sexuality is a good thing and it's OK to talk about it in our class.

Instructions

- 1 Divide the class into groups of five and hand out one piece of A3 paper to each group.
- 2 Explain that the 'O's and 'X's in grid 1 on the board represent students in a class at your school.

- 3 Ask each of the groups to discuss and then record their responses to the following two questions:
 - a How would it feel to be 'X', the odd one out?
 - b What are some strategies that 'X' might use to fit in with the rest of the group?
- 4 The students should write the first question at the top of the A3 paper and the second question halfway down.
- 5 Give the students about five minutes to complete this exercise, then – to ensure you hear from all of the groups – ask each in turn to provide just one response to question a). Enter these into the first column of grid 2 on the board. You might get responses like 'scary', 'isolated' and 'lonely'. You may also get some positive answers like 'special' and 'different – in a good way'.
- 6 Use the same procedure to gather ideas regarding possible strategies 'X' might use to fit in and belong. The students may suggest strategies such as: playing sports; joining clubs; choosing music, clothing and hairstyles that are similar to the rest of the group; starting conversations about school events; smiling; making eye contact; and saying hello. If less positive strategies are not put forward by the groups, the teacher should add some examples of these, such as: spreading gossip; performing sexual favours; saying hurtful things on Facebook; picking on someone etc.

Discussion questions

- Are some of the strategies better than others? Which ones? Why?
- Are there any strategies that are risky or problematic in other ways, such as using sexual behaviours to be accepted into a group?
- What behaviours have you seen the 'O's using to deter 'X' from joining in?
- Who is responsible for helping 'X' fit in?
- What could the 'O's do to help 'X' feel more comfortable?

Wrap up

It's important for all of us to have a place where we belong. For people your age, you will still be 'trying on' different groups, and ways to behave and belong, for a good while yet. As you mature, it will become less important to fit in and conform to the crowd, and that makes friendship easier too.

Sometimes it's easy to fit in and feel like you are 'home'. It helps to have a friend or two at school that you feel 'at home' with. If you don't (or even if you do), it's a good idea to have a friend or a club that you are connected to outside of school, for those inevitable times when you have disagreements with your school friends.

For young people questioning gender or sexual orientation, there are support groups that can make all the difference. To find a group in your area use:

- Safe Schools Coalition Victoria – <http://www.safeschoolscoalitionvictoria.org.au/>
- the WayOut Rural Victorian Youth and Sexual Diversity Project – <http://wayout.org.au/>
- Minus 18, a support network for gay and lesbian teenagers all over Australia <http://www.minus18.org.au/>.

For more information on students who may be transgender transitioning, see the DEECD policy 'Gender Identity (students with a transgender or intersex status)', in the *School Policy and Advisory Guide* (2011): <<http://www.education.vic.gov.au/school/principals/spag/health/Pages/genderidentity.aspx>>.

EXTENSION ACTIVITY >>

This might be a good time for the student welfare coordinator to visit the classroom and discuss friendships and relationships, and his/her role in the school.

LEARNING SEQUENCE

6

Health, hygiene and help-seeking

- 1 Health and hygiene essentials
 - A Essential products
 - B Packing my essential travel bag
- 2 Check it out

AusVELS LEVEL 7

HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion*

- › physical, social and emotional changes during adolescence
- › access reliable information about health issues
- › barriers and enablers to accessing health services.

1 Health and hygiene essentials



LEARNING INTENTION

- To consider how changes in the developing bodies of adolescents may affect hygiene habits.

Introduction

It can be embarrassing to talk about the importance of hygiene. It should be emphasised that it is normal for all of us to smell and there are ways we can easily manage body odours and cleanliness in our daily lives. This is important both for our health as well as our social interactions. It is good to build simple hygiene habits into our routine and to not become obsessed with them. Long showers (fifteen minutes or more), for example, are no more effective than short showers (five minutes) if you are actively cleaning yourself.

A ESSENTIAL PRODUCTS

Preparation and materials

- ✓ store catalogues, particularly ones from supermarkets and chemists
- ✓ magazines
- ✓ newspapers
- ✓ pairs of scissors, one or two per group
- ✓ glue sticks, one or two per group
- ✓ coloured markers, one set per group
- ✓ A3 or A2 copies of the worksheet 'Health and hygiene product search', one per group

Instructions

- 1 Divide the class into groups of six.
- 2 Hand out copies of the catalogues, magazines and newspapers to each group, along with scissors, glue sticks, markers and the worksheets.
- 3 Ask the groups to draw and/or cut and paste images of the following hygiene products. (Each member of the group looks for one type of item.)
 - 3 hair products
 - 3 skin products
 - 3 hair removal products
 - 3 dental products
 - 3 feminine hygiene products
 - 3 odour/fragrance products
- 4 After students have drawn or glued images into the relevant boxes they can complete the rest of the worksheet.

- 5 Ask each group to report back their findings. To save time, have each group report back on one type of item, e.g. group one on hair products, group two on skin products, etc.
- 6 After each report, ask the rest of the class if they can suggest changes, e.g. products that were missed that should be considered.

? Discussion questions

- o Would cost make a difference to someone using a particular product?
- o If *you* need this product, who buys it?
- o Does being female or male make a difference to someone buying or using a particular product?
- o Why are some of the items important now when two years ago they were not so important?

B PACKING MY ESSENTIAL TRAVEL BAG

Preparation and materials

- worksheet 'My essential travel bag', one per group
- completed worksheet 'Health and hygiene product search', one per group
- markers, one per group

Instructions

- 1 Use the completed worksheet from part A as a guide.
- 2 In groups, ask students to discuss: If you had five minutes to pack your travel kit before leaving home for a wilderness adventure (no electricity!), what would be the essential items you would need to maintain good health and hygiene? List these items on the front of 'My essential travel bag'.

? Discussion questions

- o Did this activity help us to decide what's most important for good health and hygiene?
- o Did we have to leave out items that would be nice but not absolutely necessary?
- o Are there some products that we don't need at all?

Wrap up

So what is essential for good hygiene and health? We have looked at a number of products that often claim to provide elements of this. From our discussion we have seen that some items are essential while others, such as hair products, help us feel better about our body image. It's important to be wise consumers. Some items, such as skin care products, are sold only in pharmacies for a good reason: it gives you – the buyer – an opportunity to ask the pharmacist questions about the product. Remember that if you have concerns about your health, it's important to get advice from someone you trust.

Think of the people you would ask for advice or help if you had a health concern.

Teacher advice

It's important to remember that there can be circumstances outside a student's control that contribute to their health and hygiene. It might be not having the money to buy some of the products that the rest of the class see as important. In this circumstance, providing ideas about cheaper alternatives as part of the class discussion might be useful. It may be that home life is complicated and things such as providing clean school clothes or toiletries are not seen as a priority. As part of the discussion, offer suggestions for getting around this.

LEARNING SEQUENCE 6 Worksheet • Health and hygiene product search

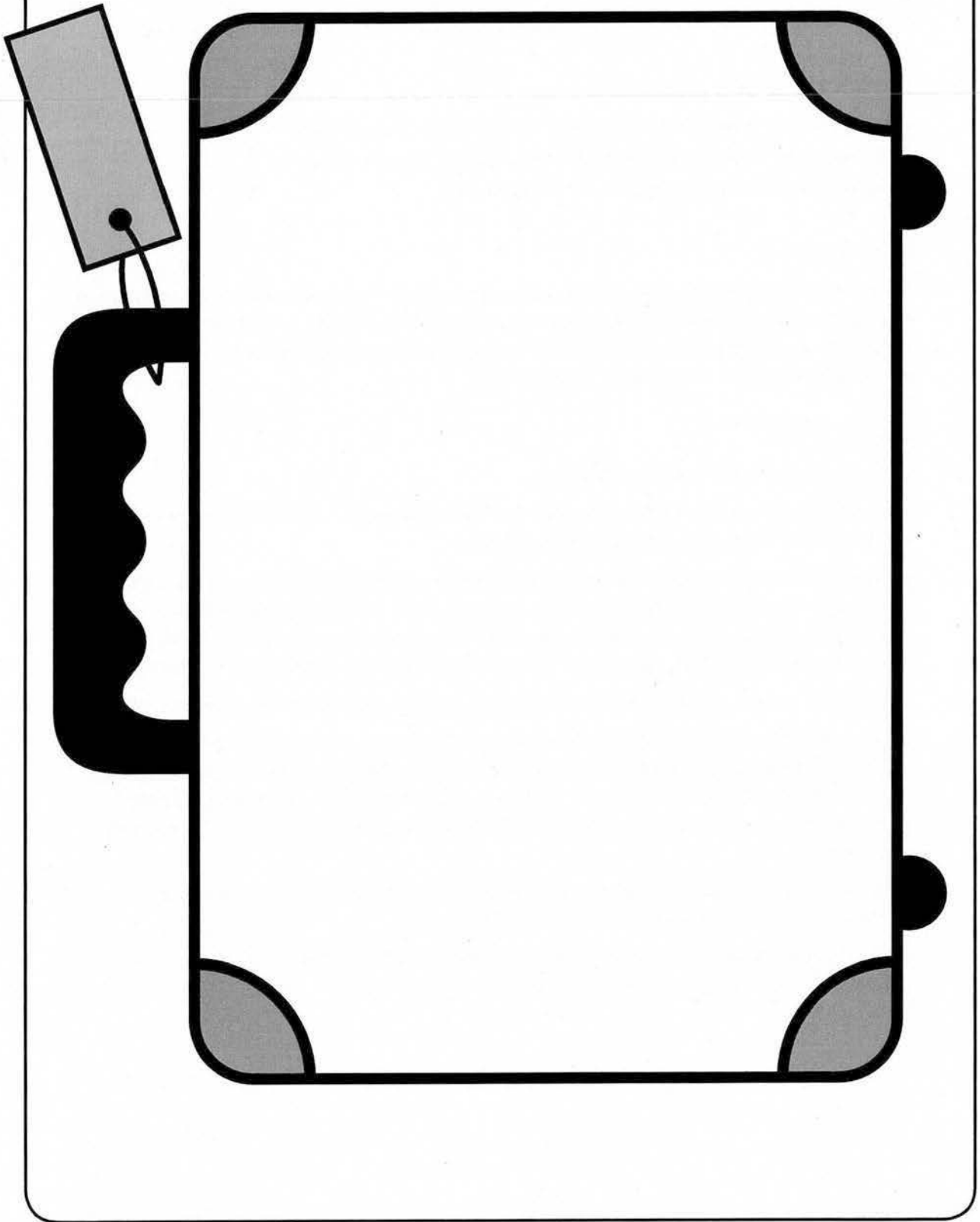
	Who uses this?	What's it for?	Does it work?	What is the price?	If I use it, will I fit in?	Could I get by without it and still fit in?
Draw or glue images of hair products						
Draw or glue images of skin care products						
Draw or glue images of hair removal products						
Draw or glue images of dental products						
Draw or glue images of feminine hygiene products						
Draw or glue images of odour/fragrance products						

'Health and hygiene product search' modified from *Volatile Solvents*, DEECD, 2000, p.60.

LEARNING SEQUENCE 6

Worksheet • My essential travel bag

AusVELS Level 7 Learning Sequence 6



2 Check it out



LEARNING INTENTION

- o To identify and evaluate the sources of information that students use for help-seeking.

Preparation and materials

- ✓ A4 copies of the worksheet 'Sources of information', one per student
- ✓ A3 copies of the worksheet 'Sources of information', one per group
- ✓ prepare a copy of the worksheet grid on the board

Introduction

There are many people and places where young people can go to get help, even if the information they want or the problem they have seems very personal. Who they ask and where they go often depends on a number of factors. This activity is designed to help students think critically about sources of information when making these choices.

Instructions

- 1 Divide the class into groups of about five.
- 2 Hand out both versions of the worksheet 'Sources of information'. The A4 size is for each student and the A3 copy is for the group response.
- 3 Ask the students to imagine they have a friend who needs help with a personal problem, perhaps a relationship or health problem. Ask each group to read through the list of sources on the group worksheet and tick or circle the ones they would use. The group should then brainstorm and record as many 'other' places as they can think of which may be useful.
- 4 Once that is done, ask the group to complete the rest of the worksheet *except for the rating*.
- 5 Now, as a class, go through the list from the worksheet to see which sources the groups said they would use. Fill in the 'other' on the grid on the board by asking each group to contribute one additional source of information. Continue around the groups until all their possible sources have been listed. Groups may now like to add sources that were missing from their original list.
- 6 Allow a couple of minutes for students to complete the group worksheet, if they haven't already, and the personal worksheet, if they wish.
- 7 Groups now rate their sources of information. Students filling in their personal worksheet may rate the sources differently than their group.

Discussion questions

Is there just one right source to use? Why is it important to have a variety of sources of information or help?

Where at school could you get help? Can you list five people you could ask for help if you needed to?

Teachers will need to remind the class about disclosures. It would be good for teachers to have ready a list of local people/health centres etc. to give to their students and some reliable websites to guide them to. For example, Better Health Channel, which includes a wealth of health information and a searchable database of health-related services:

http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/services_and_support?open.

After the discussion, students may need to have a last look at their personal worksheets to make changes.

EXTENSION ACTIVITY >>

Read one of the scenarios below, then ask each group to use the worksheet – bearing in mind the ratings – to come up with one source of information they would recommend to a friend in this situation. Ask groups to feed back their ideas to the class and respond to these questions:

- Why did you choose that source?
- What makes one source better than another?
- Did you choose your top-rated source?

Read another scenario and repeat the process.

Alternatively, write each of the sources from the board onto pieces of card or paper and place them in different spots around the room. After reading the scenario, ask students to move to the source they think is most appropriate. Students can share with the others standing at the same source why they chose this one and if it was their top-rated source. Ask for feedback to the class from some of the groups. Read out the next scenario and repeat the process.

SCENARIO 1: Your friend has just told you they might have some sort of infection around their genitals. There seems to be what looks like a pimple and it's very sore and red.

SCENARIO 2: You and a friend are walking to the bus when she starts crying. You ask what's wrong and she says she thinks she might be pregnant and doesn't know what to do. She doesn't want to tell her parents unless it's absolutely necessary.

SCENARIO 3: Your friend tells you he/she is same-sex attracted and would like to get some advice about how to tell his/her parents.

Sources of information	Is it easy to use or travel to?	Do I feel OK using this source?	Does it give me personal advice?	Will I be taken seriously?	Will I have to say who I am?	Will what I say be kept confidential?	How reliable is it?	What's my rating? 5-1 5 (good) 1 (poor)
local health centre								
family doctor								
internet								
school welfare person								
close friend								
parent or carer								
brother or sister								
grandparent, aunt or uncle								
Other								
Other								
Other								
Other								
Other								

Teacher's choice learning sequences

These activities have been provided as further learning that the teacher may like to include at this level, determined by the teacher's evaluation of the student learning needs. The activities cover:

- female and male reproductive organs
- menstruation
- reproduction
- sexual activity
- some prevention techniques.

LEARNING SEQUENCE

1

Establishing common ground – revision or new content

- 1 Female and male reproductive organs
- 2 Reproduction

AusVELS LEVEL 7

HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion*

- › physical, social and emotional changes during adolescence.

1 Female and male reproductive organs



LEARNING INTENTION

- Examine the human reproductive process in order to identify the basic parts of the human reproductive system.

Preparation and materials

- ✓ coloured markers, one set per group
- ✓ paper about 1.5 metres in length, one piece per group
- ✓ copies of diagram 'Female reproductive system', one per female group
- ✓ copies of information sheet 'The female reproductive system – how does it work?', one per female group
- ✓ copies of diagram 'Male reproductive system', one per male group
- ✓ copies of information sheet 'The male reproductive system – how does it work?', one per male group

Introduction

This activity is to be used as revision and/or to increase student knowledge. It is useful when the desired outcome is a shared understanding of this particular area of sexual development.

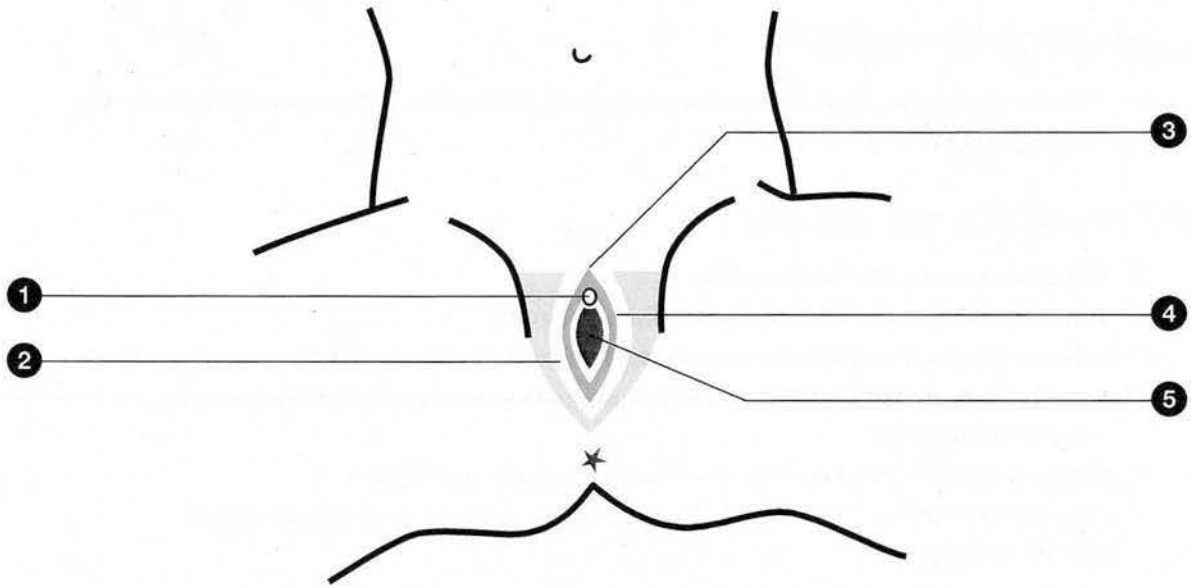
It may be easier to form same-sex groups when preparing the body maps, as students will be more familiar with changes in their own bodies. It is important, however, to have information regarding both sexes. In single-sex schools it will be necessary to ask some groups to do the outline of the other sex.

Introduce this activity by saying that some of the students may already know the information presented in this lesson while for others it may all be new but for most of them it will be a bit of both.

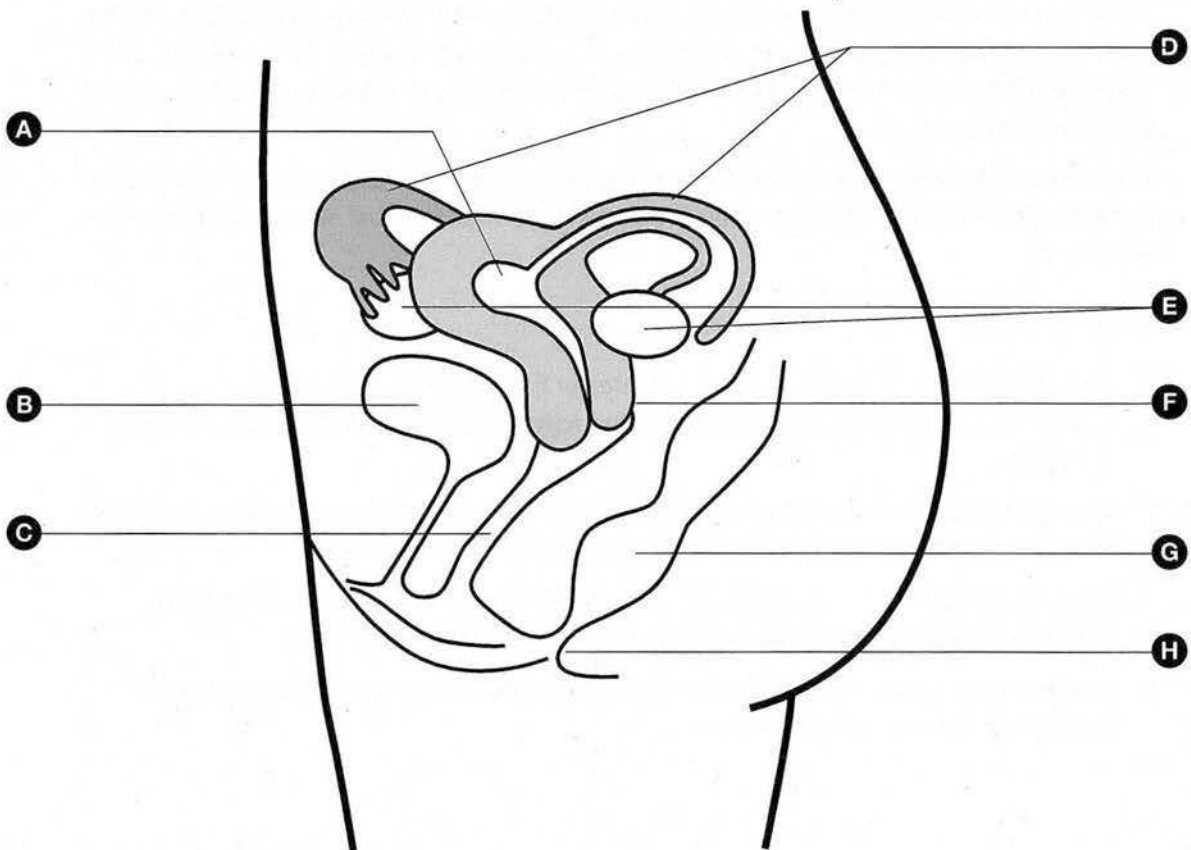
Instructions

- 1 Divide the class into same-sex groups of three or four. Assign each group the task of representing either the female or male reproductive systems according to the gender of the group.
- 2 Give each group a set of markers and a large piece of paper, along with copies of either the male or female reproductive system diagram and information sheets.
- 3 Ask each group to draw the outline of either the female or male reproductive organs. They should refer to the diagrams and include as much detail as possible.
- 4 Students now need to label and colour in the reproductive organs as described in the accompanying information sheets.

Female genitalia



Female reproductive system



The female reproductive system – how does it work?

On your diagram of the female anatomy, label and colour the internal and external organs according to the instructions below. Vocabulary words that need to be written on the diagram have been *italicised*.

Start at the very bottom of your diagram. The opening leading up into the internal reproductive system is called the *vagina* (c). The *vagina* is a soft, muscular elastic tube. Its inner lining is soft and moist. During sexual arousal, the walls of the *vagina* secrete a lubricant to assist in intercourse. The *vagina* also functions as the birth canal for a baby, and allows menstrual flow to exit the body from the uterus. Colour the *vagina* dark blue.

The *uterus* (a) is a pear-shaped organ about the size of a woman's fist that stretches to house the baby, placenta and amniotic fluid during pregnancy. It is very strong, muscular and stretchable. Colour the *uterus* pink.

At the top of the *vagina* is the *cervix* (f) which is the bottom of the *uterus*. This is slightly open in women who are not pregnant, but is plugged during pregnancy to avoid infection. When a baby is ready to be born, the *cervix* opens to a diameter of 10 cm. Colour the *cervix* purple.

The thick tissue inside the entire *uterus* is the *uterine lining*. If fertilisation does not occur, this lining is shed every month. This is called menstruation, the process by which the uterus rids itself of its old lining, and prepares for the possibility of conception the following month. About 14 days after ovulation, the body begins to shed the *uterine lining*, which is made up of blood and fluid. This is commonly called a 'period'. Colour the *uterine lining* red.

Follow the tube out of the *uterus* to the right and left on your diagram. These are called the *fallopian tube* (d). The *fallopian tubes* carries the egg from the *ovary* down to the *uterus*. This journey usually takes about three days. Usually, conception (joining of the sperm and egg) occurs in the *fallopian tube*. Colour both *fallopian tubes* on the diagram orange.

The finger-like structures at the end of the fallopian tube are called *fimbria*. The internal, very tiny hair-like structures inside the *fallopian tube* are called *cilia*. The *cilia* help the egg move down the *fallopian tube* from the *ovary*. Outline the *fimbria* and the *cilia* in dark orange.

Two egg-shaped organs on either side of the uterus are the *ovaries* (e). These are the female counterparts to the male testicles. An *ovary* is about the size of an almond. When a woman is born, the *ovaries* already contain all the ova (eggs) she will ever produce. There are up to 400,000 ova. Unlike the testicles, *ovaries* only house eggs. They don't produce them. The *ovary* releases one ovum (a single egg) each month. This process is called ovulation. When the *ovary* releases the egg it travels down the fallopian tube, with help from *cilia*. If a sperm does not fertilise the egg, it will not adhere to the *uterus* wall. As a result, menstruation will occur. Colour each *ovary* light brown, and label your diagram on the left side.

The remaining labels are the *bladder* (b), the *rectum* (g) and the *anus* (h) – these are not reproductive organs.

Female genitalia

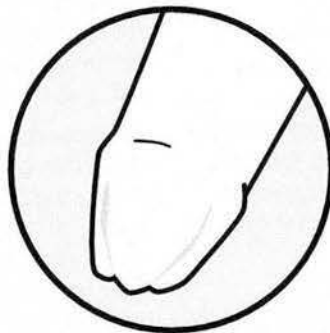
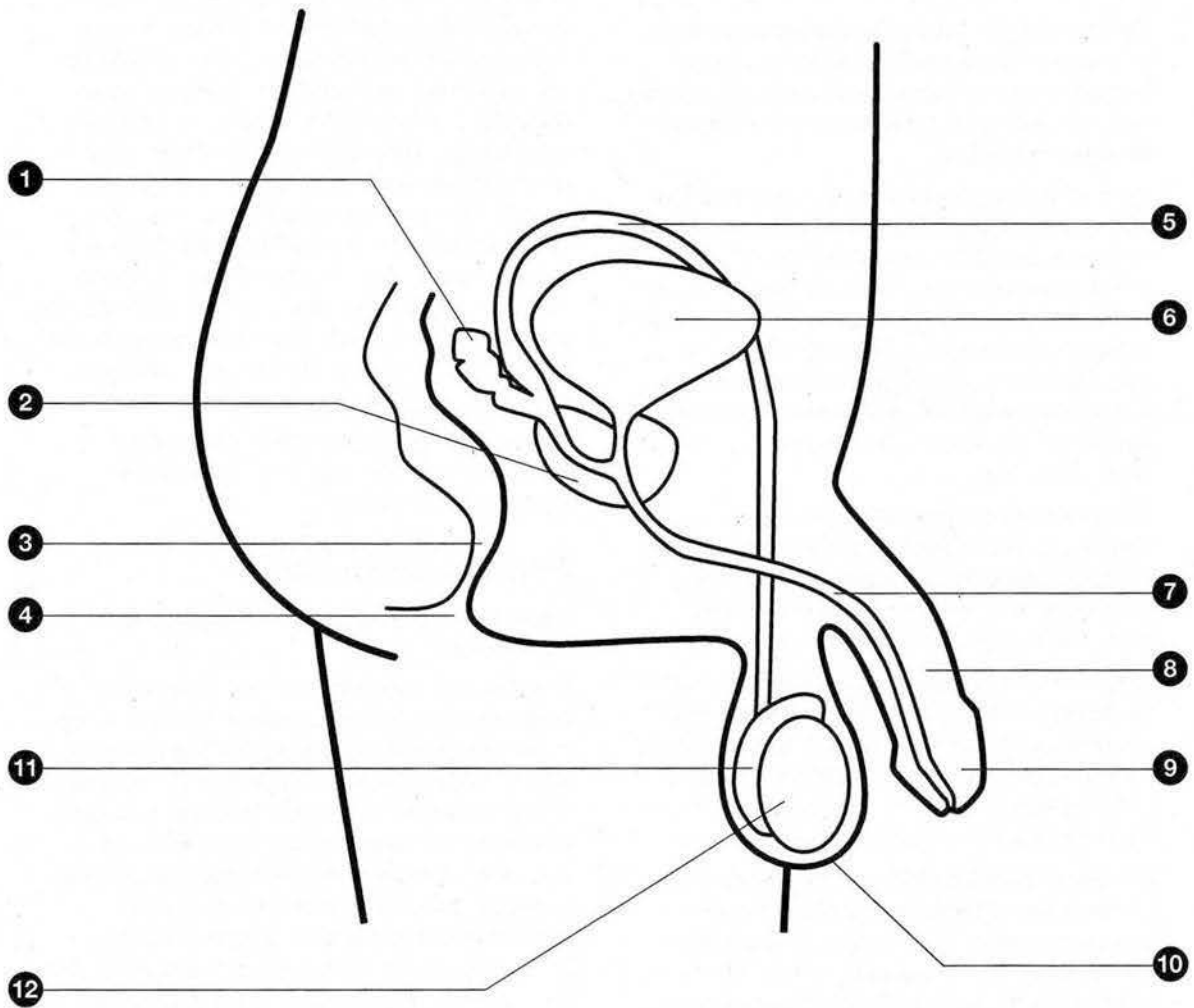
Label these parts using the following information.

The diagram above the internal organs is a diagram of the female genitalia. At the very top is the opening of the *urethra* (1). The *urethra* is a tube leading from the bladder to the outside of the body and its function is for passing urine. Above this is the *clitoris* (3). The *clitoris* is the part of the female body that is most responsive to sexual stimulation often resulting in an orgasm (not the vagina as is often thought). Below the *clitoris* is the vaginal opening (5). This is very elastic to allow for the penis to enter during sexual intercourse and for the delivery of the baby during childbirth.

The external female genitals are collectively referred to as the *vulva*. The outer lips of the *vulva* are the *labia majora* (2). These are pads of fatty tissue that wrap around the female genitalia. The *labia majora* are usually covered with pubic hair.

The *labia minora* (4) are the inner lips of the *vulva*, thin pieces of tissue within the *labia majora* that fold and protect the *vagina*, *urethra*, and *clitoris*. The appearance of *labia minora* can vary widely, from tiny lips that hide between the *labia majora* to large lips that protrude (these variations are normal). Both the *inner and outer labia* are quite sensitive to touch and pressure.

Male reproductive system



Uncircumcized penis

The male reproductive system – how does it work?

On your diagram of the male anatomy, label and colour the internal and external organs according to the instructions below. Vocabulary words that need to be written on the diagram have been *italicised*.

Start at the lower right-hand side of your diagram. This special sac that houses the two *testicles* is called the *scrotum*. Colour the *scrotum* in blue pencil or marker. The *scrotum* is a sac of loose skin divided into two parts. Each part contains a *testicle*, *epididymis* (the small kidney-shaped gland at the top of the *scrotum*), and the end of the *vas deferens*. Label the three words *epididymis* (11), *testicle* (12) and *scrotum* (10) at the lower right-hand side of your diagram. Colour the *epididymis* purple. Each *testicle* contains tiny tubes that are continuously creating sperm throughout a man's life. When puberty occurs, sperm move to the *epididymis* to mature.

The *vas deferens* (5) allows the sperm to move up to the *seminal vesicle*. Follow the *vas deferens* tube up to the top of the diagram. Colour the entire *vas deferens* dark green, but be sure to **stop** colouring as the *vas deferens* tube enters the penis.

The large egg-shaped organ in the centre of your diagram is the *bladder*. This organ stores urine until it can be expelled from the body. It is not considered part of the reproductive system. Label the *bladder*, but leave it uncoloured.

As the *vas deferens* curves around the top of the *bladder* and back down again, it passes the *seminal vesicle*. This gland is oblong-shaped, and is located behind the *bladder* on your diagram. The *seminal vesicle* (1) produces fluids that activate sperm. Colour it light blue.

The *prostate gland* (2) is located just below the *bladder* (6). It supplies most of the liquid that combines with the sperm prior to ejaculation. When a man is sexually aroused to the point of orgasm, the fluid from the *prostate gland* combines with the sperm to make semen. Strong muscle contractions in and around the *prostate gland* contract rapidly to force the semen out of the *urethra*. Colour the *prostate gland* orange.

Just under the *prostate gland* rests a very small round gland called the *Cowper's gland*. (Not seen on the diagram). This gland secretes a fluid that removes any acidity from the *urethra* just before ejaculation. This ensures that the sperm have the best chance of living.

The tube leading from the various glands down the length of the *penis* is called the *urethra* (7). The *urethra* is the special passageway that allows urine to be voided from the *bladder*, and allows semen to travel out of the body during sexual intercourse. Both urine and semen cannot be in the *urethra* at the same time.

During an erection, a small valve at the entrance from the *bladder* seals it off. Colour the *urethra* light green.

The organ in which the *urethra* is housed is called the *penis* (8). The *penis* has spongy tissues containing small blood vessels and nerves. During sexual arousal, the spongy tissue fills with blood, and the *penis* hardens. This is called an erection. An erection is a necessary part of human reproduction. It allows the man to insert his penis into the woman's vagina, which enables semen to reach the egg inside the woman's reproductive system.

At the very tip of the penis is the *glans* (9), which is the head of the penis. This part of the male reproductive system may or may not be covered by *foreskin*. If the male is circumcised, the *foreskin* will not cover the *glans*. Many parents now choose not to circumcise their sons, while other parents do. Colour the area of the *glans* yellow.

The *rectum* (3) and the *anus* (4) are not reproductive organs.

(Adapted from Alberta Health Services <<http://www.teachingsexualhealth.ca/>>
<http://www.teachingsexualhealth.ca/media/lessons/7_SexualDevelopmentLess1.pdf> .)

2 Reproduction



LEARNING INTENTIONS

- Examine the human reproductive process in order to:
 - describe the process of menstruation
 - describe the process of sperm production
 - describe how pregnancy can occur.
- Recognise misunderstandings associated with sexual development.

Preparation and materials

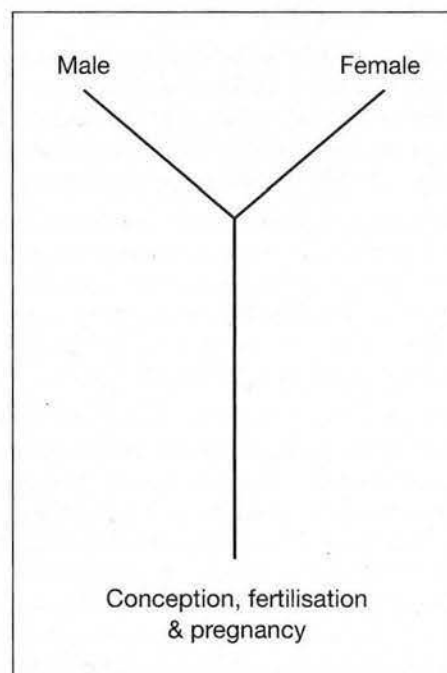
- ✓ open floor space
- ✓ masking tape or chalk
- ✓ cards 'Reproduction', one set
- ✓ slides for menstrual cycle, sperm production, conception, implantation

Introduction

This activity is to be used as revision or to increase student knowledge. It is useful when the desired outcome is a shared understanding of this particular area of sexual development.

Instructions

- 1 Draw a Y-shaped continuum on the floor using masking tape or chalk, covering a wide enough area for the class to be able to sit along its lines.
- 2 Label one arm at the top 'MALE' and the other 'FEMALE'. Write 'CONCEPTION, FERTILISATION and PREGNANCY' at the bottom of the 'Y', as in the example below.
- 3 Hand out one 'Reproduction' card per student until all cards are distributed.
- 4 Have students arrange themselves in the correct order along the 'Y' continuum. Once they feel they are in the proper order, ask them to sit down along the lines.
- 5 Go through the cards together and make any necessary corrections to the order according to the slides and the table below, 'Human reproduction on the "Y" continuum'.



(Adapted from Alberta Health Services <<http://www.teachingsexualhealth.ca/>> <http://www.teachingsexualhealth.ca/media/lessons/7_SexualDevelopmentLess1.pdf>.)

Human reproduction on the 'Y' continuum

FEMALE axis – menstruation		MALE axis – sperm production	
1	lining of uterus is shed (day one of menstrual flow)	1	sperm made in testicles
2	lining of uterus thickened with blood	2	sperm mature in epididymis
3	ovulation occurs (egg released from ovary)	3	sperm travel up vas deferens
4	egg travels through fallopian tube	4	sperm mix with seminal fluid to make semen
5	egg enters the uterus	5	sperm leave the penis (ejaculation)
6	egg dissolves if unfertilised		
7	lining of uterus is shed (day one of menstrual flow)		

FERTILISATION, CONCEPTION and PREGNANCY axis	
1	sperm enters vagina
2	sperm travels up the vaginal canal
3	sperm meets egg in the fallopian tube (fertilisation)
4	fertilised egg travels down the fallopian tube into the uterus
5	fertilised egg attaches itself to the lining of the uterus
6	fertilised egg uses lining of the uterus for nourishment
7	fertilised egg takes nine months to grow into a full-term baby

Discussion questions

Following the activity, hold a class discussion around the following questions. The teacher can use the points provided to address these questions with their students.

What else do you know about menstruation?

- It can begin as early as eight and as late as 16.
- Usually one egg is released each menstrual cycle. If more than one egg is released, and if they are fertilised, it means a woman may have a multiple pregnancy (twins etc.). If twins are a result of two eggs being fertilised, they are called fraternal twins. Identical twins happen when a fertilised egg splits into two before the cells begin dividing.
- An egg can live 12–24 hours from the time of ovulation.
- Girls need to be aware of good hygiene (using pads etc.) to ensure healthy practices during menstruation.
- Cramps can be a part of menstruation and can be alleviated using wellness methods like exercise or a hot water bottle. For severe cramps, your doctor may prescribe medication.

What else do you know about sperm production?

- Sperm cells mature at about 15–16 years of age.
- Sperm production and ejaculation first happens at around 12–14 years of age.
- ‘Wet dreams’ are ejaculations that occur while sleeping. It is normal to experience these, or not to experience these.
- As many as two million sperm can be released during each ejaculation.
- Sperm can live inside a female’s body for three to seven days from the time of ejaculation.

Will a pregnancy occur every time sexual intercourse occurs?

- No. Pregnancy only happens if a sperm fertilises an egg and if the fertilised egg implants in the uterine wall.
- This can happen if intercourse takes place when a female is ovulating.
- Women are most likely to become pregnant if intercourse happens around the middle of the menstrual cycle. The length of the menstrual cycle is different for each woman, so it is difficult to predict.

What do menstruation and sperm maturation make possible?

- Menstruation and sperm maturation are indications that a person can produce a baby.
- It is important to remember that ovulation occurs before bleeding; therefore, a girl can get pregnant before her first period.

Although the body is capable of producing a baby once menstruation and sperm maturation occur, why would most people wait until they are much older to have a baby?

- Discuss issues surrounding the need to be emotionally, educationally or financially ready to parent. There are also health issues for the baby and the mother associated with an early pregnancy, such as low birth-weight babies.

LEARNING SEQUENCE 1

Cards • Reproduction



Lining of the uterus shed
(day 1 of menstrual flow)

Ovulation occurs
(eggs released from ovary)

Lining of the uterus thickens with blood

Egg travels through fallopian tube

Egg enters the uterus

Egg dissolves if unfertilised

Lining of uterus shed
(day 1 of menstrual flow)

Sperm made in testicles

Sperm mature in epididymis

Sperm travel up vas deferens

AusVELS Level 7

Learning Sequence 1

TEACHER'S CHOICE

LEARNING SEQUENCE 1

Cards • Reproduction



Sperm mix with seminal fluid to make semen

Sperm leave the penis
(ejaculation)

Sperm enters the vagina

Sperm travels up the vaginal canal

Sperm meets egg in the outer portion of the fallopian
tube (fertilisation)

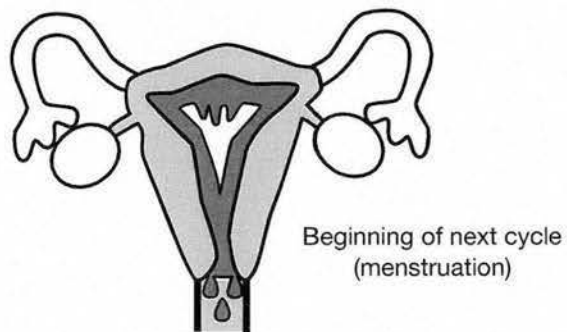
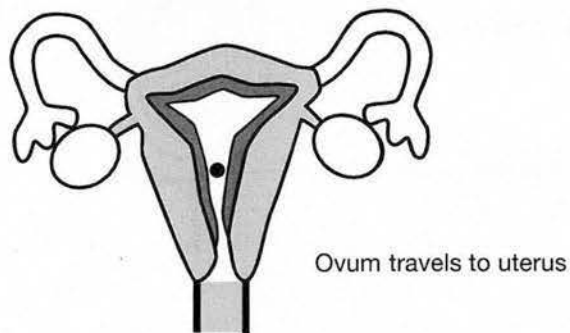
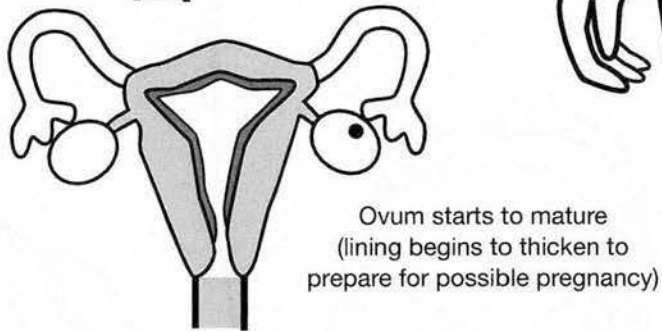
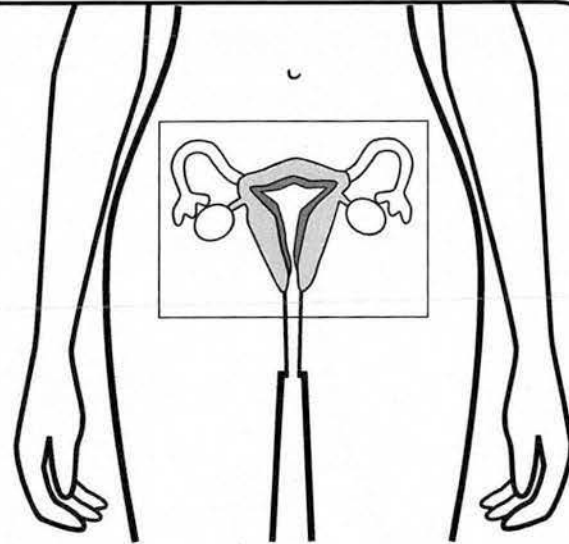
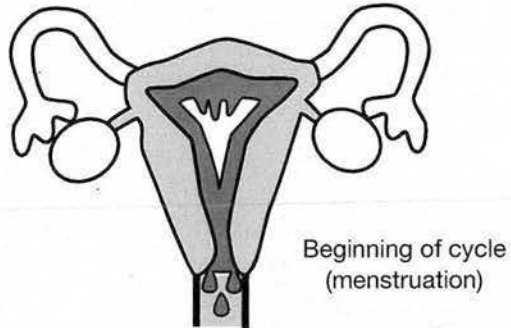
Fertilised egg travels down the
fallopian tube into the uterus

Fertilised egg attaches itself
to the lining of the uterus

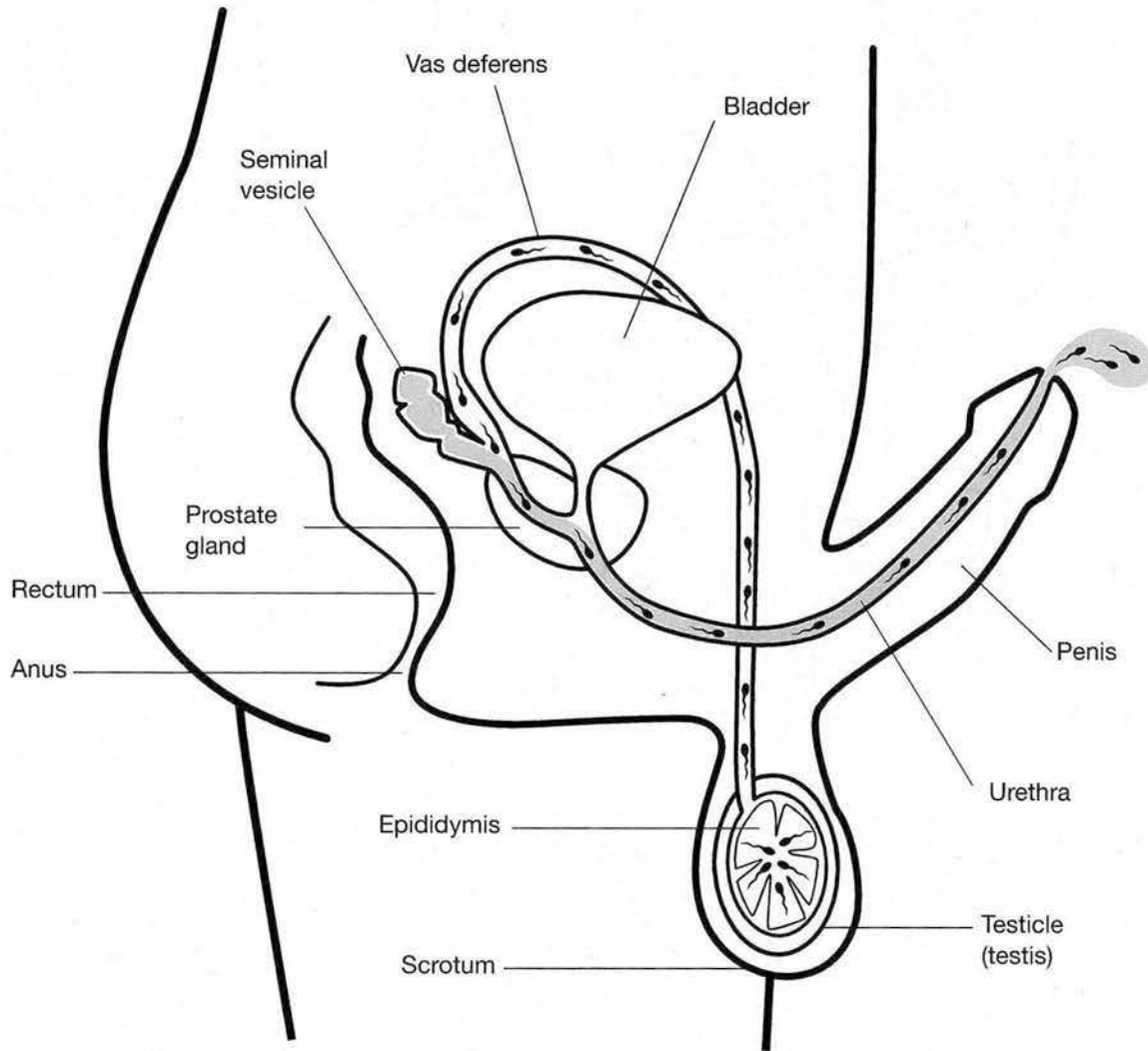
Fertilised egg uses lining of the uterus
for nourishment

Fertilised egg takes nine months to grow
completely into a full term baby

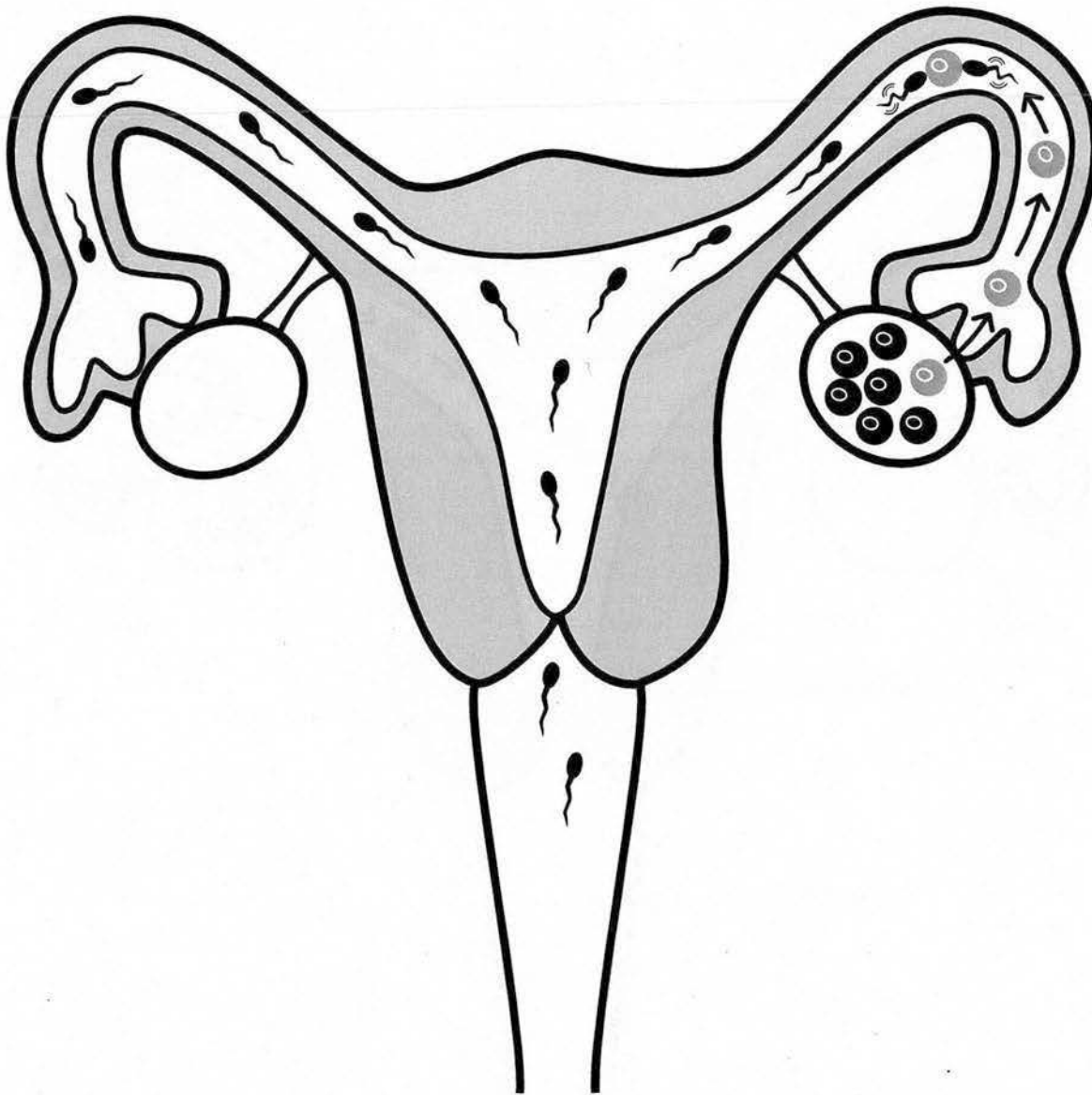
The menstrual cycle



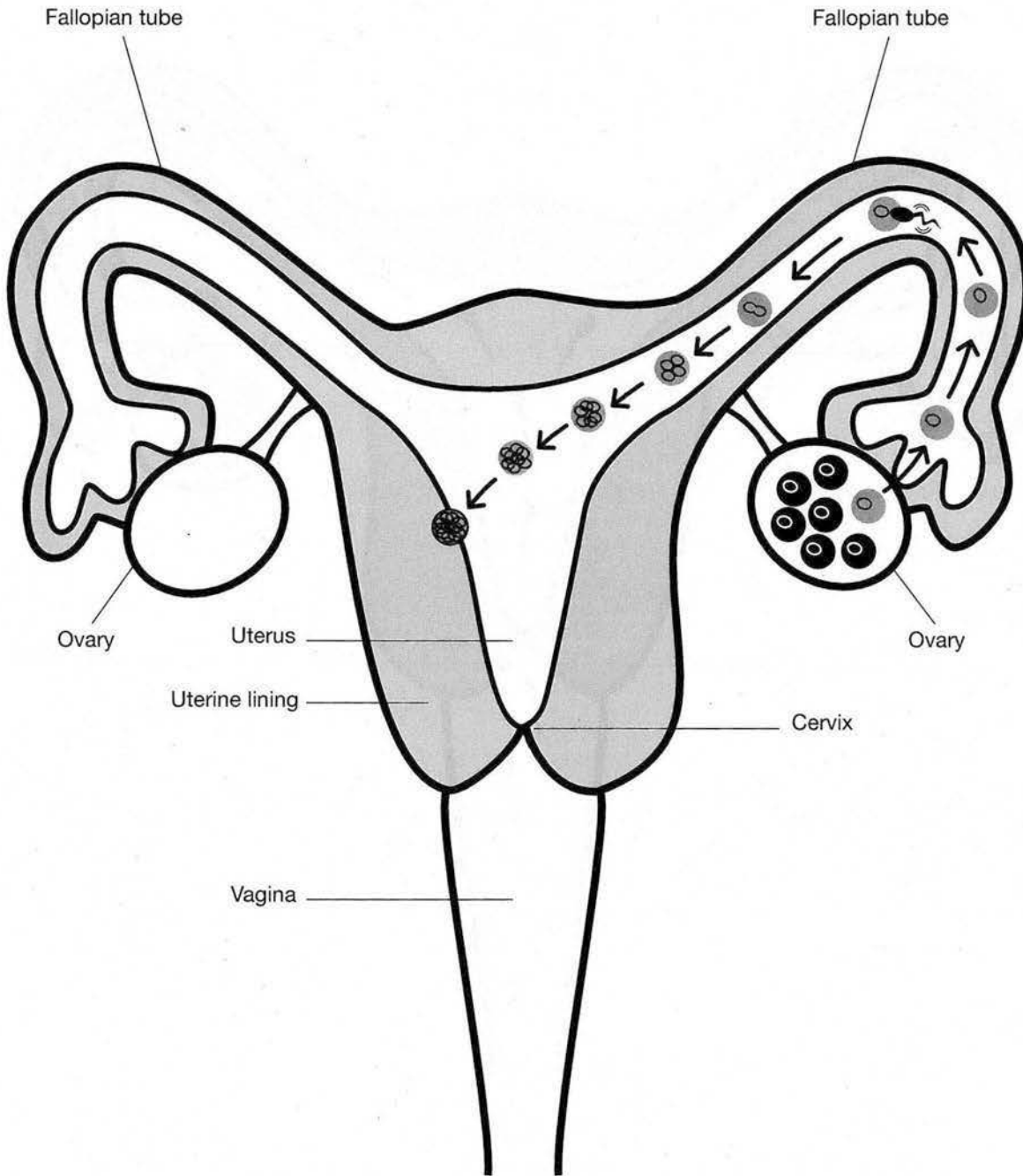
Sperm production



Conception



Implantation



LEARNING SEQUENCE

2

Another aspect of sexuality and associated responsibilities

- 1 The 'sex' in sexuality
- 2 Prevention – the responsibilities of being sexually active

AusVELS LEVEL 7

HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion*

- › sexual health of young people (e.g. safe sex, contraception, abstinence, prevention of STIs).

AusVELS LEVELS 9 and 10

HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion*

- › sexuality and sexual health, e.g. safer sex practices, sexual negotiation, same-sex attraction and the impact of alcohol on sexual and personal safety.

1 The 'sex' in sexuality



LEARNING INTENTION

- To provide young people with a more complete context for sexual activity and accurate information that resonates with what they already know.

Preparation and materials

- ✓ copies of worksheet 'Anatomy and sexual pleasure', one per student
- ✓ copies of information sheet 'How it all works', one per student
- ✓ A3 (or larger) copies of the worksheet 'Anatomy and sexual pleasure', one per group
- ✓ coloured markers, one set per group

Introduction

There is no need for young people to feel that sexual intercourse is something they should be having. The majority of young people at this age are not, in fact, having sex. The 4th National Survey of Australian Secondary Students conducted in 2008 reported that just over a quarter (27 per cent) of year 10 students had ever engaged in sexual intercourse (Smith et al. 2009).

That's not to say that young people are not curious and interested in sex and wanting to know more about it. If young people are noticing ads on television regarding erection problems, billboards promoting longer-lasting sex, and magazines headlining how to have better orgasms, then it's no wonder they are curious as to what it's all about.

We need to understand that having sex is about many things. It can be about reproduction or pleasure or both. It is timely to remind ourselves that sex, as well as being the means to reproduction, is also a way of expressing intimate feelings for another person of the opposite or same sex. This activity gives students the opportunity to learn and discuss the intimate and pleasurable aspects of sex.

We are not suggesting that young people *should* engage in sexual activity but that when they do, they should have as much knowledge and understanding as possible to equip them for this experience. Sexual activity at any age, that may or may not result in an orgasm, should be consensual and pleasurable for the parties involved.

So what makes it pleasurable, enjoyable, nice or fun? How does this whole thing work?

Instructions

- 1 Brainstorm and record the answers to the question: why do people have sex? Circle all the positive responses. Explain to the class that they probably know from previous sexuality education lessons all about the parts of the bodies and how they function but that now it's time to consider which parts of the body can give us feelings of pleasure. In other words, how it all works and why?
- 2 Divide the class into pairs. Hand out copies of the worksheet 'Anatomy and sexual pleasure' and the information sheet 'How it all works' to each student. Hand out an A3 copy of the worksheet to each group.

- 3 Allow about five minutes for the groups to read the information sheet – this may be done individually if you feel it's more appropriate. Ask if there are questions regarding any of this material.
- 4 Using the information sheet, ask the students to shade in the parts of the body that respond to sexual stimuli. Use one colour to indicate body parts which may give sexual pleasure to either sex, another colour for females, and a third colour for males. The colouring is to be done on the A3 worksheet and students may also wish to complete their individual worksheet.

Discussion questions

- Why do you think touch is such an important sense?
- Positive touch between two people is a way of communicating. It can show support, protection and affection. When you fall in love, the warmth of your partner's touch may feel very pleasurable.
- What are some of the physiological signs of the body responding to sexual stimulation?
- Are there good reasons why this happens? If so, what are they?
- Some people find this subject difficult to discuss, so at the end of the lesson please use the Question Box for any questions students have not felt able to ask out loud. (Refer to AusVELS Level 7 Learning sequence 1, activity 5, 'Question Box'.)
- It is suggested that the information provided in the 'Teacher notes' can be weaved into the student discussion and wrap up.

Wrap up

There is no one way to feel. At your age, some young people experience little or no sexual feelings, and others experience a lot. It's good for young people to be well informed about sex. In order to make informed responsible choices, you need the facts. Sex is a big deal, and tenderness, intimacy and pleasure are all a part of this.

Teacher notes

Sexual consent and coercion

Consenting means agreeing to do something. Giving sexual consent means agreeing to have sex. All people have the right to give or withhold sexual consent. All people have the responsibility to respect their partner's right to give or withhold such consent.

Sexual coercion occurs when someone forces (or attempts to force) another individual to engage in sexual activity against her/his will. In a coercive situation, a person may be physically forced to have sex or he or she may fear the social or physical consequences of refusing unwanted sex.

People may be sexually coerced in different ways: by emotional manipulation, deception, physical force or threats, intimidation, and economic inducements, to name a few. Touching someone's body without her or his consent can also be a form of coercion. If someone touches you in a way that makes you feel uncomfortable, you have the right to tell that person to stop.

Many people feel confused about the issue of sexual consent. They want to understand the limits of what behaviour is appropriate or inappropriate in terms of ensuring consent. Some important points to remember:

- At any moment, you are entitled to change your mind about what feels acceptable, or to speak up if you believe you are not being fully understood and respected. You can say no to a sexual experience even after it has started.
- Consenting to one act or experience does not mean that you agree to any other act or experience. A person who consents to an experience one time has the right to say no to the same experience in the future.
- Because they have been taught to obey adults, boys and girls sometimes feel they must say yes if an adult asks for sex. Because girls are often taught to defer to boys and men, they may feel that they must agree to have sex regardless of their own desires. Such instances are not examples of meaningful, informed and freely given consent.

Sometimes it is difficult to speak up if someone touches you in a way that makes you uncomfortable. If you find it difficult to speak up, speak to a trusted adult.

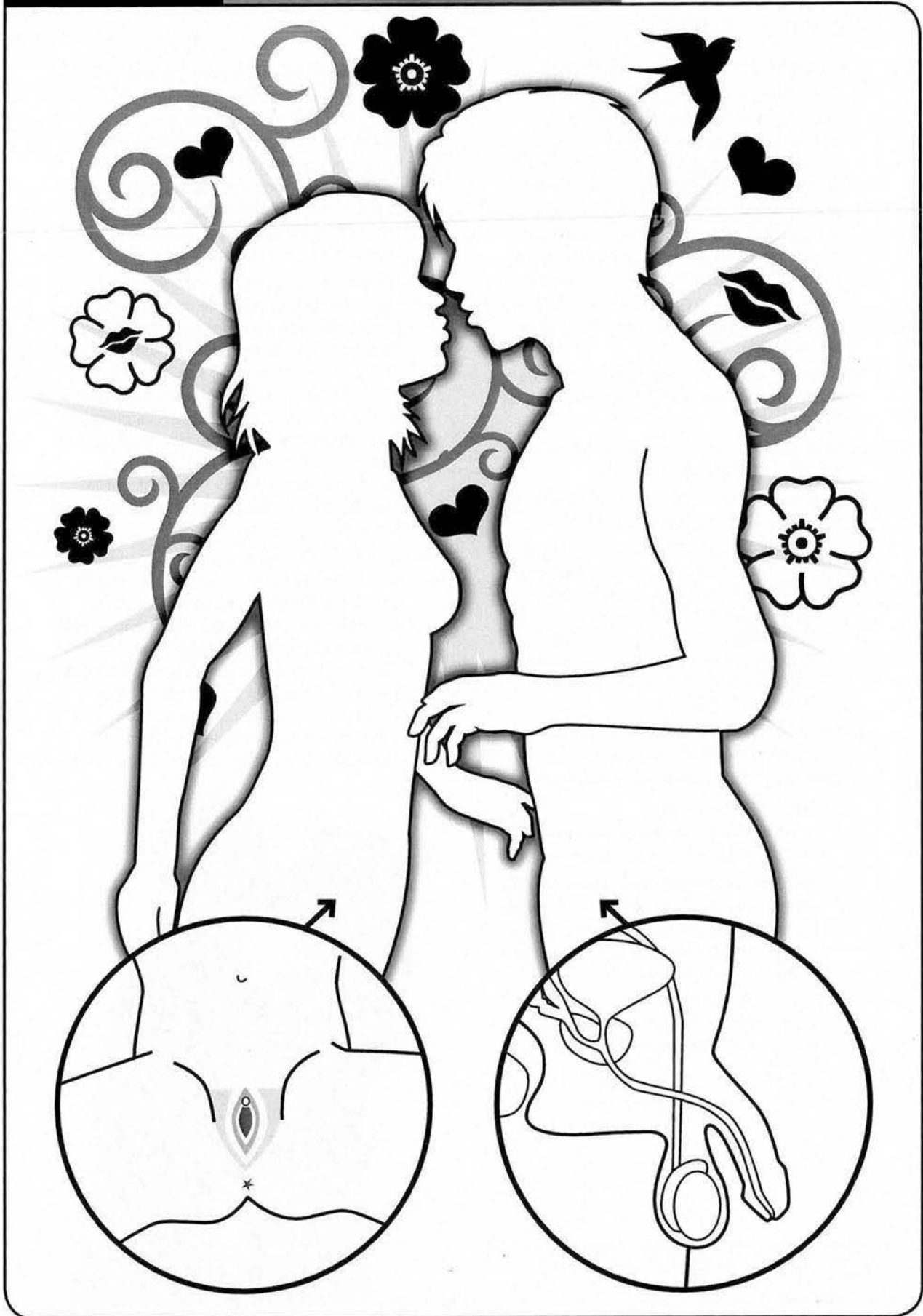
Many factors affect a person's ability to consent to sex in a way that is meaningful and real. For example, personal maturity, awareness of one's rights, and control over the basic aspects of one's life are all important. Being able to communicate fully and openly about preventing infection and unwanted pregnancy is also part of meaningful consent.

Sexual coercion is always a violation of human rights, no matter where, when, or how it happens.

(These notes have been adapted from *It's All One Curriculum*, International Sexuality and HIV Curriculum Working Group, pp. 106–107.)

LEARNING SEQUENCE 2 Worksheet • Anatomy and sexual pleasure

AusVELS Level 7 Learning Sequence 2 TEACHER'S CHOICE



How it all works

ANATOMY AND SEXUAL PLEASURE

- 1 The **brain** is deeply involved in sexual experience and pleasure. It responds to input from hormones and processes emotions. Some people would say that the brain is the most important sexual organ.
- 2 Any area of the body can respond to sexual stimuli. For example, a person may feel sexual pleasure from a touch to the **face, stomach, nipples, ears, legs, or anywhere else**. Each person has different responses, and each person's response depends on the situation.
- 3 Certain parts of the body that contribute to sexual pleasure are specific to males or to females:
 - In boys and men, they include the **penis, testes, scrotum and prostate**.
 - In girls and women, these parts include the **clitoris, vulva, vagina and breasts**.
 - The clitoris (not the vagina) is the part of the female body that is most responsive to sexual stimulation. Most females reach orgasm (sexual climax) as a result of stimulation of the clitoris rather than from penile penetration of the vagina. Unfortunately, many people do not understand this basic fact.
- 4 The way the body actually responds to sexual stimulation involves various physiological processes. For example:
 - heart rate increases
 - blood flows to the genital area (in males, this blood flow may cause an erection)
 - the body secretes fluids (in females, the vagina may become wet, while in males, the penis may release a few drops of pre-ejaculate which is not the same fluid as that of ejaculation)
 - the body's response to sexual stimulation varies according to the situation and from person to person.

SEXUAL EXPRESSION AND ENJOYMENT

- 1 Emotional and physical pleasures are important parts of sexual wellbeing. Public health and rights organisations have issued declarations regarding the rights of all persons to sexual expression. These rights include the right to seek pleasure in the context of safety and of mutual and meaningful consent.
- 2 What feels sexually pleasurable varies from person to person. People can experience sexual pleasure by touching themselves or through a shared experience (with someone of the same or the other sex). They can also experience sexual pleasure with no touching at all. Sources of sexual pleasure may include fantasies, words, reading, watching a film, caressing, kissing, or genital contact. For sex to be enjoyable, people must know what feels good to them and to their partners.
- 3 Touching or stroking oneself (especially one's own genitals) for sexual pleasure is called masturbation. Masturbation is an important way that people learn about their bodies and sexuality. Most people seek pleasure through masturbation throughout their lives, including periods when they have a sexual partner or are married. Masturbation is a safe sexual behaviour. It is neither physically nor mentally harmful.



(Adapted from *It's All One Curriculum*, International Sexuality and HIV Curriculum Working Group, pp. 98 and 99.)

2 Prevention – the responsibilities of being sexually active

LEARNING INTENTIONS

- To provide accurate, age-appropriate information regarding the prevention of an unintended pregnancy.
- To provide accurate, age-appropriate information regarding the prevention and spread of STIs.
- To provide an opportunity for students to test their ability to transfer this information to the process of decision-making and the responsibilities of being sexually active.

Preparation and materials

- A3 copy of the worksheet 'Preventing an unintended pregnancy and the spread of STIs', one per group

Introduction

Prevention is a good thing, and we practise it often. We cover our nose and mouth when we cough or sneeze to prevent our cold from spreading to others around us. We wash our hands after using the toilet to prevent the spread of disease. We wear a seatbelt or helmet to prevent injury. We use sunscreen and wear hats and other protective clothing to prevent skin cancer.

All of these precautions are about prevention – preventing the spread of disease and preventing injury. There are many prevention campaigns on TV and some at school. Can anyone remember 'Slip, Slop, Slap'? 'SunSmart'? 'Swap it, Don't Stop it'? What are some other campaigns that you can think of that have asked people to change their behaviour or to behave in a particular way?

It's better to take care so that a potential problem (which may threaten ourselves or someone else) never happens, rather than having to solve the problem once it has already occurred. In this activity we are looking at ways of acting responsibly in order to prevent an unintended pregnancy and prevent the catching or spreading of an STI.

Teacher note: The prevention activities will only pick up on the more common methods of preventing an unintended pregnancy, and the STIs of growing concern.

Instructions

- 1 Use the introduction as a way of initiating discussion around the notion of prevention.
- 2 Ask the class the following two questions:
 - What are the responsible behaviours for preventing an unintended pregnancy?
 - Not having vaginal intercourse.
 - If you are having vaginal intercourse, using a method of contraception.
 - What are the responsible behaviours for preventing the catching or spreading of an STI?
 - Not engaging in sexual activity.
 - If engaging in sexual activity, limiting the activity to safe practices and using protection.

- 3 Divide the class into groups of three or four and hand out the worksheet 'Preventing an unintended pregnancy and the spread of STIs'. Using the worksheet, ask groups to brainstorm and record what they know about the listed methods of contraception. (It's likely that some groups may not be able to give detailed responses to the questions.)
- 4 Starting with the first column, 'Abstinence', ask the groups to report their responses to the class. Provide the class with additional information where needed and correct any misinformation. Refer to AusVELS Level 8, Learning sequence 5, activity 4, 'Contraception – hope is NOT a method'. The set of information cards in that activity includes images and descriptions of the methods of contraception outlined here. Using a key word search of *contraception* (or similar key word), you may also decide to use a website such as <http://www.betterhealth.vic.gov.au/> or <http://www.fpv.org.au/teaching-resources/>. If you want the students to learn how to apply a condom, remember that there are free educational kits that can be ordered from <http://www.ansellsex-ed.org.au/>.

Discussion questions

- Can you think of other ways to prevent an unintended pregnancy or STIs? What are they? Why do you think they haven't been mentioned in our lesson today? (Some may not be reliable and others may be myths, e.g. you can't get pregnant standing up or the first time you have sex.)
- If your friend asked you for advice about contraception, what advice would you give them based on the discussion we have just had?
- Think back to the activity Help Desk (AusVELS Level 7, Learning sequence 4, activity 1). Can you think of three reliable and trustworthy sources of information that you would go to for help and advice?

Wrap up

The information in this activity may not be needed for a long time, or it may be needed next week, or maybe there are some of you who would have liked this information earlier. Whatever the case, it's hard to make important decisions and take responsibility for our own and our partner's sexual health without knowledge.

Being sexually active should be pleasurable for the persons involved and this includes being free from the worry of an unintended pregnancy or catching an STI.

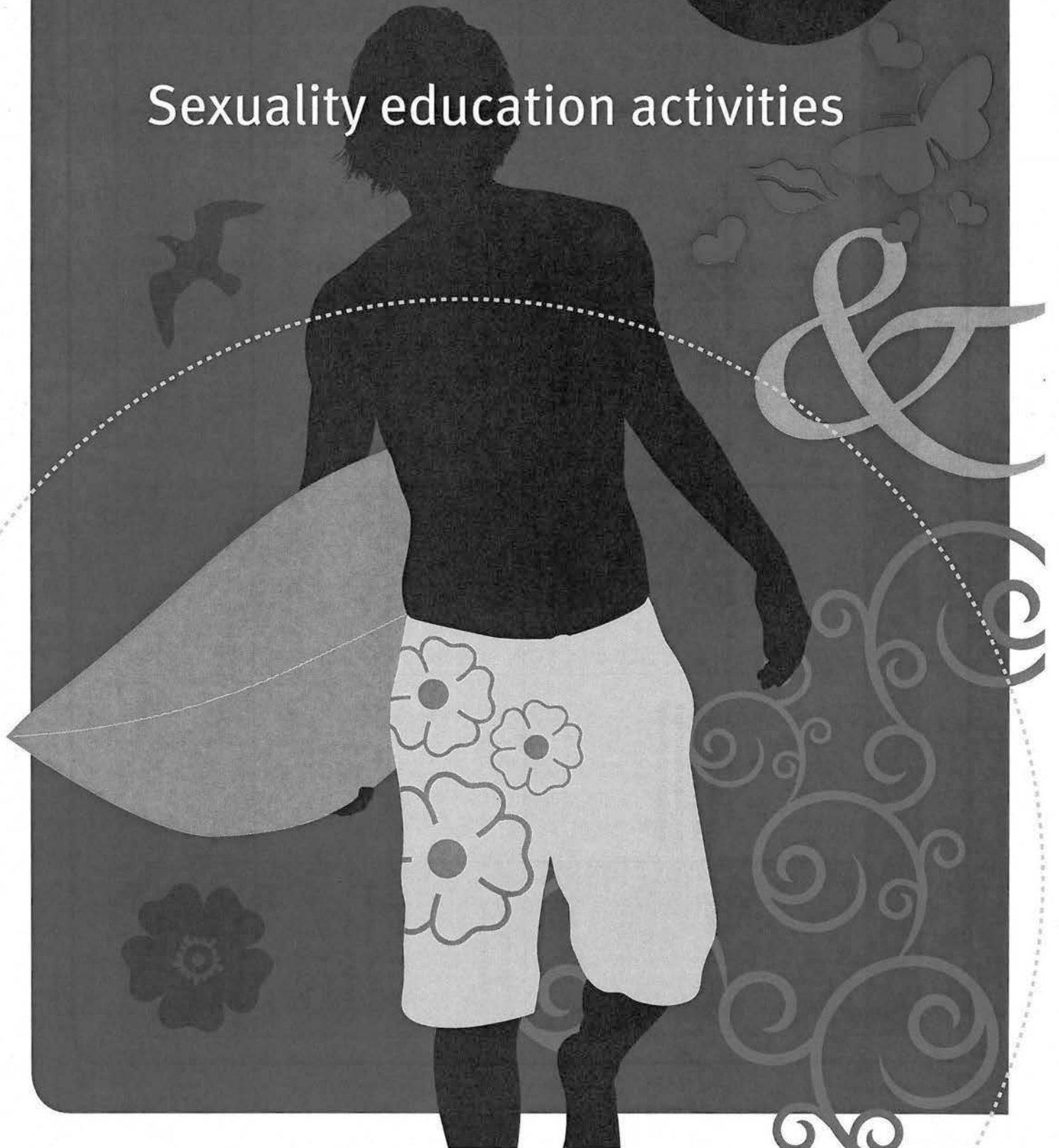
Methods of preventing an unintended pregnancy and the spread of STIs

Brainstorm and record all you know about each method of contraception and abstinence.

	Abstinence	Condom	Long-acting implant	Contraceptive pill	Emergency contraceptive pill
Who is responsible for it?					
How does it work?	Explain what this means in a sexual relationship. What can a couple do/not do if they practise abstinence?				
Can anyone access it and where?					
How effective is it in preventing an unintended pregnancy?					
How effective is it in preventing the spread of STIs?					

AusVELS Level 8

Sexuality education activities



User notes specific to AusVELS Level 8

If students have not had sexuality education at Year 7, it is suggested that you have a look through the materials for both Years 7 and 8 to determine which activities best suit your students' needs. There are several activities at Year 7 to help you and your students get to know each other (for example, 'Let's get started' and 'Introducing me'). 'Teacher's choice' has revision lessons and prevention information that could be considered for inclusion at Year 8.

LEARNING SEQUENCE

1

Getting started

- 1 Red light, green light – what I think about sexuality education
- 2 Developing classroom rules
- 3 Introducing the Question Box

AusVELS LEVEL 8HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion*

- › the influence of family on personal identity and values
- › access reliable information about health issues
- › barriers and enablers to accessing health services.

INTERPERSONAL DEVELOPMENT – *building social relationships*

- › respect for the individuality of others and acknowledgement of diversity of individuals
- › differing values and beliefs held in local, national and global contexts and the impact these have on relationships
- › strategies to build and maintain positive social relationships.

1 Red light, green light – what I think about sexuality education



LEARNING INTENTIONS

- To be able to experience and identify some of the challenges associated with discussing sexuality among peers.
- To give students an opportunity to hear why the school and community consider it important that sexuality education is part of the curriculum.

Preparation and materials

- ✓ voting cards 'Traffic lights' – red, amber and green (if you don't have time to prepare these, use coloured markers), one set per student
- ✓ copy of the list 'Statements on sexuality education', for teacher use

Introduction

This activity is a precursor to the next in the sequence, 'Developing classroom rules'. It is an easy introduction to the topic of discussing sexuality. By participating in this activity, students should be able to appreciate the importance of establishing ground rules for future sexuality education sessions.

Instructions

- 1 Pre-select three or four statements from the list 'Statements on sexuality education' (or develop your own) which will enable students to identify and discuss their feelings and opinions.
- 2 Tell the students that we are going to begin a unit of work on sexual development, identity and relationships, and that you are interested to hear their opinions on sexuality education.
- 3 Hand out a set of 'Traffic light' voting cards to each student.
- 4 Read out one of the statements and ask the students to show the traffic light that best reflects their view according to the following directions:
 - waving the green light is 'strongly agree'
 - showing the green light is 'agree'
 - showing the amber light is 'undecided'
 - showing the red light is 'disagree'
 - waving the red light is 'strongly disagree'.
- 5 Ask for volunteers who have voted differently to share why they have taken that position.
- 6 Let the students know that it is OK to change to a different colour after hearing someone else's view.
- 7 Read out another statement and repeat instructions 4 and 5. Continue for one or two more statements. You do not need to use all of the statements, and you may include statements of your own.

Wrap up

It is common and normal to feel uncomfortable or embarrassed talking about sexuality. Sometimes it can also be a source of strong disagreement. For these reasons we are going to develop some group rules for future sessions so that everyone feels safe to participate.



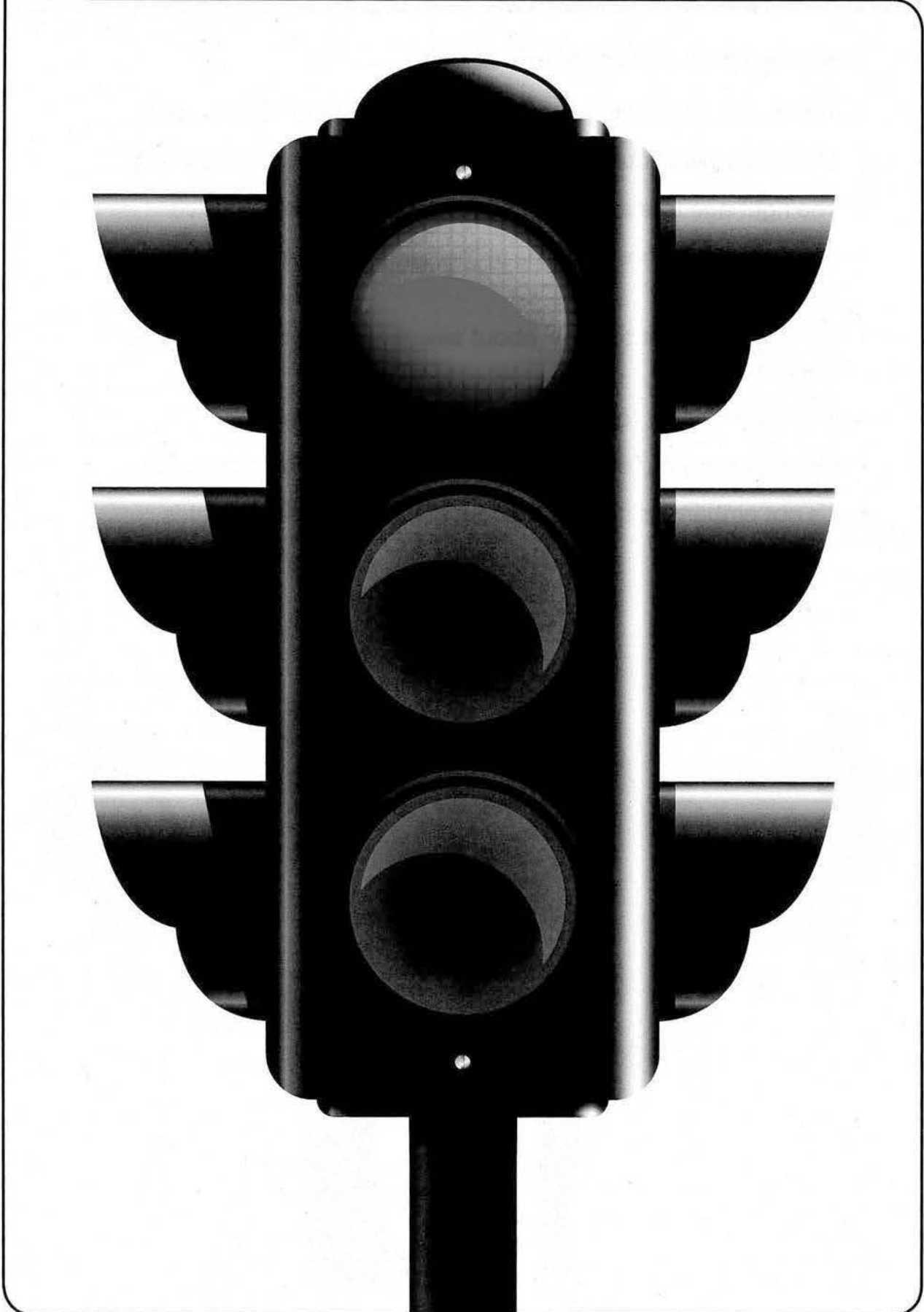
Statements on sexuality education

- Young people should learn about sexual matters at home only.
- Young people should learn about sexual matters at school only.
- The right age to start talking about sexual matters is twelve.
- Girls and boys should not be in the same room when this topic is discussed.
- It is not important to know about sexual matters concerning the opposite sex.
- It's embarrassing to talk about sex with your friends.
- It's embarrassing to talk about sex with your parents or carers.
- It's not embarrassing to talk about sex with your classmates.



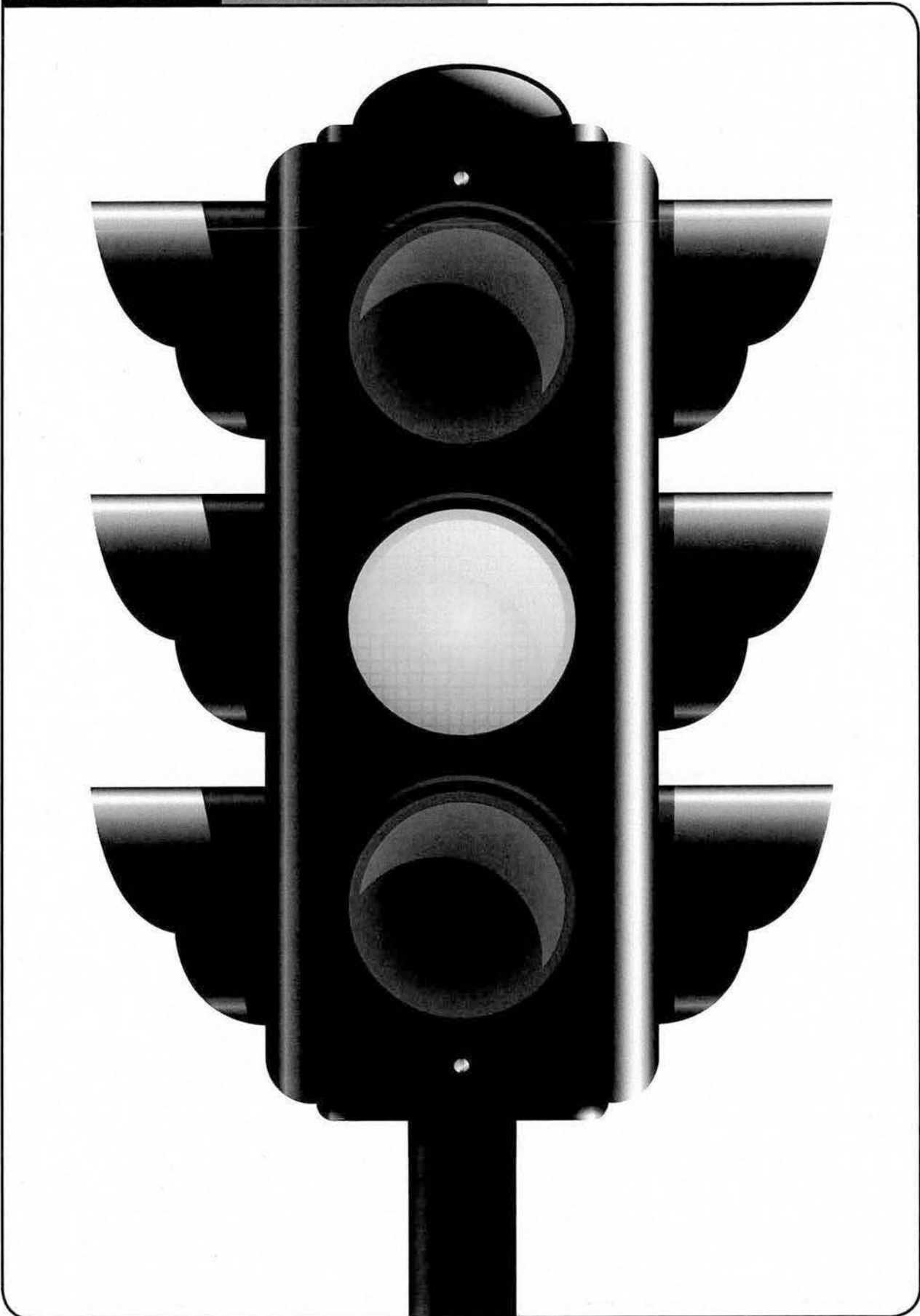
LEARNING SEQUENCE 1 Voting cards • Traffic lights

AusVELS Level 8 Learning Sequence 1



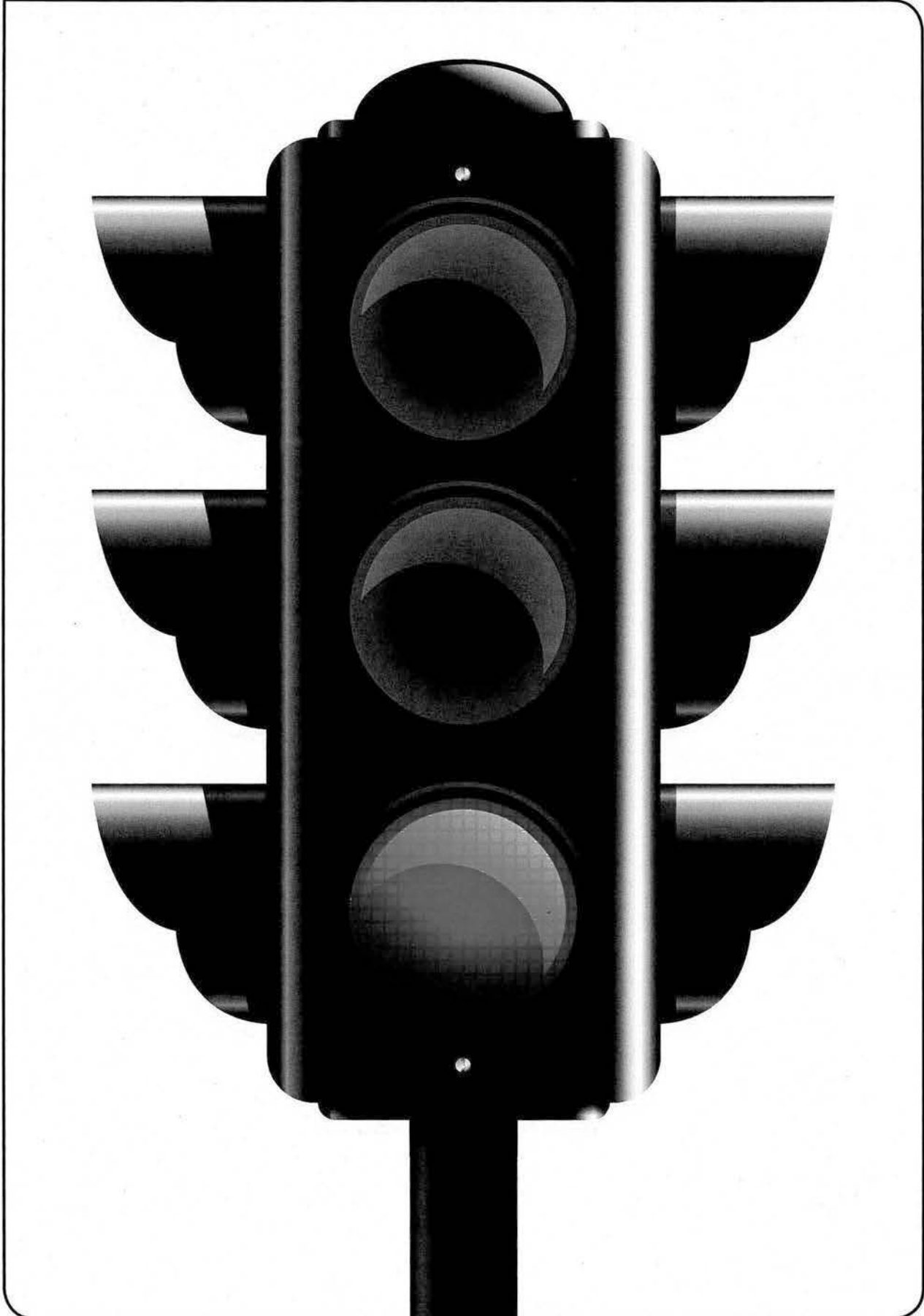
LEARNING SEQUENCE 1 Voting cards • Traffic lights

AusVELS Level 8 Learning Sequence 1



LEARNING SEQUENCE 1 Voting cards • Traffic lights

AusVELS Level 8 Learning Sequence 1



2 Developing classroom rules

LEARNING INTENTION

- To promote a safe environment where students feel comfortable joining in.

Preparation and materials

- ✓ list of 'Examples of classroom rules' in the box on page 120, or other examples of rules you might have
- ✓ large paper and markers

Introduction

Discussing sexuality, feelings and fears among peers is a risky enterprise for young adolescents, so developing ground rules is an essential part of teaching sexuality education. This activity aims to:

- help everyone feel safe to participate in any way that they can
- teach students how to disagree and share opinions in a respectful way
- make sure that the more dominant students (and dominant opinions about sexuality and gender) do not hold sway
- demonstrate equitable and respectful relationships through the way the class is managed.

Teacher advice

A brief word about confidentiality

It is tempting to ask students to promise that whatever is said in the classroom stays in the classroom; however, this is a guarantee we cannot make. Teachers, school nurses and visiting educators involved in the delivery of sexuality education need to set out clear boundaries which create a safe and supportive environment, while also making clear what will happen if a young person makes a disclosure that causes concern. More on this topic can be found in 'Student disclosures and confidentiality' on page 12.

Instructions

- 1 If you used activity 1, 'Red light, green light – what I think about sexuality education', ask the students how it felt to discuss sexual matters during the activity.
- 2 After hearing a few responses, introduce this activity by using the wrap up from the previous activity:

It is common and normal to feel uncomfortable or embarrassed talking about sexuality. Sometimes it can also be a source of strong disagreement. For these reasons we are going to develop some group rules for future sessions so that everyone feels safe to participate.

- 3 As a class, brainstorm some rules, writing them up on the board as you go. If the students are having trouble getting started, read out some from the list of examples provided below. As you are part of the class, be sure to add your own ideas.
- 4 Once you have finished brainstorming, group the similar ideas together and come up with a single rule for each grouping – it is better to have fewer rules than many.
- 5 Make up your final list on a large piece of paper, writing them as statements for how to interact with each other rather than how *not* to interact with each other.
- 6 Discuss who should be responsible for ensuring that everyone sticks to these rules. The responsibility should be shared by everyone in the class.
- 7 Discuss how you will let each other know when someone has behaved in a way that does not reflect the agreed rules. Hopefully we can all be sensitive about how this is done so that no one needs to feel guilty or ashamed.
- 8 Keep the final list of rules and display it at the beginning of each session.

EXAMPLES OF CLASSROOM RULES

- Everyone has the right to pass.
- Everyone has the right to speak.
- Socially acceptable language will be used.
- Do not use people's names when telling stories.
- Protect yourself – while we would prefer that everyone respects your privacy, we can't be sure that comments made in class won't go out into the school ground.
- We can laugh with each other, just not at each other.
- Listen to different ideas without making personal putdowns.
- No one will be asked to give information about private sexual behaviour.
- Argue about the idea, not the person. (For example, say, 'I don't agree with that idea. I believe ...')

Wrap up

Remember the rules are new to our class and sometimes it may be necessary for us to review our class rules and make changes to them. It's all about learning how we work best together.

3 Introducing the Question Box



LEARNING INTENTIONS

- To promote a safe environment where students feel comfortable joining in.
- To promote questioning.
- To enable students to connect and organise new and existing knowledge.

Preparation and materials

- one lidded box with a slot cut into the top (a shoe box or other small box)
- strips of paper of equal size, one for each student

Introduction

Creating a Question Box at the beginning of this unit of work ensures that students have a safe and private way to seek help and ask questions. It also gives you time to find the answers. Some teachers like to bring in books or resources to address students' questions, reading from a book or referring students to a particular health website.

Do not feel that you have to answer any questions about your private life; after all, you are also teaching the students to respect others' boundaries.

Instructions

- 1 Bring into class a lidded box with a posting slot cut into the top. A shoe box is ideal.
- 2 Introduce the activity by using the information in the following script. You may read it as is or put it into your own words:

At the end of most sessions, you will have time to write an anonymous question for the Question Box. I [the teacher] will be the only one to read the questions so no one else will be able to see the handwriting. I will try to find out the answers and let you know during our next lesson. If I can't find the answer then we can take time to find the answer together.

- 3 Hand out strips of paper of equal size to help keep the questions anonymous.
- 4 Give the students time to think about something they would like to know the answer to.
- 5 Ask everyone to write their question on the paper provided. If they can't think of a question they could write something they would like to know more about. If they are unable to do that then ask them to write that they 'have no question at this time'. What you want is for everyone to write something down so that, once again, it helps to keep the questions anonymous.
- 6 As the students leave the room at the end of the lesson, they drop their questions into the Question Box for you to respond to at the start of their next lesson. Depending on your class size, this might take up most of your next lesson. Alternatively, you may decide some students' queries and concerns can be appropriately addressed through other activities in this resource.

LEARNING SEQUENCE

2

Connecting past knowledge to the present

1 Adolescence – the big picture

AusVELS LEVEL 8

HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion*

- › physical, social and emotional changes during adolescence
- › access reliable information about health issues.

INTERPERSONAL DEVELOPMENT – *building social relationships*

- › respect for the individuality of others and acknowledgement of diversity of individuals.

1 Adolescence – the big picture

LEARNING INTENTIONS

- To check prior knowledge of the changes involved in puberty and adolescence.
- To correct any misunderstandings that students might have with regard to puberty.
- To provide a context for developing relationships, defining one's identity and fitting in.

Preparation and materials

- ✓ coloured markers, one set per group
- ✓ paper about 1.5 metres in length or A3 copies of the template 'Body outline', one per group
- ✓ information sheet 'Physical changes', one per student
- ✓ prepare cards 'Social', 'Emotional' and 'Cognitive' changes, one set of each for the class

Teacher advice

The information in this activity is very similar to AusVELS Level 7, Learning sequence 3, activity 2, 'Changes'. Before you begin, check with the class to see if they completed the earlier activity. You may still want to use 'Adolescence – the big picture' as a refresher, but be sure the students understand it is a revision exercise.

Introduction

There is a lot of information contained in the following sets of cards. As well as covering physical changes present in adolescence, the main purpose of this activity is to highlight the less-explained emotional, social and cognitive changes. These other changes also affect young people's experience of adolescence, and their behaviours and choices around sexuality. Some changes are hard to categorise as either a social or emotional event and it is not important that students can make the distinction. What is important is that the students appreciate that these are constituent parts of adolescent development that combine to affect their lives. You may wish to sift through the cards and choose those that you feel will resonate most with your group.

You will need to prepare body outlines for this session. Some teachers like to have students trace around each other to create a life-size body outline. At this age, however, students can feel uncomfortable being identified with the body outline so it may be safer to use the template.

It can be easier for students to form same-sex groups to prepare the body maps, as they will be more familiar with the changes; however, it is important that all students have information regarding both sexes. In single-sex schools it will be necessary to ask some groups to do the outline of the other sex.

A Instructions

- 1 Introduce the activity by using the information in the following script. You may read it as is or put it into your own words:

There's more to adolescence, this second decade of your life, than puberty. It covers a whole range of emotional and cognitive changes as well as physical development. Understanding the breadth of changes your body and mind are going through can help you to feel a little more able to cope. It is also useful because it helps identify some ways you might deal with these changes.

- 2 Divide the class into same-sex groups of three or four.
- 3 Give each group a set of markers, a large piece of paper or A3 copy of the 'Body outline', and the information sheet 'Physical changes'.
- 4 If you are not using the template, ask the groups to draw an outline of a body on the paper.
- 5 Ask each group to use the 'Physical changes' information sheet to draw the changes onto the body, inside or near the outline.
- 6 Hold a short class discussion asking the students: what was one thing your group learned or found interesting from this information?
- 7 Now ask students to draw all the social and emotional changes they can think of onto the body. Social changes should appear outside the body outline in the shaded area and emotional changes in the thought clouds.
- 8 Once the students have completed their body maps, have them report back by displaying their maps and comparing responses.

B Instructions

- 1 Choose one of the class's body maps to place on the floor in the centre of the room and move the chairs in a circle around the map.
- 2 Students take turns drawing a 'Social' or 'Emotional' changes card from a hat (or other container). Read out the change and if it is an aspect of adolescent development that does not yet appear on the map on the floor, add it now.
- 3 The teacher now adds the 'Cognitive changes' cards to the map (these have not been drawn on), reading out each one and allowing time for discussion around the implications of each of these changes for young people.
- 4 Finish by asking the class: when you consider all these changes (physical, emotional, social and cognitive), what are some major implications of them for the skills or support you might require?

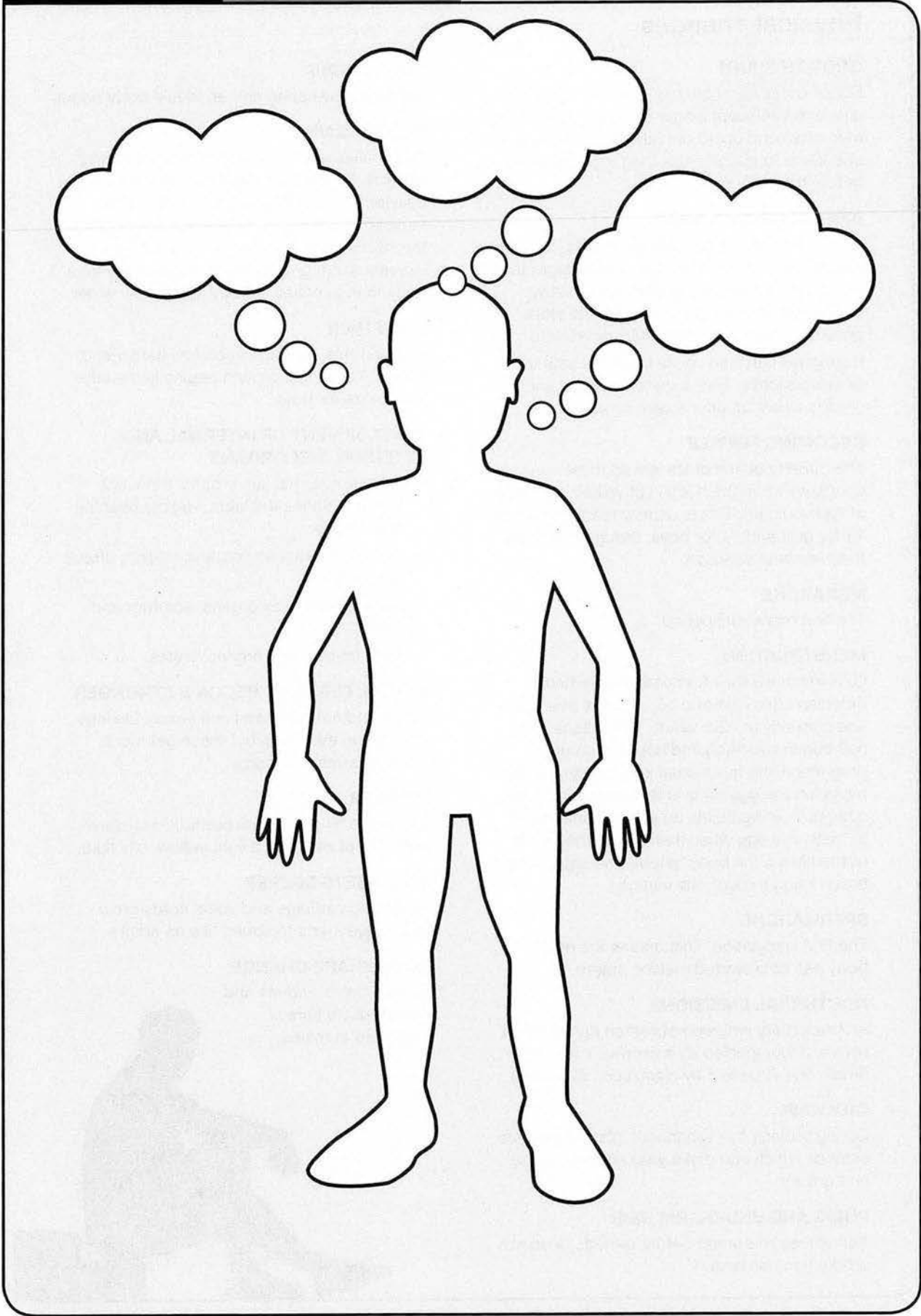
Wrap up

One of the things I would like to highlight for you is the cognitive changes during adolescence, and the huge leaps your brain is making right now. One of the implications of brain development at this stage of your life is that you have a very strong and fast connection to the emotional part of your brain, so learning to take your time in decision-making is a really handy strategy right now.

Invite the class to write an anonymous question for the Question Box about anything discussed so far. Explain that the questions will be answered in the next session.

LEARNING SEQUENCE 2 Template • Body outline

AusVELS Level 8 Learning Sequence 2



Physical changes

GROWTH SPURT

Bones continue to grow until about age 15 for girls and two years longer for boys. That's why men often end up 13 cm taller than women and seem to sprout extra-long legs and arms before the body catches up.

BREAST DEVELOPMENT

This is the first sign of puberty in girls. Breasts may grow unevenly with one breast larger than the other. Breasts are tender and sensitive during this phase but the tenderness stops once the breasts are more fully developed.

Hormones can also cause boys' breasts to develop slightly. This is quite common and usually wears off after a year or so.

BECOMING FERTILE

The puberty phase of life is said to be complete when the body is physically capable of reproduction. This is usually reached by age 13 for girls and 14 for boys, though obviously there is some variation.

MENARCHE

The first menstrual period.

MENSTRUATION

Girls can have their first period anywhere between ages nine and 15, with the average age currently at 12.5 years. This means she has begun ovulating and could become pregnant if she has sexual intercourse. During ovulation the egg (or *ova*) is released from the ovaries. A lining builds up in the uterus ready to 'nest' the egg when it arrives. If the egg is not fertilised, the body 'sheds' the egg and the tissue lining through the vagina.

SPERMARCHE

The first ejaculation. This means the male body has now started making sperm.

NOCTURNAL EMISSIONS

An involuntary emission of semen during sleep, usually accompanied by a *wet dream* (an erotic dream accompanied by ejaculation of semen).

OILY HAIR

During puberty the sebaceous glands produce extra oil which can make your hair look shiny and greasy.

PUBIC AND UNDERARM HAIR

Sometimes this starts before periods or sperm production has begun.

BODY ODOUR

Increasing sweating and an 'adult' body odour.

WEIGHT GAIN

Both males and females gain weight during puberty. By the end of puberty males have heavier bones and nearly twice as much muscle. This muscle develops mainly during the later stages of puberty. Girls' fat tissue increases to a greater percentage of the total body than in males, and the hips grow wider.

BODY HAIR

Hair on arms and legs becomes darker and thicker. Facial hair growth begins in the later teen years for boys.

DEVELOPMENT OF INTERNAL AND EXTERNAL SEX ORGANS

- Female external sex organs: the vulva which includes the labia, vaginal opening and clitoris.
- Female internal sex organs: vagina, uterus and ovaries.
- Male external sex organs: scrotum and penis.
- Male internal sex organs: testes.

SEXUAL FEELINGS BECOME STRONGER

Males and females can have sexual feelings any time in their lives but these get much stronger around puberty.

PIMPLES

The skin's oil glands will produce excessive amounts of sebum – a light yellow, oily fluid.

VOICE GETS DEEPER

As bones, cartilage and vocal cords grow, your voice starts to sound like an adult's.

BODY SHAPE CHANGE

Female pelvis widens and more muscle fibre is produced in males.





Social changes

CHANGING FRIENDSHIPS

Between the ages of 10 and 14, young people tend to hang out with others of the same sex and choose friends who are most like them.

From around the age of 14, teenagers become more able to appreciate and enjoy friendships with people whose interests, appearance and beliefs are different to theirs, and they may broaden their friendship group to include both boys and girls.

Social changes

PEERS ARE VERY IMPORTANT

You start to place a higher value on friendship and want to spend more time with friends. Family are still very important but you are adding friends to your 'support crew'.

Social changes

DISAGREEMENTS AT HOME

There may be more disagreements with family – about what to wear and doing homework, for example – as you practice your new thinking powers and try to connect more with friends.

Social changes

HAVE MORE OR DIFFERENT RESPONSIBILITIES

You probably have the responsibility of looking after your own room which may be a room you share with a brother or sister. You may be asked to prepare your own lunches or possibly pick up younger family members on your way home from school.

Social changes

MIGHT WANT A BOYFRIEND OR GIRLFRIEND

This is where you can start to feel a real difference among your peers. It can be difficult if all your friends seem to be with someone and you would like to be, but most people at this age will not have a relationship.

Social changes

MORE UNSUPERVISED TIME

Allowed to go out more, enjoy more unsupervised time on the computer, and perhaps have your own mobile phone.

Modified from *Teenagers: A natural history*, David Bainbridge, 2009, Portobello Books, London; and from *Developing adolescents: A reference for professionals*, The American Psychological Association, 2002, Washington DC
<www.apa.org/pi/families/resources/develop.pdf>



Emotional changes

EXPERIMENTING WITH A DIFFERENT 'YOU'

You become interested in trying different styles, different music, etc. You may be aware of an inner life that seems separate to the body, and be questioning and learning who you are as well as imagining a 'possible you' in the future. One part of figuring out who you are relates to your gender: what kind of male or female you would like to be, or are. There are many strong messages around telling you how to be male or female.

Emotional changes

LOTS OF CHANGES, A NEW SOCIAL CROWD AND STRONGER EMOTIONS CAN BE REALLY HARD IF THINGS ARE GOING WRONG IN YOUR LIFE

Not knowing how to sort these things out can lead to trying to find love and comfort, or just acceptance and belonging, through sex, or numbing feelings with alcohol. The tendency of ads, and of young people, to romanticise some adult habits can make it even more difficult to make sense of these emotions.

Emotional changes

FEELINGS OF LOVE AND PASSION MAY START

And heartbreak may be a consequence of these feelings.

Emotional changes

REQUIRED TO MAKE MORE DECISIONS

And very conscious of what peers think about you. You care a lot about what everyone else is doing which tends to guide your decisions.

Emotional changes

REQUIRED TO SOLVE MORE PROBLEMS

Because you can now think in a more complicated way, life can get more complicated too BUT you are also more capable of learning positive ways to approach problems.

Emotional changes

SEXUAL ATTRACTION

Another part of learning about yourself is noticing who you are sexually attracted to. This can change and keep on changing.

LEARNING SEQUENCE 2 Cards • Emotional changes

**Emotional changes****VERY CREATIVE TIME OF LIFE**

Lots of thoughts, ideas and strong feelings.

Emotional changes**LEARNING HOW TO GET ALONG WITH OTHERS AND HOW TO BE A GOOD FRIEND**

Young people place a high value on the qualities of loyalty, frankness (honesty), trust and being able to share private thoughts and feelings.

Emotional changes**GROUP MEMBERSHIP VS. ROMANTIC RELATIONSHIP**

At this age people tend to be more concerned with learning how to get on with 'the herd' rather than an intense one-on-one romantic relationship. Sometimes there is a higher priority on the acceptability of the boyfriend or girlfriend to their group than in their relationship with that person.

Emotional changes**GET REALLY UPSET WHEN TREATED UNFAIRLY**

Sense of fairness and justice may be very important to you.

Emotional changes**CRAVING FOR PRIVACY**

You want to work things out for yourself rather than being told.

Emotional changes**FEAR OF BEING TEASED**

Vulnerable to rejection and more self-conscious which can lead to feelings of loneliness or isolation.



Cognitive changes

THE BRAIN REACHES ITS MAXIMUM SIZE DURING ADOLESCENCE BEFORE GOING THROUGH 'PRUNING' AND REORGANISATION

There are more 'thinking power' cells (grey matter) but connections need some streamlining to enable you to get faster access to seeing consequences.

Cognitive changes

BRAIN PRUNING

The brain is pruning back the connections you aren't using *now* so skills you practice during adolescence (e.g. communication and friendship skills, problem-solving, playing a sport, etc.) are more likely to stick with you for the rest of your life.

Cognitive changes

YOU CAN DO MENTAL TASKS THAT CHILDREN CANNOT DO

You are more able to consider a range of options, which means you can hold them in your head and sort through them better than you were able to as a child. You can set distant goals instead of only aiming for what's good in the next hour. You can cope with shades of grey. You can ignore or screen out irrelevant information and you can pay attention and concentrate.

Cognitive changes

CHILDREN CAN DO SOME MENTAL PROCESSES FASTER THAN YOU!

It seems that reading others' emotions gets harder at this stage of life, maybe because there is so much going on in your brain. This can make emotional situations trickier and more confusing. It also means that putting yourself in other people's shoes and imagining how they are feeling is harder for you now than it will be when you are an adult. This may be one reason why young people can be 'unthinkingly' cruel to one another.

Cognitive changes

MORE RISK-TAKING

You want to take more risks and stretch yourself beyond your former limits, which is good for learning and for your self-esteem. Of course there is also the kind of risk-taking that can be very dangerous for how you feel about yourself too.

Cognitive changes

ONLY PARTIALLY DEVELOPED MECHANISMS FOR CONTROLLING EMOTIONS

You are shifting from acting on gut reactions to being able to *stop, think* and take a more intellectual, considered approach. You'll need to practice this for a while.

LEARNING SEQUENCE

3

Belonging and identity

- 1 Who am I?
- 2 Brick walls and wrecking balls
- 3 Think twice

AusVELS LEVEL 8HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion*

- › physical, social and emotional changes during adolescence
- › the influence of family on personal identity and values
- › community attitudes and laws influencing the sense of right and wrong.

INTERPERSONAL DEVELOPMENT – *building social relationships*

- › respect for the individuality of others and acknowledgement of diversity of individuals
- › differing values and beliefs held in local, national and global contexts and the impact these have on relationships
- › the influences of peers on behaviour
- › various forms of bullying and the consequences for the bully and the victim
- › strategies to build and maintain positive social relationships.

1 Who am I?



LEARNING INTENTIONS

- To explore identity/sense of self – ‘who I am’.
- To explore and test the notion of ‘fitting in’.

Preparation and materials

- ✓ copies of the template ‘Identity disc’, one per student
- ✓ copies of the template ‘Parent identity disc’, one per student

Introduction

Introduce this activity by using the information in the following script. You may read it as is or put it into your own words:

This is a new phase of your life where you are more aware of yourself, separate to your body (if that makes sense). It’s worth taking the time to reflect on what is important to you, your sense of right and wrong, and what you value and enjoy. You can recognise and take account of these feelings and preferences when you make decisions and manage your relationships.

Instructions

- 1 Organise students into groups of five and hand out a copy of the ‘Identity disc’ to each student.
- 2 Ask students to fill in each section on their disc. Advise students that the private section of the disc is *not to be completed*. It is for things they know about themselves but do not want to tell others.
- 3 Once the task is completed, ask students to compare their disc with other members of their group.
- 4 Report back to class, noting similarities and differences between group members.



Discussion questions

- Did anyone have identical discs? Why is this not surprising?
- Should you all be the same as each other? Is there a better or best type of identity?
- Would you have filled it out differently if you had done this activity in private? It’s perfectly valid and important to have a private you, too. Why? Is it important to know who will be reading your disc?
- Will this look the same in a year’s time? What’s most likely to be different?

Wrap up

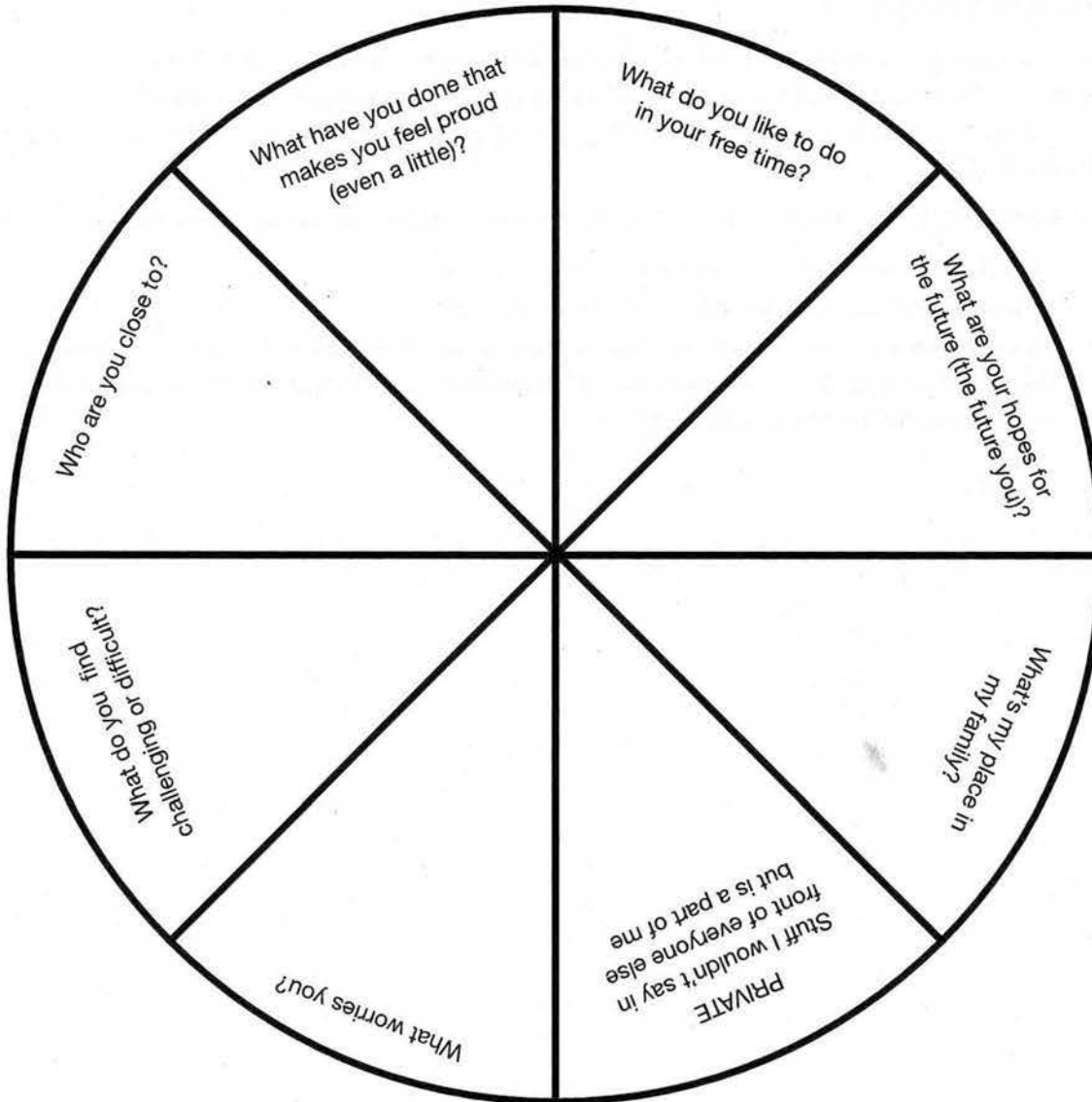
At this age and stage you are quite able to appreciate difference in your friends rather than being critical of someone who is unlike the rest of the group. Hopefully you can also apply this kinder outlook to yourself and your own differences. This age tends to breed a feeling of not being 'good enough', so it's important to identify some of your natural strengths and interests and make the most of them.

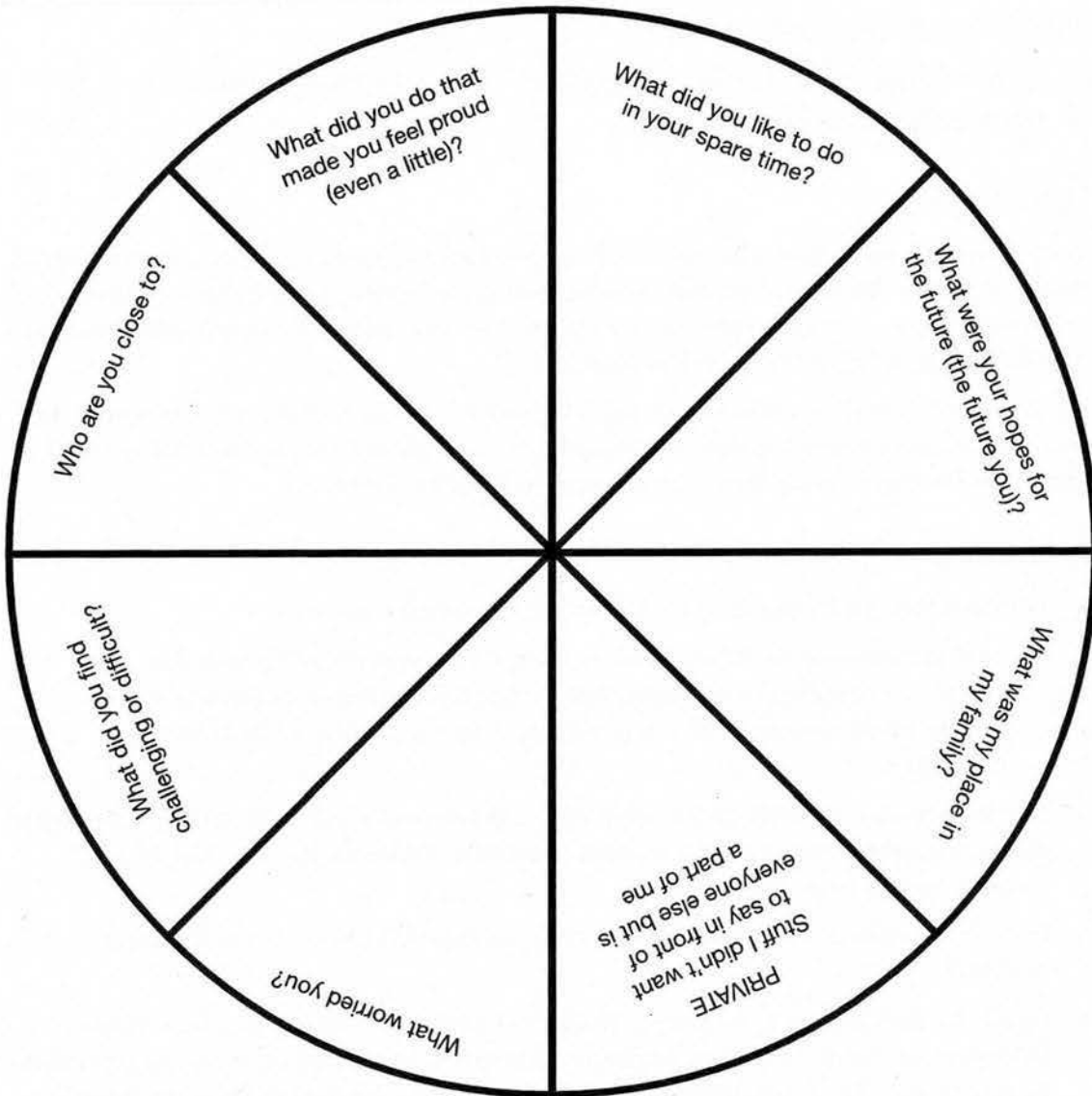
HOMEWORK TASK

Ask the students to take the 'Parent identity disc' home to their parent or carer. The parent or carer should complete it as if they were back at the age the students are now. Once it has been completed, the students can discuss with their parent or carer the differences and similarities to their own disc.

At the start of the next lesson, have a class discussion around the following questions:

- Did you learn anything new about your parent or carer?
- How similar to you were they when they were your age?
- What are some differences between how your parent or carer filled in their disc, imagining themselves at age 12–14, and what they think and feel now? (Talk about the differences you see and the differences they noticed.)





2 Brick walls and wrecking balls



LEARNING INTENTIONS

- To provide tools to generate discussion around the qualities of friendship.
- To explore and test the notion of 'fitting in'.

Preparation and materials

- ✓ copies of images of 'bricks' and 'wrecking balls', one of each image per student
- ✓ mortar (strips of paper)

Introduction

The concept of 'peer pressure' has had negative connotations for many years but research tells us that peer groups also support positive choices, such as studying harder or behaving ethically in a relationship. How you choose your group of friends, therefore, might be as important as your own problem-solving skills, attitudes and behaviours.

The purpose of this activity is to help students to consider the qualities of a group of friends that would lift and support them in their endeavours. It is also intended that students will be able to appreciate the difference between attaining popularity versus friendship.

Instructions

- 1 Introduce this activity by asking the students to consider the following:

How do we choose our friends? How do you surround yourself with people that lift you up and make you feel supported? It helps to know that while you may not win popularity contests, it is more important to have, and to be, a friend than to be popular.
- 2 Distribute 'bricks' and have each student write just one quality, attribute, activity or behaviour that they believe is important in a supportive, positive friendship. Use the chart below if students require prompting.
- 3 Once all the students have labelled their bricks, lay them out on the floor to build up a brick wall.
- 4 Distribute the 'wrecking balls' and ask students to label them with one quality, attribute or behaviour that would knock the wall down. Use the chart below if students require prompting. Be sure to also include web harassment issues, as discussed in the Teacher notes below.
- 5 Cover the bricks, one by one, with the wrecking balls. You can remove the bricks completely if you feel this has greater impact.
- 6 Distribute the mortar (strips of paper) and ask students to label them with qualities or behaviours that would strengthen the wall. What do you see people doing that helps hold the wall up? Have them apply some mortar to rebuild the wall.

Wrap up

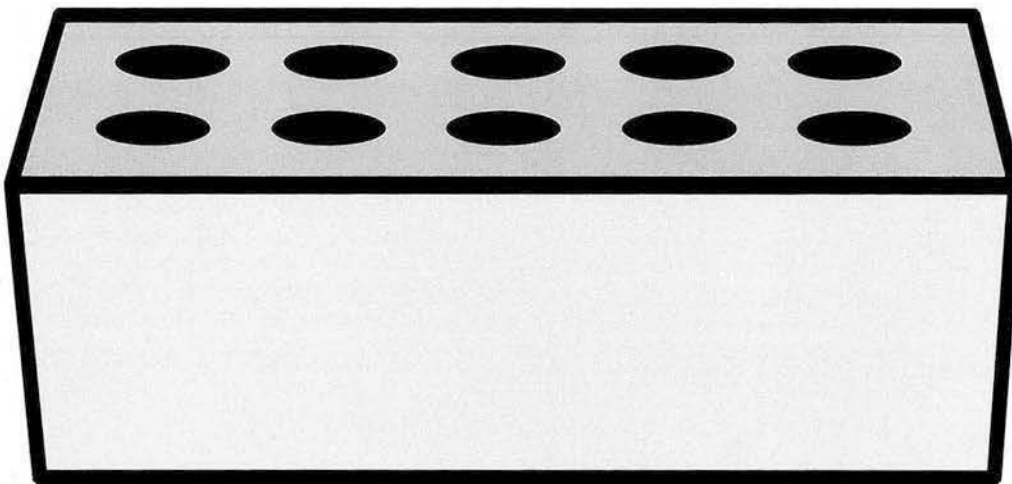
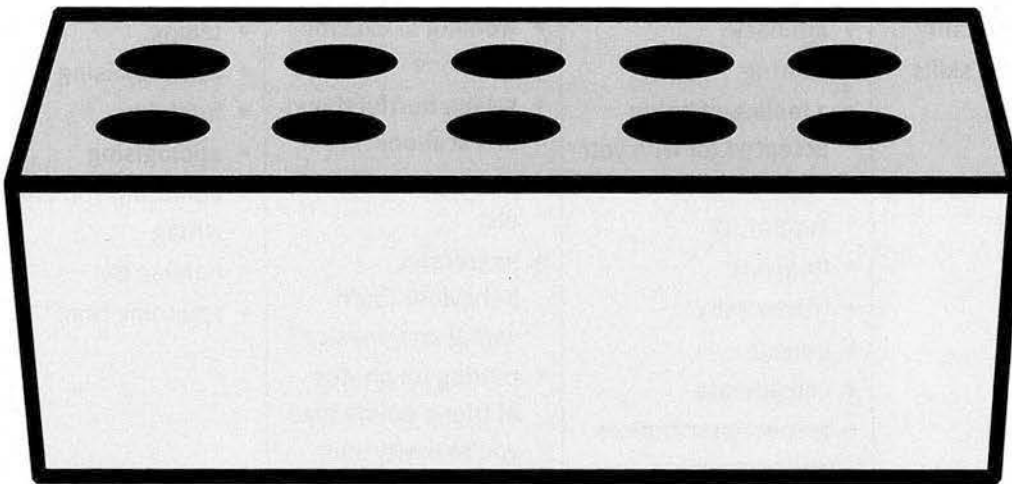
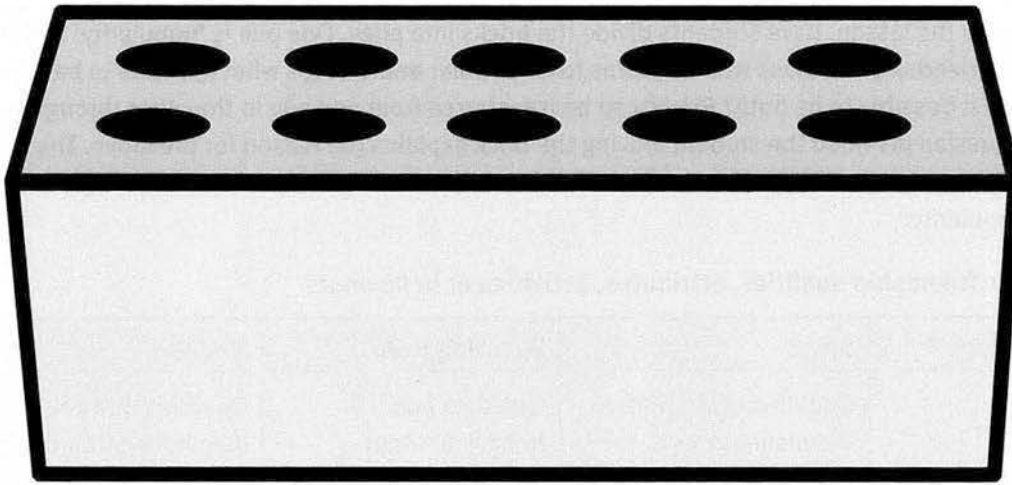
To wrap up the lesson, have students divide the bricks into piles. One pile is 'popularity' and the other is 'friendship'. Discuss what it means to be popular and discuss what it means to be a good friend. Is it possible to be both? Bricks can be transferred from one pile to the other throughout the discussion provided the student moving the brick explains the reason for the move. The idea you want the students to take away is that friendship is ultimately more sustaining than popularity.

Possible friendship qualities, attributes, activities or behaviours

Popularity	Bricks	Wrecking balls	Mortar
	Qualities of supportive friendship groups (people that lift you up)	Qualities and behaviours that destabilise friendship	Qualities that could help hold a friendship together
<ul style="list-style-type: none"> • athleticism • how you look • personality • social skills 	<ul style="list-style-type: none"> • loyalty • support • intimacy • sharing • a feeling of being accepted for who you are • supportive • forgiving • trustworthy • honest • considerate • respect your choices and support you in them (even if they are different to their choices) 	<ul style="list-style-type: none"> • group that enjoys spreading gossip • working to exclude someone • saying hurtful things on Facebook • picking on someone etc. • aggressive behaviour (both verbal and physical) • putting up photos of friend online that you're pretty sure will embarrass them • posting nude/ drunken photos of friends 	<ul style="list-style-type: none"> • facing the problem • listening • telling • compromising • forgiving • apologising • admitting you are wrong • helping out • spending time

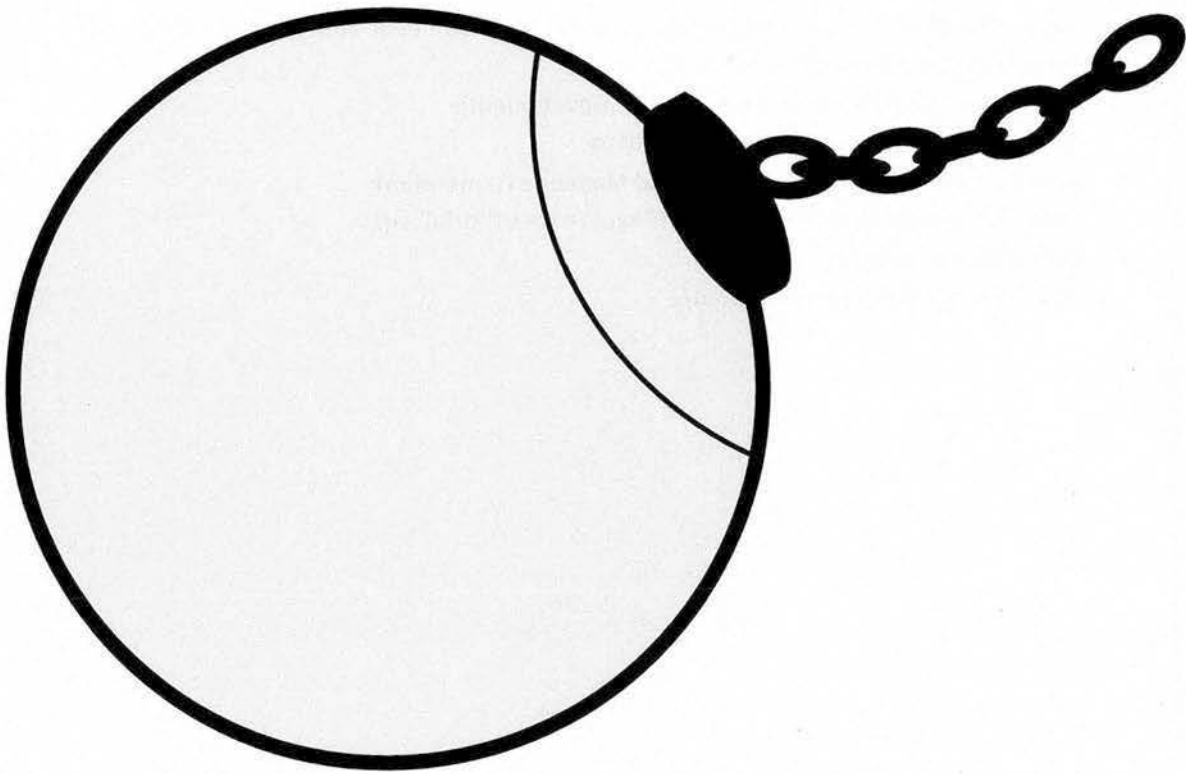
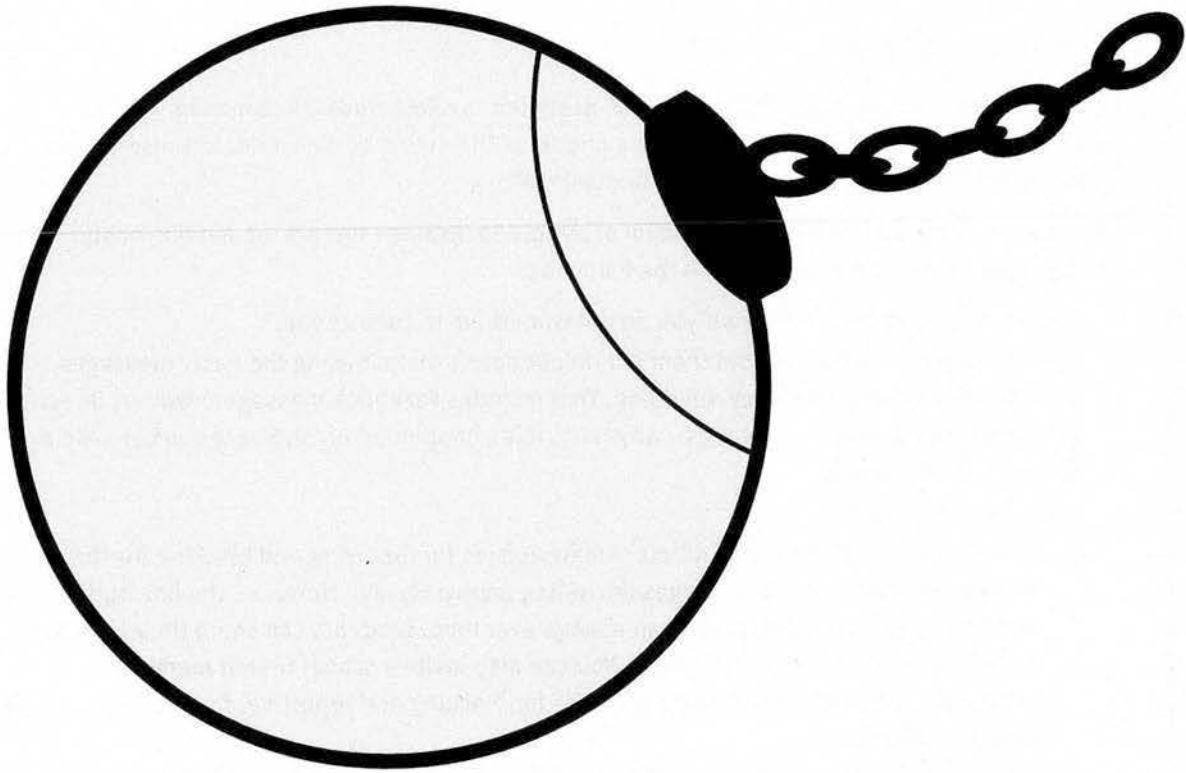
LEARNING SEQUENCE 3 Activity • Brick

AusVELS Level 8 Learning Sequence 3



LEARNING SEQUENCE 3 Activity • Wrecking ball

AusVELS Level 8 Learning Sequence 3



Teacher notes

Web harassment

The 'Brick walls and wrecking balls' activity is designed to allow students to manage face-to-face relationships; however, considering the impact of the online social world, it is also a good opportunity to introduce the topic of web harassment.

Let students know that if they are the victim of people spreading rumours, or sending nasty, creepy types of messages, they can do the following:

- Tell the person to stop it and that you do not want them to contact you.
- Ignore any more messages from them but *do not* delete them. Saving the nasty messages provides evidence of what they are doing. That includes Facebook messages, Twitter, Direct Messages (DMs), emails, chat logs – anything. If it's happening on MySpace you can take a screenshot and save it.
- Report it and block it.
 - Social media platforms have different mechanisms for reporting and blocking hurtful or offensive comments and images (including anonymously). However, the link buttons and locations on the web pages can change over time. Students can share their technical knowledge with the rest of the class. You can also invite a school IT staff member to class to demonstrate the latest methods for blocking and reporting, for example, within Facebook.
- If the person keeps doing it they could be harassing you, which is illegal. Tell a responsible adult and ring the police for advice if you are getting scared and upset.

You may find the below websites useful.

- 'Love – the good, the bad and the ugly' (produced by Domestic Violence Centre Victoria):
<<http://lovegoodbadugly.com/>>
- 'Cybersmart' (produced by the Australian Government):
<http://www.cybersmart.gov.au/Teens.aspx>
- 'eSmart' (produced by The Alannah and Madeline Foundation):
<<https://www.esmartschools.org.au/Pages/eSmartPortal.aspx>>
- Bullystoppers website:
<http://www.bullystoppers.com.au/>.

3 Think twice

LEARNING INTENTIONS

- To allow students to explore who they would like to be.
- To facilitate conversations about internet safety and privacy.
- To provide students with personal strategies for enhancing sexual health during puberty.

Preparation and materials

- ✓ copies of the four 'Image and profile' worksheets, two sets
- ✓ A3 copies of the worksheet 'Privacy – who sees what?', one per group
- ✓ information sheet 'Social networking safety tips', one per student
- ✓ equipment for viewing internet videos *Think What's Next* and *Think What's Next – 2*
<<http://www.chnny.org/services/teen/more-than-just-sex-campaign/>>

Introduction

Introduce the activity with the idea that sometimes we like to portray ourselves in different ways. When we are with our families it may be one way, with friends, another; and when we want to make a statement about ourselves or get someone to take an interest in us, that's yet another way. We do this in the way we look, dress, walk, talk etc. Is it OK for these images of ours to cross boundaries? For example, would you want your parent or carer to see the image you portray with your friends? Would you like your classmates to see the image you portray with your family?

Instructions

- 1 Divide the class into eight small groups. (If your class is very small you can create four groups. In this case you will only need one set of the four 'Image and profile' worksheets.)
- 2 Hand out one of the worksheets to each group. This means that two groups will have the same worksheet which makes for a more interesting discussion. Allow a few minutes for students within each group to share their impressions of the image.
- 3 Hold a brief class discussion on the following questions: What assumptions have you made about the people in these photos? Would you invite them to be a friend? Why? Why not?
- 4 Next, hand out one copy of the worksheet 'Privacy – who sees what?' to each group.
- 5 Using the 'Image and profile' worksheet, ask the groups to complete the 'Privacy – who sees what?' worksheet for their image. To do this, students will need to read the profile under the image and consider with whom the person would want to share this information. Remind students to think about the 'statement' each person is trying to make and base their decisions on that.

Discussion questions

- Ask groups to provide feedback on who they thought their given profile should be shared with. Discuss the differences between groups with the same image.
- What needs to be considered for each of these people when putting up an image?
- Would you do it differently? How?

Wrap up

It's OK to portray different images of ourselves. Nearly everyone does. When you go out to a really nice place, you often take more time with your appearance. While you're there, you often modify your behaviour and speech to fit in with the group. Hand out the 'Social networking safety tips' information sheet to students and discuss.

Finish up by showing the two videos (*Think What's Next* and *Think What's Next – 2*) then discuss whether or not these videos portray a real possibility

<<http://www.chnnyc.org/services/teen/more-than-just-sex-campaign/>>.

(These videos have been developed by Community Healthcare Network, New York City

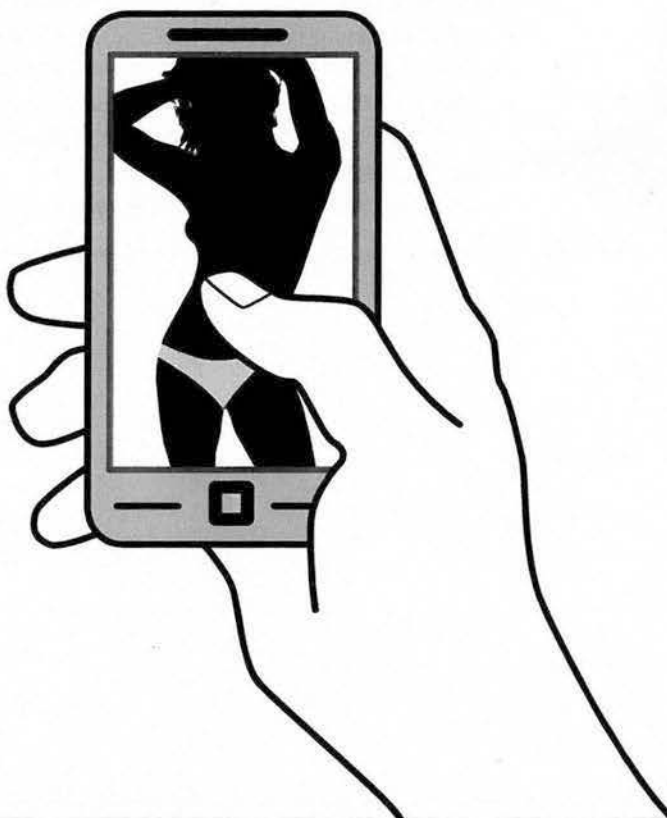
<<http://www.chnnyc.org/services/teen/>>)

Social networking safety tips

STAY IN CONTROL – GUARD YOUR PRIVACY

Social networking sites are used mostly to connect with friends you know in the real world, so you might not think about strangers getting hold of your personal information such as mobile number, email address or where you live. But it is important to think about the information you post on your page and on other people's. Here are some things to consider:

- Before setting up your profile, think about who you want to see your personal information.
- Different social networking sites have different privacy settings – read about these carefully before deciding who you want to access your personal information.
- If you only want people you know to see information about you, set your profile to 'private'. This is the recommended option.
- Every now and again, look through your contacts or friends and make sure you still want them to know your personal details. Remember, it's not how many people you know but how well you know them.
- 'Private' mode may be safer than 'public' mode, but arguments can still occur between friends. People you know could use something you have posted against you; for example, to bully you or to damage your reputation. Think very carefully about what you share with your friends. It is important to protect your password – don't give it to your friends even for fun. If you give it to them, you just cannot be sure who they might pass it on to.
- If you use your mobile to access social networking sites, remember phones can be easily lost or stolen and you don't know who could get your information, or pretend to be you. Put a PIN lock on your mobile so it can't be used without your permission.
- If your computer or mobile remembers your password, use a PIN number or password every time you sign in.
- Make sure that you register your real age so that other people don't think you are older than you are.



Social networking safety tips (continued)

'GOING PUBLIC'

If you intend to share your profile and content with everyone who is online, there are several things to think about:

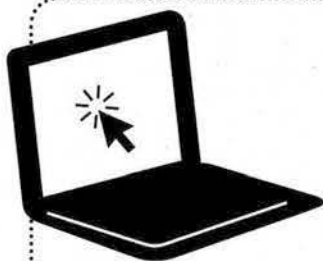
- Are you sure you want to do this? You won't be in control of who will see your information.
- Be cautious – 'going public' may lead to things you didn't mean to happen. Be careful about the kind of information (including images) you share about yourself and how you manage your online reputation. Other people can pass on or change your information and you might not be able to stop them or delete it afterwards.
- Remember, when you go public it is not just 'friends of friends of friends' but also complete strangers who will be able to see your content, and search and find you online.
- Some social networking sites have a range of settings between public and private – select the one that is appropriate for you.

DID YOU KNOW?

It's possible for you to view what your 'friends' are seeing of your Facebook page. Check it out. Is this what you're happy for them to view? Here's how:

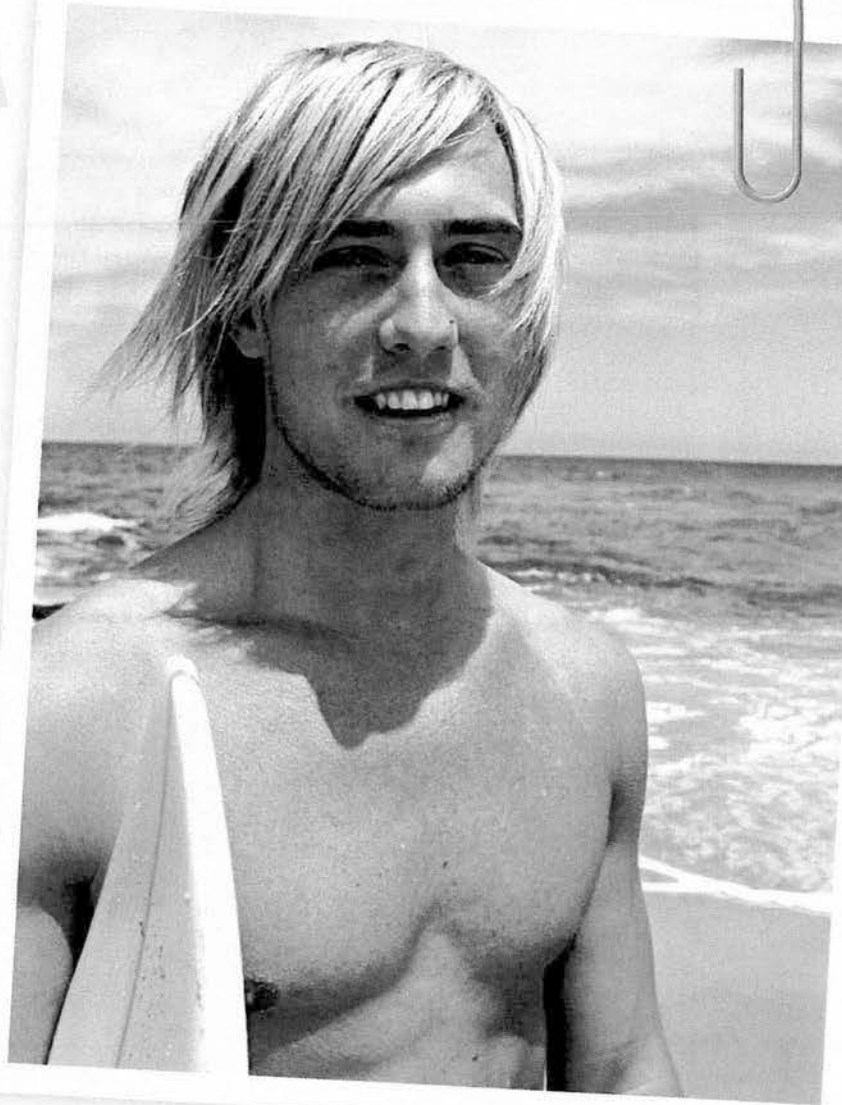
- log in then click on your name at the top right
- click on the 'View As...' button at the top right
- click on 'public' link (within the paragraph at the top of the page) to see what everyone can see
- enter a friend's name to see what they can view.

Be sure to check your privacy settings regularly. Over time they may be changed by your social media site without your knowledge.



WEBSITES FOR SOCIAL NETWORKING AND TEEN SAFETY

- Australian Institute of Criminology, Australian Government: http://www.aic.gov.au/crime_types/cybercrime/prevention.aspx
- 'eSmart' (The Alannah and Madeline Foundation): <https://www.esmartschools.org.au/Pages/eSmartPortal.aspx>.
- Teenshealth (from Nemours) : http://kidshealth.org/teen/safety/safebasics/internet_safety.html#



PROFILE 1

Name	
Age	16
Gender	Male
Relationship Status	Just split up
My Interests	Music and videos



PROFILE 2

Name	
Age	15
Gender	Female
Relationship Status	No one special
My Interests	Hanging out with friends and listening to music

LEARNING SEQUENCE 3

Worksheet • Image and profile 3

AusVELS Level 8 Learning Sequence 3



PROFILE 3

Name	
Age	16
Gender	Female
Relationship Status	Looking for someone
My Interests	Films and music. Fashion

iStockphoto © davidf



PROFILE 4

Name	
Age	15
Gender	Male
Relationship Status	Looking for same sex partner
My Interests	Sport

Privacy – who sees what?

PROFILE NUMBER AND NAME:	
✓ Tick the settings you want to use	
PERSONAL DETAILS	<input type="checkbox"/> Everyone
	<input type="checkbox"/> My Friends
	<input type="checkbox"/> My Friends' Friends
	<input type="checkbox"/> Only Special Friends
MY BIO	<input type="checkbox"/> Everyone
	<input type="checkbox"/> My Friends
	<input type="checkbox"/> My Friends' Friends
	<input type="checkbox"/> Only Special Friends
MY INTERESTS	<input type="checkbox"/> Everyone
	<input type="checkbox"/> My Friends
	<input type="checkbox"/> My Friends' Friends
	<input type="checkbox"/> Only Special Friends
PHOTOS OF ME	<input type="checkbox"/> Everyone
	<input type="checkbox"/> My Friends
	<input type="checkbox"/> My Friends' Friends
	<input type="checkbox"/> Only Special Friends
RELATIONSHIP STATUS	<input type="checkbox"/> Everyone
	<input type="checkbox"/> My Friends
	<input type="checkbox"/> My Friends' Friends
	<input type="checkbox"/> Only Special Friends

Overall, how public should this person go?

LEARNING SEQUENCE

4

Degrees of love

- 1 Loves me, loves me not
- 2 How do I know?

AusVELS LEVEL 8

HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion*

- › physical, social and emotional changes during adolescence.

INTERPERSONAL DEVELOPMENT – *building social relationships*

- › respect for the individuality of others and acknowledgement of diversity of individuals
- › differing values and beliefs held in local, national and global contexts and the impact these have on relationships
- › the influences of peers on behaviour
- › strategies to build and maintain positive social relationships.

1 Loves me, loves me not

LEARNING INTENTIONS

- To assist students in understanding degrees of love in a relationship through the use of images.
- To recognise and consider the importance of relationships.

Preparation and materials

- ☑ equipment for showing Daisy PowerPoint presentation (If using PowerPoint is not an option, prepare the daisies provided at the end of the activity. You will need to photocopy them onto A4 paper or card and cut along the dotted line of each. Only one set required.)

Note: the Daisy PowerPoint presentation is available online at:

<<http://www.education.vic.gov.au/school/teachers/teachingresources/social/phised/Pages/resources.aspx#3>>.

Introduction

This activity is intended to be a quick and fun warm-up to introduce students to the notion that there are degrees of love.

In the preceding learning sequences we have talked about the relationship we have with our selves, looking at how we define personal values, before considering different qualities of friendship and group membership. Now we move on to romantic relationships and the idea that it can take time to really know someone. The aim is to promote the idea that there can be fun and enjoyment in this getting-to-know-you phase of romantic relationships. Teacher notes have been provided for your information regarding stages of development related to this area.

The daisies provided in the accompanying PowerPoint file represent variations of the same game played in different countries (not identified) around the world.

Instructions

- 1 Using the PowerPoint presentation, demonstrate the different versions of the game 'Loves me, loves me not' from around the world. (An alternative to the PowerPoint is that students could volunteer to read out the following three scripts. Make sure you choose robust students who can take some teasing.)

DAISY 1: *He/she loves me a little, a lot, passionately, madly, not at all.*

DAISY 2: *He/she loves me, he/she likes me, he/she respects me, he/she doesn't want me, he/she doesn't care, he/she makes fun of me, in her/his mind, in his/her speech, in his/her heart, at the wedding carpet.*

DAISY 3: *He/she loves me, loves me not, spits at me, kisses me, presses me to his/her heart, sends me to the devil.*

COMMON DAISY: *He/she loves me, loves me not.*

- 2 Read out the petals starting at the bottom right, clicking the mouse as you read each petal. Move around the daisy in an anticlockwise direction. The petals will disappear from the slide with each mouse click as if you were picking them off.
- 3 If you are using the cut-out daisies, fold each petal under the flower after you have read it.

Discussion question

- o What's the difference between the 'Common daisy' and all the others? The 'Common daisy' only has two choices whereas the others have several degrees of love.

Wrap up

Thinking about the discussion we have had, you can see that it doesn't have to be just yes or no, black or white. There are shades of grey, such as 'I think I like you' and 'let's get to know each other better'.

HOMEWORK TASK

Ask the students to discuss with a parent, carer or other adult the following questions:

- How did you know that you were in love the first time?
- What were the feelings or behaviours that were different from the everyday?
- How did you know that someone loved you?

Back in class, ask the students to feed back the information from their discussions with their parent, carer or other adult. What are the similarities?

Teacher notes

Stages of sexual development and relationships in adolescents

There is a developmental trajectory to the types of romantic relationships young people are ready for. This trajectory should reassure those who are not yet interested in relationships, as well as promoting a degree of caution – among those who *are* interested – with regard to expectations of romantic relationships at this age and stage of life.

Some people will be here (12–14 years):

- Girls will be interested sooner than boys in having a love interest.
- Most people this age benefit from friendships and group activities. They are learning and practising relationship skills before tying their cart to one horse, so to speak.
- Some people will be more interested in the social status of having a girlfriend or boyfriend than in the actual person (so if you feel that someone is using you, you could be right).

Others will be here (14–16 years):

- At this age, there is definitely more interest in romantic relationships but they tend to be short-term. That's OK because you are still growing and changing a lot, so having a lifelong love with someone you meet now is unlikely. Coping with heartbreak and being crazy about someone can be exciting and tough too.
- You experience feelings of love and passion.

You are moving towards here (17–19 years):

- You are concerned with serious relationships.
- You have a clear sexual identity.
- You have capacities for tender and sensual love.

Daisy 1

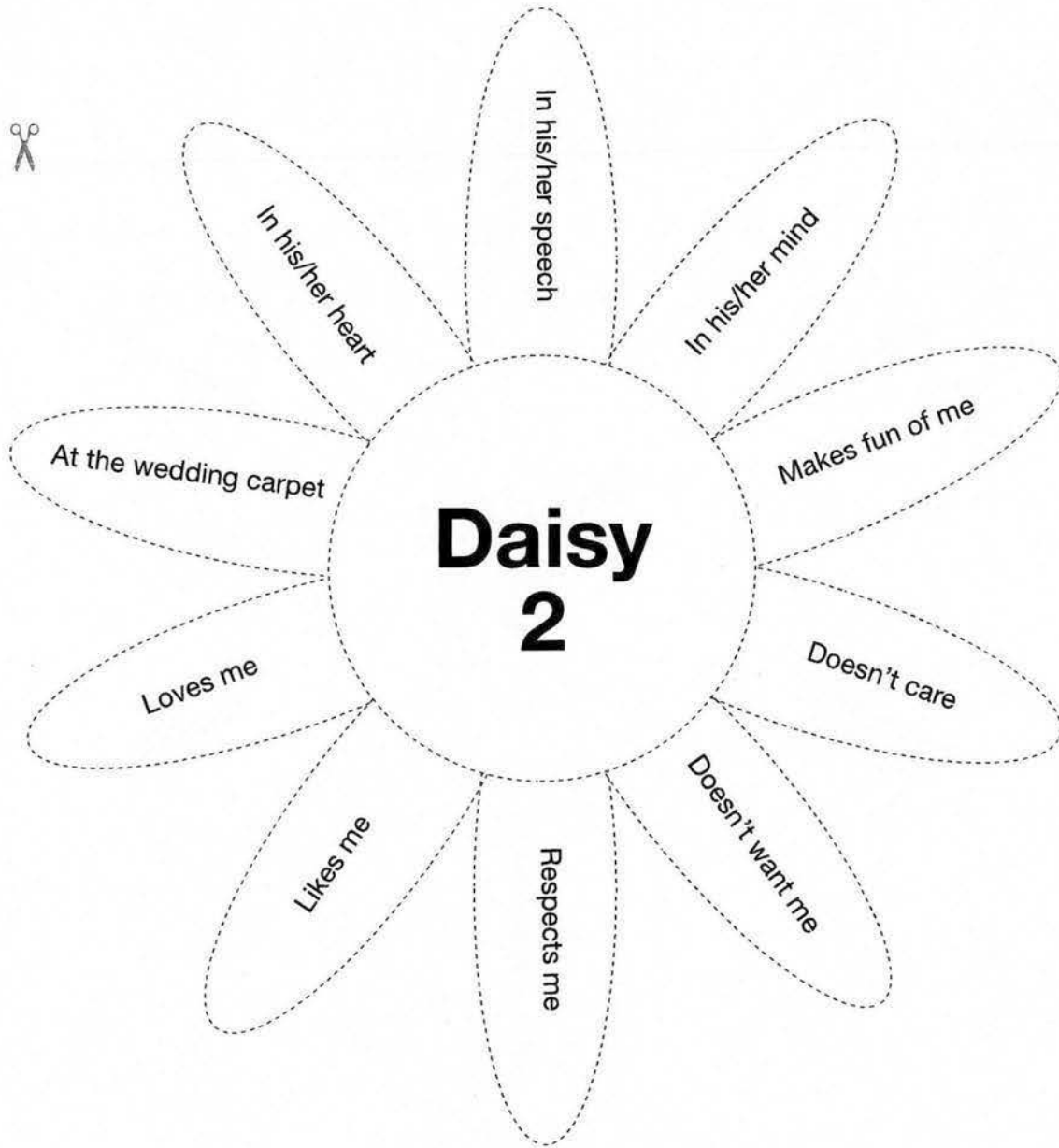
Loves me not at all

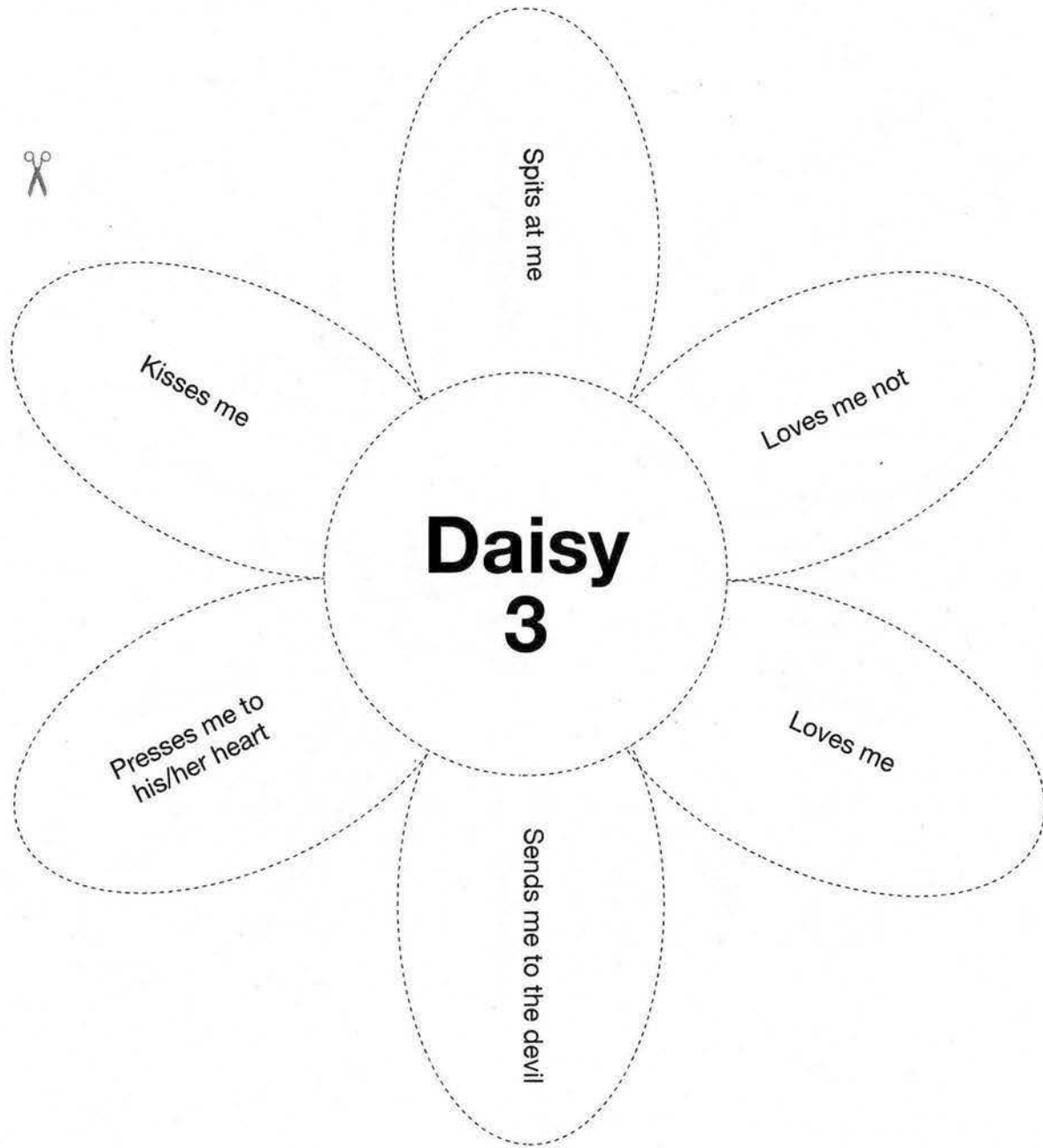
Loves me madly

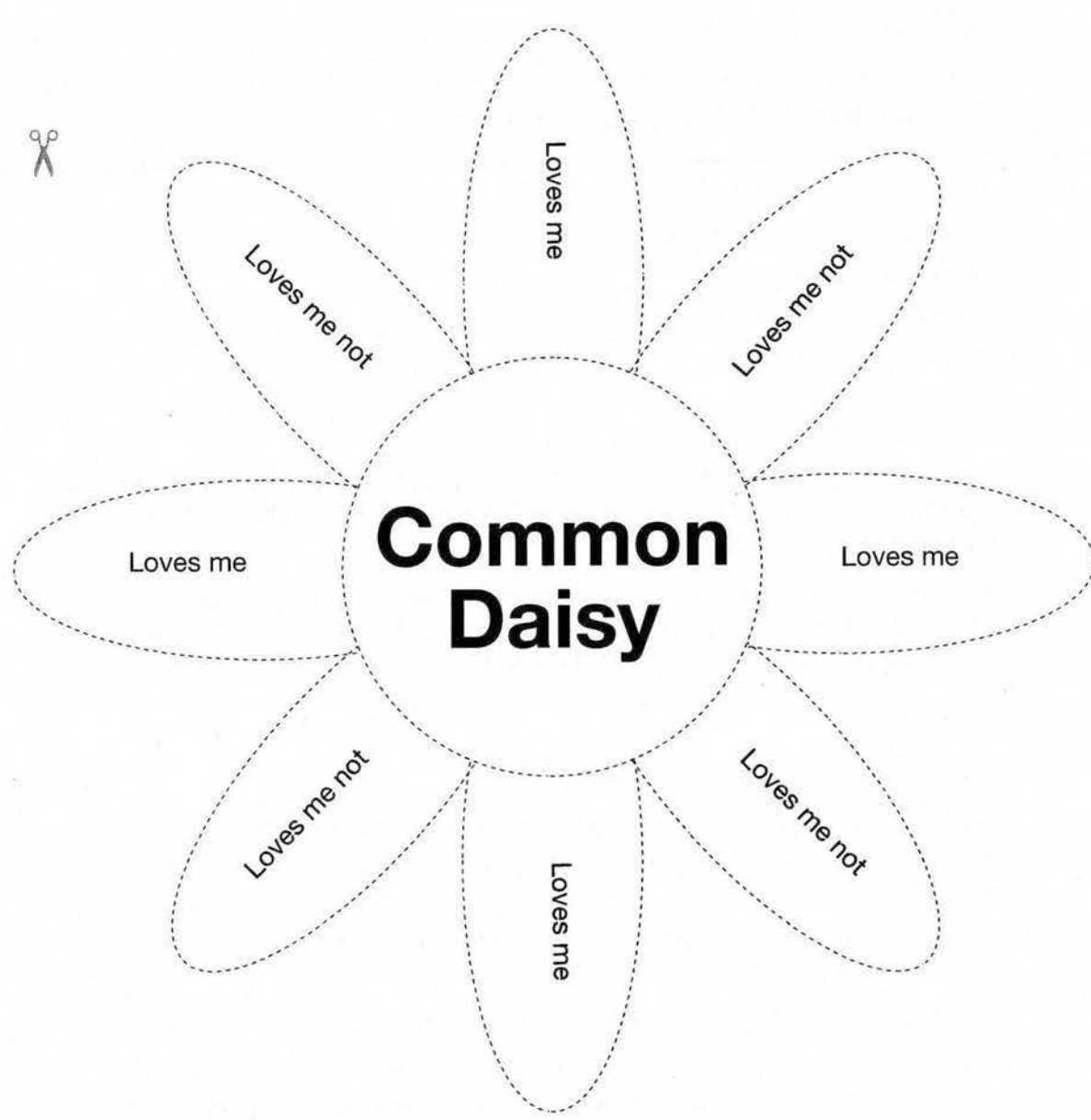
Loves me passionately

Loves me a lot

Loves me a little







2 How do I know?



LEARNING INTENTIONS

- To discover and discuss safe and comfortable ways to get to know someone better.
- To recognise and consider the importance of relationships.

Preparation and materials

- ✓ cards 'How do I know?', one set per group
- ✓ markers, one per group
- ✓ A3 or larger paper, one sheet per group
- ✓ glue sticks, one per group

Introduction

Decisions about sex and relationships are personal and different for different people. They may be affected by beliefs, faith, culture, friends, and a desire to fit in. It is important for each person to make choices in their own time.

Introduce this activity with these questions: How do you know that someone likes you or is interested in you? How do you let someone know that you're interested in them? Also tell the students that we are going to broach the subject of sex in relationships today as well.

Instructions

- 1 Divide the class into groups of four to six.
- 2 Give a large sheet of paper to each group and ask them to divide it into four columns with the following headings: 'they love me'; 'they like me'; 'they don't care for me'; 'they disrespect me'.
- 3 Hand out a set of 'How do I know?' cards to each group and ask the students to try to sort them into the four columns then paste them on.
- 4 Ask each group to display their poster on the wall for all to see.
- 5 Discuss the following: Which signs might mean liking in one situation and not liking in another? How do you know if you like them too? What words or gestures would people your age feel comfortable using to show someone they like them? Remind students that it is difficult to learn to read the signs, which is why it helps to get to know someone better and why people might choose not to get emotionally involved at this stage of their lives.
- 6 Ask students to find a partner within their group and together write down the top ten qualities they would like in a relationship.

Discussion questions

- What are the most important qualities of a relationship? Each pair can feedback their top two or three.
- Are the priorities the same for boys and girls? (This may have been part of the partner discussions when deciding their top ten.)
- How important is sex in a relationship?

Wrap up

Select some of the 'Teacher notes: Is everyone having sex?' to share with the students.

Remind students that it's good to get to know someone, have fun together and feel like you can be yourself. Having a good relationship doesn't mean you have to engage in sexual activity – whether it's kissing, touching, oral sex or intercourse – if you are not ready or feel unsure. Whatever you do, it should always be something you both want to do.

Teacher notes

Is everyone having sex?

No.

One quarter of Year 10 students and just over half of Year 12 students had experienced sexual intercourse. Less than 50 per cent of Year 10 and 12 students had experienced oral sex.

(Secondary school students and sexual health 2008, Australian Research Centre for Sex, Health and Society, La Trobe University, 2009.)

We do not have Australian statistics on younger students.

Is sex as good as the movies make out that it is?

Most students report positive feelings after having sex; however, for young women there is some evidence of a decline in more positive feelings between the 2002 and 2008 surveys. This tends to be related to the age of the person when they first have sex. That is, the older they are the more likely it is to be a 'happy' experience.

Is everyone using condoms?

In 2008 most students (69 per cent) reported using a condom the last time they had sex and half the sample of sexually active students always used a condom when they had sex in the previous year.

Same-sex attraction

Nine per cent of students reported attraction to people of the same sex. This number includes people who are unsure and who are attracted to both males and females.

Unwanted sex

In the survey carried out in 2002, 28 per cent of young women reported ever having unwanted sex. In 2008 that number had increased to 38 per cent. Students cited being too drunk (17 per cent) or pressure from their partner (18 per cent) as the most common reasons for having sex when they did not want to.

(Smith et al., 2008, Chapter 5, p 25–47)

Forced or frightened into sex

A large study of Australian men and women found that a small proportion of men (4.8 per cent) and a much larger proportion of women (21.1 per cent) had been forced or frightened into unwanted sexual activity. Many of them (2.8 per cent men and 10.3 per cent women) were 16 years of age or under when this occurred.

(de Visser, R. et al., 2007, Volume 27 Issue 2, pp. 198 – 203)

LEARNING SEQUENCE 4 Cards • How do I know?



Helps me with my homework	Sits next to me	Won't sit next to me
Sends someone to tell me that he or she likes me	Calls me by my name	Has sex with me
Doesn't want me to see my friends	Makes me feel OK when I say what I really think rather than feeling like they'll dump me	I feel like I can be myself
Won't kiss me	Gets really jealous if I talk to other people	Talks to me
Phones me	Brushes against me when we pass by each other	Shares important secrets and feelings
Smiles at me	Wants to spend time with me	Listens to me
Asks my opinion	Laughs at me	Puts me down
Invites me to be a friend on social networking	Throws paper at me	Sends me a smiley text
Wants to hold my hand	Wants me to give her/him oral sex	Keeps me a secret from their friends
Holds my hand when no one is around	Kisses me	Borrows my calculator during class

LEARNING SEQUENCE

5

Talking about sex and relationships

- 1 When is the right time?
- 2 Why do people have (or not have) sex?
- 3 Choices and effects – sexually transmissible infections (STIs) continuum
- 4 Contraception – hope is NOT a method

AusVELS LEVEL 8HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion*

- › physical, social and emotional changes during adolescence
- › the influence of family on personal identity and values
- › community attitudes and laws influencing the sense of right and wrong
- › sexual health of young people (e.g. safe sex, contraception, abstinence, prevention of STIs)
- › access reliable information about health issues
- › barriers and enablers to accessing health services.

INTERPERSONAL DEVELOPMENT – *building social relationships*

- › respect for the individuality of others and acknowledgement of diversity of individuals
- › differing values and beliefs held in local, national and global contexts and the impact these have on relationships
- › the influences of peers on behaviour.

1 When is the right time?

LEARNING INTENTIONS

- Through discussion, come to an understanding that the decisions one makes about relationships and sex are individual. They may be influenced by beliefs, faith, culture, friends, and the desire to fit in.
- To explore the notion that the choices we make can change depending on who we are and what's happening around us now.

Preparation and materials

- ✓ A5-sized cards 'Ages 12-40', one set for the class

Introduction

The purpose of this activity is to help students to consider their own values and boundaries around sexual activity. We also want them to hear from other students, and to consider the range of perspectives on this topic.

Instructions

- 1 Tell the students you are going to ask for their opinions about the 'right age' for a list of different scenarios. Refer to the classroom rules (Learning sequence 1, activity 2) before beginning this activity.
- 2 Place the cards along the wall with age 12 at one end and age 36–40 at the other.
- 3 Read out statement 'a' from the list below then ask students to move to the card that best represents the age at which they think this scenario should occur. Students who have chosen the same card should then discuss amongst themselves why they have chosen this particular age.
- 4 Ask one representative from each group to report their findings to the class.
- 5 Invite students to change groups if they would like to once they have considered all the perspectives.
- 6 Read out statement 'b' then repeat instructions 3-5.
Read and discuss the information in the 'Teacher notes' regarding the age of consent. Again, invite students to change groups now they have new information.
- 7 Repeat the process with statements 'c' and 'd'.

SCENARIOS:

- a the age to have a relationship
- b the age to have a sexual relationship
(you could also ask: the age to have intercourse or oral sex)
- c the age to have a baby
- d the age to use contraception.

Discussion questions

- Did you agree with your friends about the right age for each scenario?
- Does your opinion about the appropriate age ever change?
- Reflect on the identity disc you made earlier in this program (Learning sequence 3, activity 1). How do your choices now match your values and what is important to you?
- Why do you think that people we know very well may still have chosen differently from ourselves?
- Where would your parents stand? A representative of your school? Your peers?
- Imagine your parents at the age you are now... how might their answers have been different? What has changed between then and now that might explain these differences?

Wrap up

It's important to remember that there is quite a range of values and beliefs, even in our class. There is not one rule for everyone. Thinking back to your identity disc, what sort of relationship would you feel comfortable with at this time? This is information for the private section of your disc so you don't need to share it with the class, but you may find it useful to think about when making decisions regarding the types of relationships you are ready for.



AGE
12–13

AGE
14

AGE
15

AGE
16–18



AGE
19–21

AGE
22–30

AGE
31–35

AGE
36–40

Teacher notes

Below are just two aspects involved in determining the appropriate age for a sexual relationship. There are countless more, such as family and religious values, cultural expectations etc.

Sex and emotional readiness

Sex is meant to be:

- something you decide to do when you're ready to
- something that makes both participants feel good
- something both people agree to and are mentally old enough to be able to consent to
- something you can interrupt or stop at any time
- safe (because you're both prepared with condoms to protect you from sexually transmissible infections and unwanted pregnancy)
- something you are legally old enough to engage in
- honest – emotionally and factually honest
- mutual – a shared, two-way intimate experience.

Sex *isn't* meant to be:

- the only way to prove that you love someone
- something you feel pressured or forced into
- something you do because 'everyone else is doing it'
- something that makes you feel used
- about using someone else for sex alone.

Sex and the law

Age of consent

There are no laws about when you can start to have a relationship with someone else but there are laws about when you can start to have sex.

If you are *12 to 15 years of age*, a person can't have sex with you, touch you sexually or perform a sexual act in front of you if they are more than two years older than you – even if you agree. And that means two years *exactly*. If they are two years and four days older, it is still against the law.

At *16 to 17 years of age*, a person who is caring for you or supervising you, like a teacher, youth worker or foster carer, can't have sex with you, sexually touch you or perform a sexual act in front of you – even if you agree – unless they are married to you.

When one person does not agree to sex

As well as imposing age limits, the law says that two people can't have sex unless they both agree (consent) to. If you don't agree and someone threatens you or touches you sexually they are breaking the law.

If someone has sex with you or touches you sexually when you are asleep, unconscious or so affected by alcohol or drugs that you are not able to agree, it is still sexual assault.

Mobile phone pictures and the risks of 'sexting'

'Sexting' or sending 'sex' messages refers to situations where nude and/or sexual images are taken on a mobile phone, tablet, web-cam or other device, often by young people and their friends. This is a crime if the photo includes a person under the age of 18. 'Sexting' is already leading to young people being charged by the police with child pornography offences.

Taking or sending pictures of your friends on your mobile phone or other device, or posting them online, especially if they are not fully dressed and *even if they agree*, could end up with you being charged by police for committing a criminal offence.

(Adapted from the Victoria Legal Aid website – <http://www.legalaid.vic.gov.au/745.htm>.)

Useful websites

- 'Love: the good, the bad and the ugly' produced by the Domestic Violence Centre Victoria
<<http://lovegoodbadugly.com/>>
- 'Cybersmart' produced by the Australian Government
<<http://www.cybersmart.gov.au/Teens.aspx>>.

Recommended legal resources for teachers and students

Am I old enough? is a handy booklet for young people about the law. Order or download for free at:
www.legalaid.vic.gov.au/583.htm

Young people and the law is a teachers' kit. Order or download for free at:
www.legalaid.vic.gov.au/803.htm

2 Why do people have (or not have) sex?



LEARNING INTENTIONS

- To explore the attitudes others may have to engaging in an intimate relationship, and to reflect on how one's own attitudes have been influenced.
- To explore the concept of safer sex and what it means in a sexual relationship, i.e. to increase student comfort and confidence around safer sex practices, sexual decision-making, and knowledge of STIs.

Preparation and materials

- ✓ large paper, one sheet per group
- ✓ markers, one per group

Introduction

Good sexual health means making sure you have the knowledge, skills and ability to make informed sexual choices and act responsibly to protect your health and the health of others.

Note that while there are a lot of different things people can do with and for each other that are sexual, when we refer to 'sex' in this activity we mean vaginal, anal and oral sex.

Instructions

- 1 Divide the class into an even number of small groups. Half of the groups brainstorm the following question: Why would a young person decide to have sex with someone? The remaining groups brainstorm this question: Why would someone decide *not* to have sex with someone?
- 2 Ask the groups to report back and list the findings on the board in two columns:
 - a reasons why people say 'yes' to sex
 - b reasons why people say 'no' to sex.



Discussion questions

- There are a whole range of factors that influence people's decisions about sex. People expect different things from sex, and sex can have a variety of personal meanings to different people. What are some of the reasons one person might say 'no' to any kind of sex for a long time, while another person might say 'no' for the moment, or 'yes'?
- People can say 'yes' to sex but there are laws they need to be aware of, e.g. the legal age of consent. What are some of the rules for having sex?

(See Lawstuff: know your rights – http://www.lawstuff.org.au/vic_law/topics/sex/article)

- Sometimes people have sex because they believe everyone else is doing it. What percentage of Year 10 Australians do you think have ever had sexual intercourse? (According to the 4th National Survey of Australian Secondary Students conducted in 2008, 27.4 per cent of students have ever had sexual intercourse. 'Have ever' may mean it has only happened once. This means that around 72 per cent of Year 10 students have never had sexual intercourse.)
- What are the implications if a person says 'yes' to sex? What is safer sex and why do we say 'safer' instead of 'safe' sex? What are some safer sex practices that become a person's responsibility when they get involved in a sexual relationship?

Teacher advice

If your students have not participated in the extra activities from AusVELS Level 7 'Teacher's choice' Learning sequence 2, this would be an ideal time to include them.

Wrap up

No-one has the right to force someone to have sex. No-one ever 'owes' anyone sex. 'Yes' feelings can change to 'no' feelings and people need to be aware of respecting one another when feelings change.

When someone begins to engage in sexual activity, there are different ways this can affect their health – not just physical but emotional health as well. For example, feeling happy or sad with one's relationship; neglecting existing friendships; getting pregnant or getting an STI. Hopefully there will also be positive consequences, and being well-informed can increase the chance of a person making healthy, responsible choices.

Teacher notes

Reminders regarding safer sex

Pregnancy can occur without intercourse if sperm is ejaculated near the entrance of the vagina. STIs such as genital herpes and genital warts can be passed through skin-to-skin or skin-to-genital contact. Possible consequences of unprotected sex, therefore, include exposure to an STI and/or HIV, pregnancy, and a range of emotional impacts.

Holding off from sexual activity that involves exchange of bodily fluids and/or genital-to-genital or skin-to-genital contact is the only 100 per cent sure way of avoiding the risk of pregnancy or sexually transmissible infections (STIs). Having just one sexual partner and protected sexual intercourse are the next best alternatives.

Once you become sexually active, you can practice safer sex by limiting your number of sexual partners and using condoms and contraceptives properly and consistently.

A definition of 'sexual health': World Health Organization (WHO)

Sexual health is a state of physical, mental and social wellbeing in relation to sexuality. It 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.

(from World Health Organisation 'Health Topics' – http://www.who.int/topics/sexual_health/en/)

A brief note on pornography

The prevalence of pornography may lead you to think that what it depicts is what sex really is, and what is required for good sexual performance. As most porn shows girls and women 'giving' to the man and 'enjoying' a range of sex acts that are very male-focussed, with the man in control and often aggressive/in charge/the boss, it gives an unnatural account of what real and good sex is like, and the emotional ups and downs of it.

3 Choices and effects – sexually transmissible infections (STIs) continuum



LEARNING INTENTION

- To explore the concept of safer sex and what it means in a sexual relationship, i.e. to increase student comfort and confidence around safer sex practices, sexual decision-making, and knowledge of STIs.

Preparation and materials

- ✓ cards 'Choices and effects – statements about STIs', one set per group
- ✓ information sheet 'STIs – the facts', for teacher use

Introduction

Sexually transmissible infection (STI) resources often focus on signs and symptoms rather than values and feelings. This activity encourages participants to explore a range of issues around STIs.

In the first place, young people need to know that STIs exist, and that if they engage in sexual activity they are at risk of becoming infected with one. If anything looks, feels or smells different, or they have any concerns about STIs, they can get advice, tests and treatment at a sexual health clinic, a general practice, a contraception clinic or a specialised young people's service. They can also reduce their chances of contracting many STIs by using condoms correctly and consistently.

Instructions

- 1 This activity can be done as one large group or in smaller groups. Small groups can sometimes elicit more discussion and help students feel comfortable. Remind students that one of the issues that might affect a young person's decisions about sex is STIs.
- 2 Place the 'agree' and 'disagree' cards at opposite ends of a table. Explain that the space between the cards is a continuum, ranging from 'agree' at one end to 'disagree' at the other.
- 3 Ask the group to sit in a circle(s). Place the 'Choices and effects' statement cards face-down in the centre of the group.
- 4 Ask each person in turn to pick up and read out a statement about STIs. They then place the card somewhere on the continuum, explaining why they have put it there. The rest of the group can then join in the discussion about where they would place it and why.
- 5 As cards are being discussed and placed, the teacher can use the information sheet to correct any false statements about STIs and confirm where the statement cards should best go on the continuum.

Wrap up

Remind students of the following key points:

- no one has the right to force someone else to have sex
- no one ever 'owes' anyone sex
- 'yes' feelings can change to 'no' feelings and people need to be aware of respecting one another when feelings change.

There is no right time for you to have sexual intercourse. Hopefully activities like this give you a chance to explore whether or not you are ready, and the consequences of this decision. If you and your partner both agree that this is the right time to have sex, if there is no pressure on either of you to do so, and if you have had the chance to discuss safe sex with your partner, then you are on your way to being well-informed and can increase the chance of making healthy, responsible choices.

Invite the class to write anonymous questions about anything discussed so far to put in the Question Box (as created in Learning sequence 1, activity 3). Explain that the questions will be answered in the next session.

(This activity was adapted from Gadd and Hinchliffe, 2007, pp. 56–60.)



LEARNING SEQUENCE 5

Cards • Choices and effects – statements about STIs



Agree

Disagree

You can't catch sexually transmissible infections if you only have oral sex.

Getting infected with chlamydia can make it harder to have babies in the future.

Some sexually transmissible infections can be fatal.

You can't catch a sexually transmissible infection if you or your girlfriend is using contraception like the contraceptive pill or the contraceptive injection.

Sexually transmissible infections are harmless.

I would be happy to ask the person I am about to have sex with if they think they might have a STI or are at risk of getting one.

Only people who sleep around catch sexually transmissible infections.

You can always tell if you have caught a sexually transmissible infection.

You can only get HIV if you are gay.

Sexually transmissible infections will go away by themselves if you just ignore them.

It is embarrassing to talk about using condoms with the person you want to have sex with/are having sex with.

It's my sexual partner's fault if I catch a sexually transmissible infection.

People like me don't catch sexually transmissible infections.

If my friend told me that they had caught a sexually transmissible infection I would think they were dirty.

It is possible to help protect yourself against sexually transmissible infections.

If I have itchy genitals I've definitely got a sexually transmissible infection.

You can't catch HIV from toilet seats.

If my friend told me they thought they might have a sexually transmissible infection I would know what advice to give them.

Young Australians accounted for over 80 per cent of the cases of chlamydia in 2009.

Most sexually transmissible infections are easily treatable.

STIs – the facts

The below statements would definitely go at the 'AGREE' end of the continuum.

Getting infected with chlamydia can make it harder to have babies in the future.

In women, if chlamydia is not treated it can cause pelvic inflammatory disease (PID) which can lead to infertility. In men, if chlamydia is not treated it can lead to a painful infection in the testicles and possibly reduced fertility.

Some sexually transmissible infections can be fatal.

Most STIs can be easily treated. For some infections, such as HIV, the infection never leaves the body but there are drugs available that can reduce the symptoms and help prevent or delay complications. If HIV isn't treated it will cause long-term damage and will develop into AIDS (which can cause death). Untreated syphilis may, after many years, start to cause very serious damage to the heart, brain, eyes, other internal organs, bones and nervous system. At this stage, syphilis can lead to death.

It is possible to help protect yourself against sexually transmissible infections.

You can help protect yourself against STIs:

Use a male or female condom every time you have vaginal or anal sex.

If you have oral sex, cover the penis with a condom, or the female genitals or male or female anus with a dam (latex or polyurethane – soft plastic – square).

Avoid sharing sex toys. If you do share them, wash them or cover them with a new condom before anyone else uses them.

You can't catch HIV from toilet seats.

You cannot get HIV from hugging, kissing, sneezes, coughs, sharing baths or towels, from swimming pools, toilet seats or from sharing cups, plates or cutlery. You cannot get HIV from any animals or insects, including mosquitoes.

Most sexually transmissible infections are easily treatable.

Most STIs can be treated easily. It is important that any treatment is properly completed, even if the symptoms go away.

You can contact the following services for help and further advice:

- The Action Centre
(for people under 25 years),
tel. (03) 9660 4700 or 1800 013 952
- Family Planning Victoria,
tel. (03) 9257 0100 or 1800 013 952
- Melbourne Sexual Health Centre,
tel. (03) 9341 6200 or 1800 032 017 or
TTY (for the hearing impaired) (03) 9347 8619.

Young Australians accounted for over 80 per cent of the cases of chlamydia in 2009.

The rate of chlamydia notifications more than tripled over the last decade. Young people aged 15–29 years accounted for over 80 per cent of the 62,000 notifications in 2009. Notifications increased in both males and females. There was also an increase in the incidence rates of HIV and gonorrhoea.



(Extracted from *Australia's health 2010*, pp. 202-219 <www.aihw.gov.au>.)

STIs – the facts

The below statements would definitely go at the 'DISAGREE' end of the continuum.

You can't catch sexually transmissible infections if you only have oral sex.

It is possible to get or pass on a number of STIs through oral sex, including herpes, gonorrhoea, syphilis, chlamydia, hepatitis A, hepatitis B, hepatitis C, genital warts and pubic lice.

You can't catch a sexually transmissible infection if you or your girlfriend is using contraception like the contraceptive pill or the contraceptive injection.

The only form of contraception that can help protect against STIs is condoms.

Sexually transmissible infections are harmless.

If left untreated, many STIs can be painful or uncomfortable, and can be passed on to someone else. Some infections permanently damage your health and fertility.

You can always tell if you have caught a sexually transmissible infection.

Not everyone who has a STI has signs and/or symptoms.

Sexually transmissible infections will go away by themselves if you just ignore them.

If left untreated, many STIs can be painful or uncomfortable, and can be passed on to someone else. Some infections permanently damage your health and fertility.

You can only get HIV if you are gay.

HIV can be passed from one person to another in a number of ways, including through sexual contact. Anyone who is sexually active can get HIV. Both men and women can have HIV, and pass it on. You don't need to have lots of sexual partners to get HIV or to pass it on.



STIs – the facts

The below statements wouldn't necessarily go at the 'agree' or 'disagree' ends of the continuum and should instead generate discussion.

If I have itchy genitals I've definitely got a sexually transmissible infection.

Some STIs will have the symptom of itching. However, so will some other conditions. It is important to get the itching checked out. If left untreated, many STIs can be painful or uncomfortable and can be passed on to someone else. Some infections can permanently damage your health and fertility.

I would be happy to ask the person I am about to have sex with if they think they might have a STI or are at risk of getting one.

Discuss the level of openness someone may have with a sexual partner and whether it is more embarrassing to discuss STIs or to deal with the consequences. Explore the barriers to discussing safer sex and how participants feel that people could overcome those barriers.

People like me don't catch sexually transmissible infections.

Discuss whether the participants feel that 'people like them' are ever likely to engage in behaviour that might mean they could catch a STI. Remember, you only need one sexual contact to get a STI.

It is embarrassing to talk about using condoms with the person you want to have sex with/are having sex with.

Discuss the level of openness someone may have with a sexual partner and whether it is more embarrassing to discuss STIs and/or unintended pregnancy or to deal with the consequences. Explore the barriers to discussing safer sex and how participants feel that people could overcome those barriers.

It's my sexual partner's fault if I catch a sexually transmissible infection.

Discuss whose responsibility it is to protect against STIs and how the participants could protect themselves. Also, explore whether everyone who has a STI knows they have one. Remember, not all STIs immediately show symptoms.

If my friend told me that they had caught a sexually transmissible infection I would think they were dirty.

Discuss society's attitudes towards STIs and whether the participants feel they would keep a STI secret or talk to friends and/or family.

Only people who sleep around catch sexually transmissible infections.

Discuss whether participants feel that people need many sexual partners or just one sexual partner to catch a STI. How do the participants define 'sleeping around'? Remember, you only need one sexual contact to get a STI.

If my friend told me they thought they might have a sexually transmissible infection I would know what advice to give them.

Discuss the participants' level of knowledge about the ways to be diagnosed and treated for a STI. You can get all necessary tests and treatments at a sexual health clinic. General practices, contraception clinics, young people's services and some pharmacies may also provide testing or advice for some infections.



4 Contraception – hope is NOT a method



LEARNING INTENTIONS

- To present new content regarding methods of contraception.
- To refine students' understanding of the various methods through the use of scenarios.

Introduction

If you are having heterosexual intercourse then you may need to consider using contraceptives in order to enjoy this experience without the worry of an unintended pregnancy. Some methods of contraception are also ways of preventing STIs and for this reason are important in both heterosexual and homosexual sexual activity.

Preparation and materials

- ✓ scenarios '18 and thinking about sex', one copy per group
- ✓ information cards 'Methods of preventing pregnancy', one set per group
- ✓ equipment for viewing internet video *Meet the contraceptives*
<<http://www.chnnyc.org/services/teen/more-than-just-sex-campaign/>>
- ✓ Ansell Sex Ed Kit (optional), available from: <<http://www.ansellsex-ed.org.au/>>.

Instructions

- 1 As a class, brainstorm the reasons that some people may *not* use contraception during penile-vaginal intercourse. Possible answers might be:
 - wish to become pregnant
 - contraception is unavailable
 - not considered spontaneous
 - don't want the other person to think you were counting on this happening
 - cost
 - community norms (might be embarrassing to let people know you are having sex)
 - beliefs
 - side effects
 - concern at how they might be treated by doctor/pharmacist/health worker when asking for contraceptives
 - unprepared for event of sexual intercourse
 - haven't discussed contraception with your partner or planned ahead.

- 2 Now ask students to brainstorm methods of preventing an unintended pregnancy that young people might use. Write the suggestions on the board. It's a good idea to add any of the following that are not suggested:

- abstinence
- condoms
- withdrawal
- contraceptive pill
- implants
- vaginal ring.

Note that the contraceptive patch is not yet available in Australia but students may know of it.

Techniques which identify when the female is fertile (testing temperature and/or cervical mucus) are not very reliable for young girls as their menstrual cycles are not always regular and you require time to learn how to use these methods properly.

- 3 Draw a line down beside the suggested types of contraceptives and head this column 'Offers protection against STIs and HIV'. Go through the list of contraceptives explaining what each method looks like, how it works etc., and then identify which are also a way of preventing STIs and HIV. (This can be done with a tick.) There are contraceptive kits available to help with this and many good websites to aid the discussion. The set of cards provided with this activity can also be referred to. Note that this is also a perfect time to demonstrate the correct way to use a condom. The Ansell Sex Ed Kit, free to all schools in Australia, is a good resource for this.
- 4 Once you have finished discussing the various methods of contraception, divide the class into groups of about four and hand out a copy of the scenarios '18 and thinking about sex', along with a set of the information cards 'Methods of preventing pregnancy'.
- 5 As a way of stimulating conversation, show the video *Meet the contraceptives* (<http://www.chnnyc.org/services/teen/more-than-just-sex-campaign/>). Not all the methods shown on the video are included in the information cards.
- 6 Working in their groups, ask the students to identify which contraceptives they think might be used by the young people in each of the scenarios.
- 7 On completion of the task, assign a different scenario to each group and have a spokesperson report back to the class about the method of contraception they chose for this scenario and why. Allow a couple of minutes for general discussion after each scenario.

Discussion questions

- What do you think might prevent a young person from accessing information about, or acquiring, contraceptives?
- What do you think could be done to overcome these barriers?

Invite students to write down any questions they might have and place them in the Question Box for the next lesson.

Wrap up

Use the information cards to do a quick check of what students have taken away from this activity.

Read out the following statements, or display them on the whiteboard, and ask the groups to hold up the relevant cards:

- Method available only from a GP/sexual health clinic.
[The pill and implant. A medical person needs to prescribe hormonal contraception.]
- Method available at a shop.
[Condoms and emergency contraception or morning after pill – available at some chemists and from sexual health clinics.]
- Methods that are used inside the body.
[Pill and implant.]
- Methods that are used outside the body.
[Male condom.]
- Methods that protect people from HIV and STIs.
[Condoms – when used properly – and abstinence, where there is no intimate contact at all.]



Scenarios: 18 and thinking about sex

SCENARIO 1

This couple has been going out for most of Year 12. They both turn 18 in December and have been talking about having sex for the first time on the night of the Year 12 break-up.



SCENARIO 2

This couple have been going out together since Year 9. One partner is about to move away interstate and will go onto university in another city.



SCENARIO 3

This couple has been having sex off and on for almost 12 months but had a 'scare' the last time. They have decided they won't do it again until they decide on a method of contraceptive.



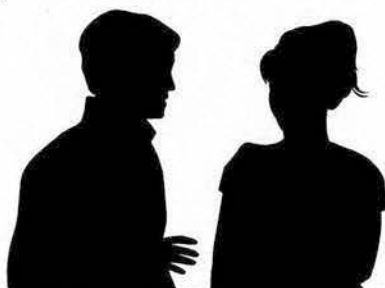
SCENARIO 4

This couple are at a party and have had just a couple of drinks but are getting on really well. Both think it's a good idea to have sex. The female has had a few problems with the side effects of the pill and stopped taking it two weeks ago.



SCENARIO 5

This couple just met a week ago at a party. They don't know if the other person is interested in sex or not. The opportunity to have sex may come up the next time they meet.



SCENARIO 6

This couple have a long-term relationship. They have had sex a few times but have decided they don't want an unintended pregnancy as both want to get on with studying, and starting a family is not in their immediate plans.





Withdrawal

Withdrawal, sometimes called the pull-out method or coitus interruptus. This is when a male withdraws his penis from the vagina just before ejaculation. The idea is not to allow any semen to enter the vagina.

It takes a great deal of self-control by the couple.

There is a risk that semen may spill around the vulva or that there is sperm in the pre-ejaculate.

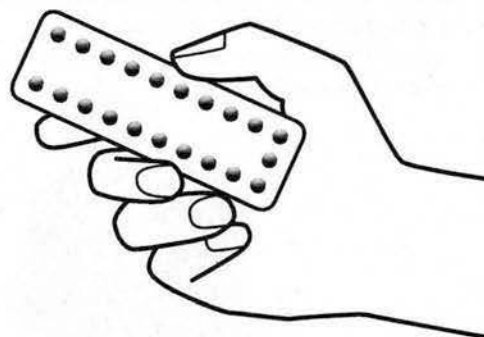
Contraceptive pill

The oral hormonal contraception, known as 'the pill', is highly effective in preventing a pregnancy when taken correctly. There are two types available – the combined pill and the mini pill. Both can be purchased from pharmacies with a doctor's prescription.

The pill works by:

- preventing an egg from being released each month (ovulation)
- thickening the mucus made by the cervix (entrance to the womb), making it harder for sperm to get through
- changing the lining of the uterus (womb) to prevent a fertilised egg from sticking.

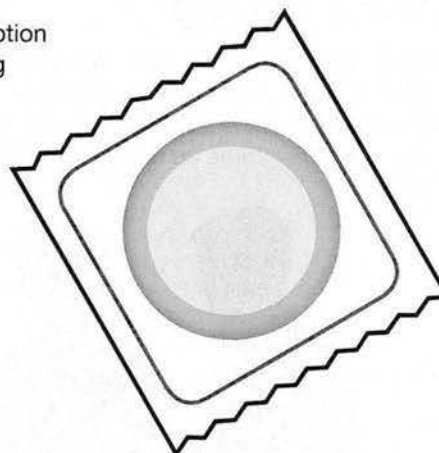
If used correctly, the combined pill is 99.7 per cent effective in preventing a pregnancy.



Condom

Male condoms are an effective form of barrier contraception if used properly, and also reduce your risk of contracting a sexually transmissible infection (STI).

Use condoms every time you have vaginal, anal and oral sex to prevent an exchange of blood, semen or vaginal fluids. Each condom should be used once only for each activity.



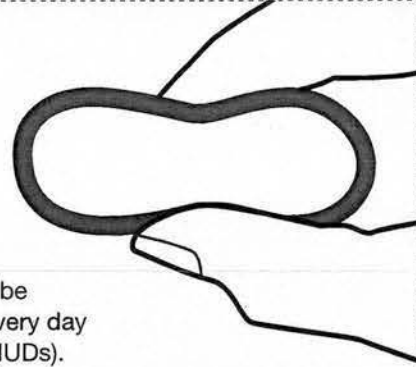


Contraceptive ring

The vaginal ring is a type of contraception that works in a similar way to the oral contraceptive pill to prevent pregnancy. A soft flexible ring is worn inside the vagina for three out of every four weeks.

It slowly and steadily releases synthetic forms of the natural hormones oestrogen and progesterone. The vaginal ring can be a good option if you find it hard remembering to take a pill every day or aren't comfortable using implants or intrauterine devices (IUDs). If used correctly, it's 99.7 per cent effective in preventing pregnancy.

In Australia, you can buy the vaginal ring from pharmacies with a doctor's prescription under the brand name NuvaRing.

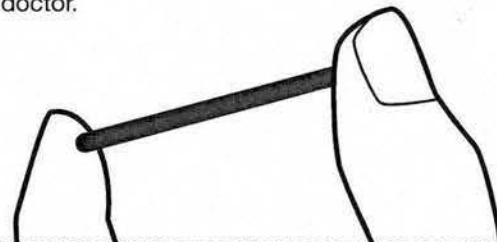
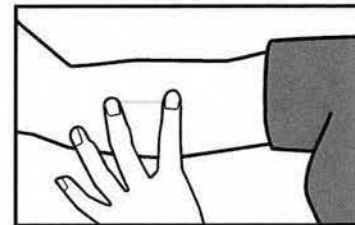


Contraceptive implant

Implanon is a hormonal implant the size of a matchstick which is inserted under the skin at the inner side of the upper arm. This 4 cm-long implant contains etonogestrel, a progesterone-like hormone that prevents ovulation. This hormone also thickens the mucus in the cervix (entrance to the uterus) preventing sperm from getting through. The device is inserted under local anaesthetic by a doctor.

Advantages of *Implanon*:

- it's close to 100 per cent effective
- it lasts for three years
- it can be used by most women who can't take synthetic oestrogens.



Abstinence

Sexual abstinence is not having sex. Total abstinence also protects people against STIs by avoiding all types of intimate genital contact.

If you are just abstaining from intercourse, but having other intimate genital contact, you are still at risk of getting an STI. This type of abstinence may prevent pregnancy but only total abstinence can protect against STIs.

(Adapted from <http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/rt_sex?open&cat=Sexual_health_-_Contraception>.)

Help-seeking

LEARNING SEQUENCE

6

1 Surfing – is it the best source of information?

AusVELS LEVEL 8

HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion*

- › access reliable information about health issues
- › barriers and enablers to accessing health services.

1 Surfing – is it the best source of information?



LEARNING INTENTION

- To develop skills to evaluate sources of information on the internet.

Preparation and materials

- ✓ student access to the internet
- ✓ copy of tutorial 'All about URLs', one per student
- ✓ scenarios, one per student (can be the same or different)
- ✓ worksheet 'What's in a URL?', one per student

Introduction

There are many sources that young people might come across when surfing the internet for help and information around sexual health and wellbeing. How do we know it's a good source? How do we know it's reliable?

This activity will help us take a critical look at the internet as a source of information, and assist students to begin learning the necessary skills to evaluate the usefulness and reliability of web pages.

Teacher advice

Please note that much of this information may have been taught in other areas of the school curriculum. If this is the case, you might consider not using this activity or else using it as a way of reviewing these skills in a specific context.

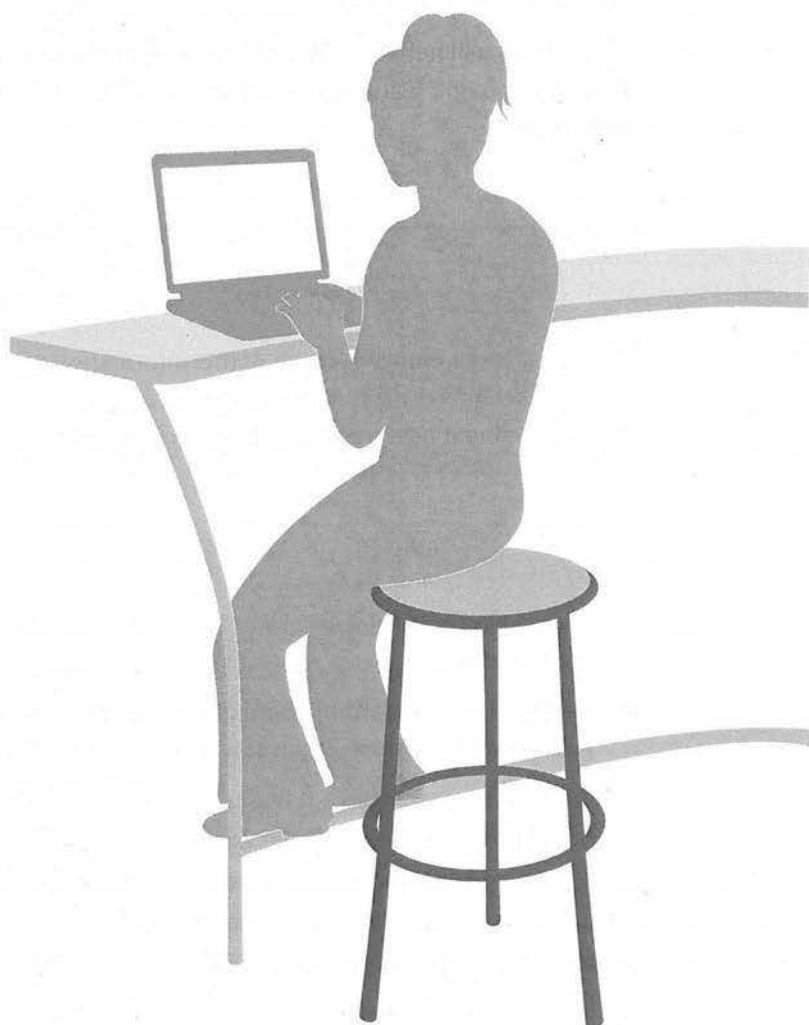
Instructions

- 1 Ensure students have access to the use of a computer (preferably one per student) and the internet.
- 2 Before they start surfing, hand out a copy of the tutorial 'All about URLs' to each student and go through it together. Then start with some easy questions:
 - When searching, what indicates that it's an ad?
 - Why do you get particular ads when you are searching?
 - How do you decide which web page to use? Is it the top one?
 - What do you know about the address?
 - What is 'fpnsw' or 'fpv' or 'rch'? (If they don't know, they can enter these in a search.)

- 3 Select one of the scenarios provided or write your own. You may use the same scenario for the whole class or hand out different ones.
- 4 Each student will attempt to respond to their 'best friend's' request in the scenario using the internet as the source of information.
- 5 Hand out the worksheet 'What's in a URL?' to each student to help them check out the sites and ask them to fill it in.
- 6 Once they have found a reliable source they need to write an email to their friend explaining why they are sending them to this particular source. For example, 'It's reliable because.... I know it's youth-friendly because... etc.'

? Discussion questions

- o For the particular issue you had to deal with, was the web truly the best place to find help?
- o Is the site you sent to your friend as useful as talking to a parent, teacher, doctor or health worker?
- o When is the web appropriate/inappropriate?



**Scenario 1**

	From:	Friend
	To:	Best friend (BF)
	Subject:	Help needed

Hi BF,

Can you help? You know I didn't want to shower today after gym; well, I didn't want anyone to see that I have a really big sore on my penis, kind of like a pimple. It hurts and I don't know what to do. What do you think I should do?

Your friend

Scenario 2

	From:	Friend
	To:	Best friend (BF)
	Subject:	Help needed

Hi BF,

I've just been watching our favourite show and now I'm really mixed up about how to tell if you really love someone or if they love you back. What ARE the signs of true love?

Your friend

**SCENARIO 3**

	From:	Friend
	To:	Best friend (BF)
	Subject:	Help needed

Hi BF,

You know what I was telling you last night about Chris and me, well, what do you think is the right contraceptive for us to use?

Your friend

SCENARIO 4

	From:	Friend
	To:	Best friend (BF)
	Subject:	Help needed

Hi BF,

I think I might be attracted to someone of the same sex. What am I going to do?

Your friend

**SCENARIO 5**

	From:	Friend
	To:	Best friend (BF)
	Subject:	Help needed

Hi BF,

Last night I got really, really drunk and hooked up with someone I hardly know. We had sex, didn't use a condom and now I'm a bit worried, actually a lot worried. What would you do?

Your friend

All about URLs

Evaluating web pages skilfully requires you to do two things at once:

- 1 Become good at quickly finding what you need to know.
- 2 Think critically, even suspiciously, and ask a series of questions that will help you decide how much a particular web page can be trusted.

This tutorial is organised to combine these two aspects into a process that begins with examining your search results from a search engine or other source; investigating the content of the page; and finally extending beyond the page to what others may say about the page or its author/s.

Before you leave the list of search results and get interested in the content of the page, learn all you can from the URLs of each page. Choose pages most likely to be reliable and authentic by asking the following questions:

Is it somebody's personal page?

Read the URL carefully. Look for a personal name (e.g. *jbarker* or *barker*) following a tilde (~), a per cent sign (%), or the words 'users', 'members' or 'people'.

Is the server a commercial internet service provider (ISP) or other provider of web page hosting (like *aol.com* or *geocities.com*).

Personal pages are not necessarily 'bad' but you need to investigate the author carefully. For personal pages there is no publisher or domain owner vouching for the information in the page.

What type of domain does it come from?

Does the domain extension match the content? For example, on government sites look for '.gov' or '.vic'; on educational sites look for '.edu'; for non-profit organisations, look for '.org' (though this extension is no longer exclusive to non-profits).

What is the country code?

In general, look for appropriateness. What kind of information source do you think is most reliable for your topic?

Is it published by an organisation or group that makes sense?

Who 'published' the page? In general, the publisher is the agency or person operating the server computer from which the document is issued. The server is usually named in the first portion of the URL between 'http://' and the first '/'.

Have you heard of this organisation or group before?


Does it correspond to the name of the site?

You can rely more on information that is published by the source. For example, look for *The Age* news from `<http://www.theage.com.au>` and look for health information sites with the word 'health' followed by the state (e.g. 'nsw'), government ('gov'), and Australia ('.au') in the URL – e.g. `<www.health.vic.gov.au>`.



(This lesson has been modified from the University of California Berkeley Library <http://www.lib.berkeley.edu/TeachingLib/Guides/Internet/Evaluate.html>).

What's in a URL?

 Friend's issue/problem:					
Name of site	URL of site	What does the URL tell us?	Can you find out anything through an 'About' page?	Is there an author? When was this site last updated?	What do you think? Will you use it?

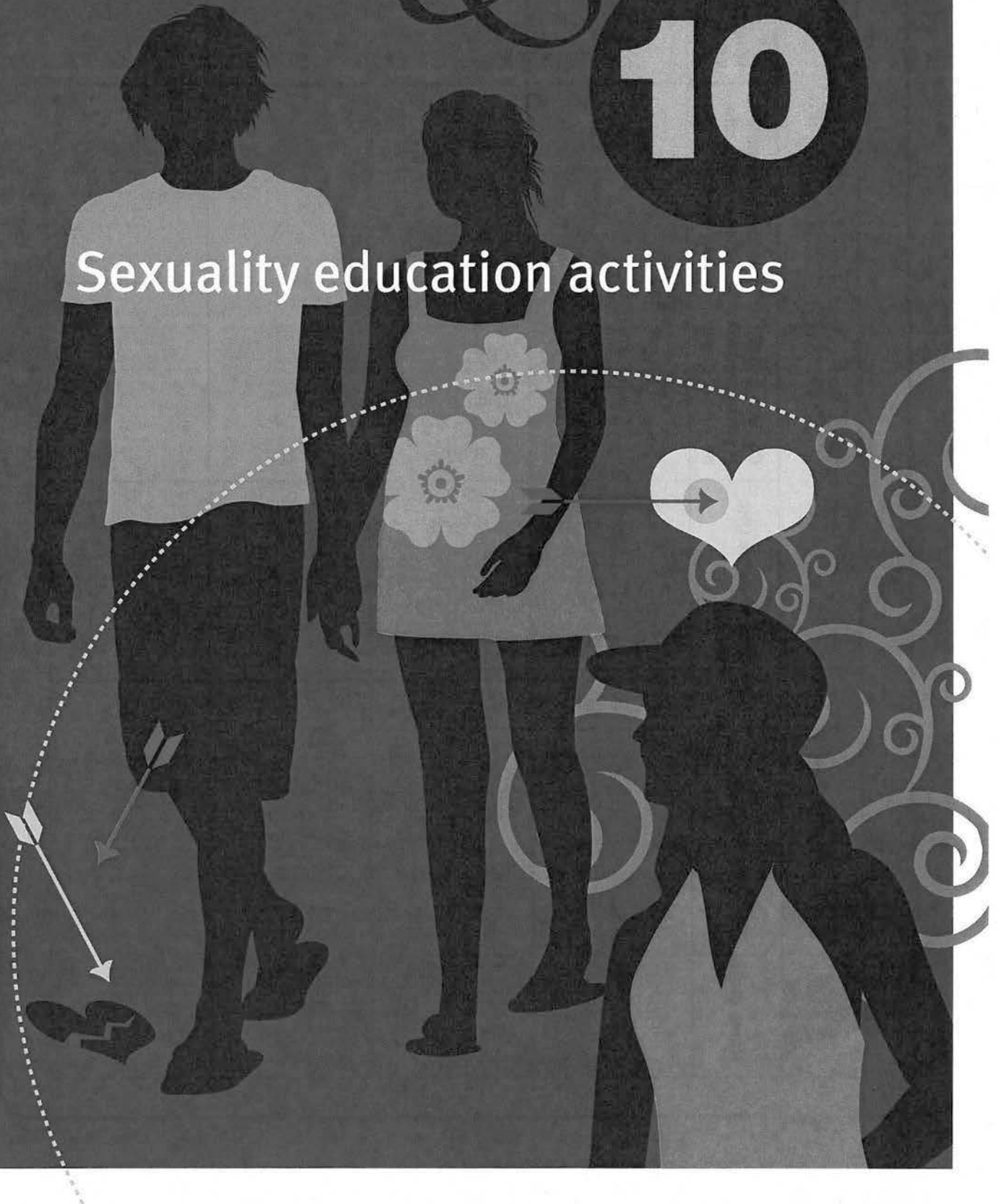
AusVELS Level

9

&

10

Sexuality education activities



User notes specific to AusVELS Levels 9 & 10

These sexuality education activities update those found in *Catching On for Years 9 and 10 – Support Material and Teaching and Learning Activities* (Department of Education, 2004). However, this popular resource remains available as it contains many useful activities for this level. It can be accessed at: <http://www.education.vic.gov.au/school/teachers/teachingresources/social/physed/Pages/resources.aspx>.

Up-to-date information can also be found at reliable websites such as Better Health Channel: <http://www.betterhealth.vic.gov.au/>.

Please note that a PowerPoint presentation on the Gender Model (with notes) is available from the Learning and Teaching Resources page on the Department's website: <http://www.education.vic.gov.au/school/teachers/teachingresources/social/physed/Pages/resources.aspx>.

Teachers wishing to further their understanding of gender and identity will find this useful.

Learning sequence 3: Pressure, power and sexuality provides an excellent grounding to explore issues of gender-based violence such as sexual harassment and assault, family and domestic violence, homophobia and issues related to pornography.

Learning sequence 4: Safer sex issues focuses on STIs, unintended pregnancy and sexual relationships. This sequence has been left until last so that issues of safer sex are placed in a social and cultural context. By examining the broader sexuality issues in the previous units, the activities will have more relevance to students. The findings of the 4th National Survey of Australian Secondary Students (Smith et al. 2009) have influenced the selection of many of the activities in this sequence. Some key findings from the survey have been included as an Appendix of this resource, for teacher reference.

LEARNING SEQUENCE

1

Sex, sexuality and gender

- 1 Take up a position
- 2 Gender – what’s pink and blue got to do with it?
- 3 Where do we get our messages?
- 4 Think, feel, do
- 5 Dimensions of sexuality
- 6 Gender impressions
- 7 Tram stop
- 8 Presenting sexuality – content analysis exercise

AusVELS LEVELS 9 & 10**HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion***

- › factors influencing the development of identity
- › variations in relationships over time
- › sexuality and sexual health, e.g. safer sex practices, sexual negotiation, same-sex attraction and the impact of alcohol on sexual and personal safety
- › assumptions, community attitudes and stereotypes about young people and sexuality
- › policies/practices related to sexual harassment, homophobia and discrimination.

INTERPERSONAL DEVELOPMENT – *building social relationships*

- › complex social conventions when interacting with others
- › local and global values and beliefs, and the impact on their own and others’ social relationships
- › barriers to achieving positive relationships
- › strategies that could be used to overcome barriers to effective relationships
- › skills and strategies to prevent and resolve conflict.

1 Take up a position



LEARNING INTENTIONS

- To introduce and engage students in issues which are the focus of this unit.
- To begin to expand students' understanding of their own and other people's views and positions in relation to issues of gender, respect and relationships.
- To develop and practise shared expectations for learning and interacting using the agreed ground rules.

Preparation and materials

- ✓ large piece of paper (to note down classroom rules if you don't already have them)
- ✓ markers
- ✓ list 'Statements on sexuality', one copy for teacher use
- ✓ A4 signs 'strongly agree'; 'agree'; 'disagree'; 'strongly disagree'

Introduction

This essential activity is designed to help students see that there is a range of positions in relation to sexuality issues that vary according to age, gender, education, ability, culture and so on. It is also designed to introduce students to the types of issues that will be covered in these learning sequences. It is important at the outset to emphasise that there are no right or wrong answers. You may also need to go over your existing classroom rules or develop a set that is accepted by and supports all students. In the latter case, refer to AusVELS Level 7, Learning sequence 1, activity 3, 'Designing our own classroom rules'.

The present activity basically involves negotiating and using classroom rules to ensure a safe learning environment. With the rules as a framework, students can explore differing attitudes, ideas and positions in relation to gender, respect and relationships. For experienced health and sexuality education teachers, this activity will be very familiar and you may already have developed a set of classroom expectations to ensure the environment is safe. If so, you may like to move onto the next activity.

Instructions

- 1 Select five or six statements from the list 'Statements on sexuality' or develop your own statements that are likely to create a difference of opinion and lively debate. In this way you are able to remind students of the ground rules they have developed and demonstrate what this actually means, i.e. to listen, show respect etc.
- 2 Using a two, three or four-point continuum ('strongly agree', 'agree', 'disagree', 'strongly disagree') spread across the floor, read the first statement and ask students to physically move to the position which best reflects their view. A useful strategy is to lay a piece of rope or string – or draw a chalk line – across the room and ask students to actually stand on the line.

- 3 After students have positioned themselves, ask for volunteers from different points on the continuum to share why they have placed themselves in this position. Alternatively, students can discuss their choice of position with a person in a different position. Inform students that they may move at any time if they find that a reason given by another student changes how they think about the statement. However, try to encourage a wide range of views and discourage 'fence-sitting'. It is important to remind students that there are no right or wrong answers, and that they can choose not to discuss their choice of position. The purpose of the activity is simply for students to appreciate that people hold different views on issues related to sexuality for a range of reasons.
- 4 Repeat the process for each of the statements.

Discussion questions

These questions encourage students to think about the range of positions people hold in relation to sexuality. They can be used either at the conclusion of the activity or following each statement:

- How do you think you developed your position/s [on this statement]?
- If you asked your parents to do the same activity, where do you think they would position themselves?
- What differences do you think there might be if we did this with all girls or with all boys?
- Do you think there would be any differences if a group of same sex-attracted young people were doing this activity?
- What differences could strong beliefs have on how young people would position themselves?

These questions could also provide a useful structure for journal writing and reflection.

HOMEWORK TASK

Ask students to select four statements from the list provided or from your own list. Their task is to ask their parents or any adult of their parent's age how they would position themselves in relation to the statements and why. Students then write a paragraph outlining the differences and similarities between themselves and the chosen adult.

Back in class, students report back to the class on the differences and similarities. This will help demonstrate that just as there is a range of positions reflected in the classroom, there is also a range of positions reflected amongst adults because of their experience, age, culture, religion, gender, etc.

LEARNING SEQUENCE 1 Statements on sexuality

Statements on sexuality

The hardest thing about being an adolescent is not being trusted by your parents.

Sexuality is different to sex.

Girls have it easier than boys in relationships.

Contraception is always the girl's responsibility.

Young people should experiment with sex.

It's OK to send a nude photo of your boyfriend to other students at your school.

Boys brag to their friends if girls have sex with them.

People don't have to have vaginal sex to have sex.

It's hard for some sex-attracted young people to come out at school.

I feel sorer for babies with HIV than gay men.

If a girl enjoys sex, she is a slut.

Boys who don't watch porn are not very masculine.

I would support a friend who told me he or she was gay or lesbian.

Young people don't have to worry about getting a sexually transmissible infection (STI); this only happens to adults.

Boys always put pressure on girls to have sex.

Condoms are the safest way to avoid getting a STI.

I'd feel flattered if someone of the same sex asked me out.

Sex should only be with someone you love.

I would know how to help a friend who had been sexually harassed.

Oral sex is equally enjoyed by both partners.

Pornography is a good way to learn about sex.

It doesn't matter what the age difference is between people when they have sex, as long as they freely consent.



Agree

Disagree

LEARNING SEQUENCE 1

Signs • 'Strongly agree'... 'strongly disagree'



**Strongly
agree**

**Strongly
disagree**

2 Gender – what’s pink and blue got to do with it?



LEARNING INTENTIONS

- To explore the concepts of femininity and masculinity.
- To discuss ways of defining femininity and masculinity.

Preparation and materials

- A5-sized voting cards, pale pink and pale blue, one set per student
- record-keeping sheet, one copy for teacher use

Introduction

It is difficult to separate issues of gender, sex and sexuality. These activities are designed to assist students’ understanding of traditional notions, categories and expectations around gender. They are also designed to provide students with an understanding of gender and its impact on sexuality.

You may find the following definitions useful to provide a framework for exploring gender with the students:

GENDER is used to describe those characteristics of women and men which are socially constructed. People are born female and male but learn to be girls and boys who grow into women and men. This learned behaviour makes up gender identity and determines gender roles. (Adapted from the World Health Organisation Gender Policy, 2002.)

GENDER refers to socially or culturally defined ideas about masculinity (male roles, attributes and behaviours) and femininity (female roles, attributes and behaviours).

GENDER is not the same as sex. Sex is the difference in biological characteristics of males and females as determined by a person’s genes. For example, only males produce sperm. Only females produce eggs and can become pregnant.

Instructions

- 1 Hand out a set of the pink and blue voting cards to each student.
- 2 Explain that you will read out a word and that as quickly as possible they need to hold up one of the cards which they associate with the word. It is acceptable to hold up both.
- 3 Read out the words or statements in the far-left column of the record-keeping sheet, one at a time. As the students hold up the cards, quickly determine whether most are either pink or blue and keep a record of this observation.
- 4 After reading out all the words, put up the full list and go through it, one word at a time, making any general observations as a group.

Discussion questions

- Are there similarities between the voting patterns of the two colours?
- Did you think of pink as being female and blue as being male?
- What do we mean by masculine and feminine?
- Can there be more than one way of being masculine or feminine?
- Where do we develop an understanding of the differences?
- Why do you think you responded in the way you did?

Wrap up

One of the ways of socially defining boys and girls is through fashion. Even in infancy, before the child can comprehend the meaning of pink or blue clothing, these two colours are used to identify the baby's gender to all observers. Until World War I, however, little boys were dressed in skirts and often had long hair. Sexual 'colour coding' in the form of pink or blue clothing for infants was not common until the 1920s; before that time, both male and female infants wore white dresses.

How we think about gender is not necessarily about what we believe to be correct, but about the messages we have received from all around us, all of our lives. Even when we know that many of the words in this activity apply to both females and males, we sometimes fall into thinking of the stereotype first as a result of the vast number of connections these words have with being either male or female in our society.

Ask students to consider the following...

- What is your gender?
- How do you know this?
- When did you first realise this?

Ask for volunteers to share their answers with the class but do not expect all students to be comfortable doing this.

Besides fashion, can the students think of other ways that society determines what's feminine or masculine? For example, 'blue' and 'pink' jobs or children's toys.

Do we make assumptions about other people based on these cultural concepts of what's feminine or masculine and how do these assumptions affect us?

In every society, gender norms and gender roles influence people's lives, including their sexual lives.

Gender roles are learned. They are not innate or 'natural.' In fact, almost everything that males can do, females can also do. And almost everything that females can do, males can also do.

Within any culture or society, people have varying attitudes about gender roles and gender equality.

Beliefs about gender also vary from one culture (or society) to another.

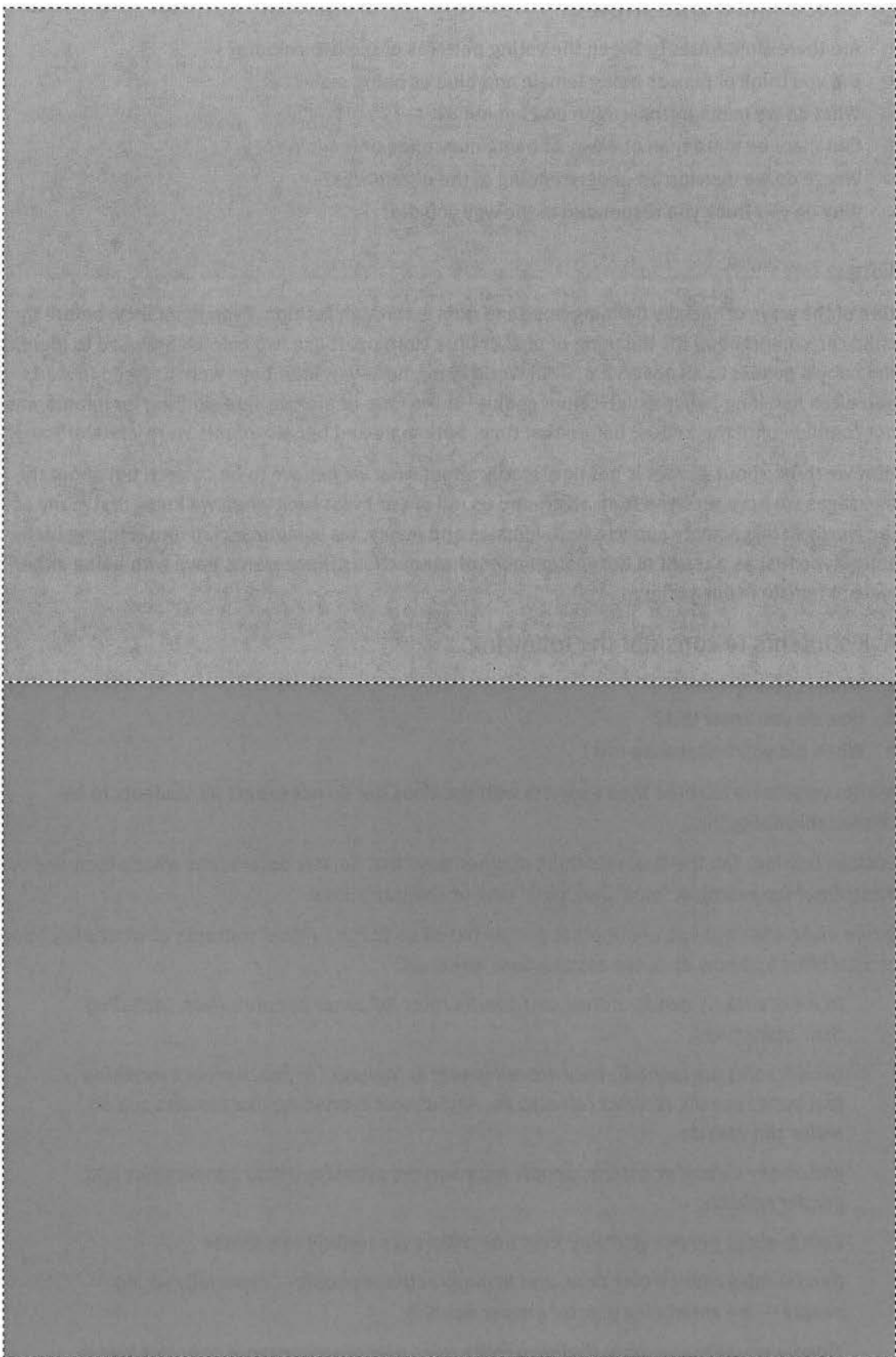
Gender roles change over time, and in many settings people — especially young people — are embracing greater gender equality.

Gender equality and more flexible gender roles give everyone more opportunities to develop to his or her full capacity as a human being. In contrast, restrictive gender roles can limit opportunities.

International Sexuality and HIV Curriculum Working Group, 2009

LEARNING SEQUENCE 1

Voting cards



AusVELS Levels 9 & 10 Learning Sequence 1

LEARNING SEQUENCE 1

Record keeping sheet

Record-keeping sheet

Words/statements	All pink	Mostly pink	All blue	Mostly blue	About even
running					
skipping					
football					
long hair					
strong					
gentle					
passive					
dolls					
basketball					
body hair					
aggression					
beer drinking					
driving fast					
child minding					
crying					
trucks					
flirting					
community worker					
religious leader					
fashion designer					
nurse					
likes to eat					
likes to talk					
keeps a diary					
writes poetry					
likes to play piano					
Elizabeth					
James					
Chris					

3 Where do we get our messages?



LEARNING INTENTION

- To prompt inquiry and facilitate substantive conversation regarding gender.

Preparation and materials

- copies of the worksheet 'Definitions of gender, sex and sexuality', one per group
- copies of the worksheet 'Chris and Tiffany's stories', one per person

Introduction

This activity is designed to assist students to broaden the traditional notions, categories, and expectations of gender through the use of images.

Instructions

- 1 If possible, divide your class into mixed groups of four. This will enable an exploration of how the stories are read on the basis of gender.
- 2 Write the words 'gender', 'sex' and 'sexuality' on the board and ask students to brainstorm a list of words to illustrate these terms. Circle the words the students think best describe each term.
- 3 Hand out the worksheet 'Definitions of gender, sex and sexuality' to each group.
- 4 Ask students to read the worksheet and underline three key points in each definition which may help them to understand the concept. They can also make a list of any words they don't understand.
- 5 Ask each group to feed back their findings (key points and difficult words). List and consolidate the key points on the board. Clarify the key points, and explain any words students do not understand.
- 6 Give each student a copy of the worksheet 'Chris and Tiffany's stories'. Allow time for the students to read and then discuss, within their groups, the questions at the bottom of each story.



Discussion questions

As a class, discuss the questions at the bottom of the worksheet 'Chris and Tiffany's stories':

- Why did Chris pretend he wasn't a virgin?
- What does Chris's dad say and think about his sons? What are the messages he's giving his sons?
- Where else might Chris learn these kinds of messages about boys and sex?
- What would have to change to make Chris feel comfortable with his sexuality and gender?
- Why doesn't Tiffany want to go to the debutante ball?
- What messages has her family given her about gender?
- Why might she feel that her life would have been easier if she had been born a boy?
- Do you think she will have a hard time in the future?

Wrap up

Gender roles change over time. What might be some of the differences between the gender roles of your grandparents and the gender roles today? We know that inflexible gender roles can limit the opportunities for young people to grow and develop. Use the Teacher notes to discuss the goal of gender equality in today's society.

(Activity adapted from *It's All One Curriculum*, 2009, International Sexuality and HIV Curriculum Working Group, pp. 56–58.)

Teacher notes

The achievement of gender equality is a key goal around the world

- Equality between males and females is a matter of human rights.
- Achieving gender equality is a key part of combating sexually transmissible infections (including HIV and AIDS), ending child marriage, reducing unwanted pregnancy, and making pregnancy safer.
- Gender equality fosters the growth of healthy and prosperous communities and societies.
- The United Nations has identified gender equality as one of eight key development goals for nations to pursue.
- Millions of people are actively promoting gender equality – in families, schools, workplaces, communities and countries.

Definitions of gender, sex and sexuality

GENDER IS...

Gender refers to socially or culturally defined ideas about masculinity (male roles, attributes and behaviours) and femininity (female roles, attributes and behaviours). Gender is not the same as sex. Gender is used to describe those characteristics of women and men which are socially determined. People are born female or male but learn to be girls and boys who grow into women and men. This learned behaviour makes up gender identity and determines gender roles.

(World Health Organisation Gender Policy, 2002)

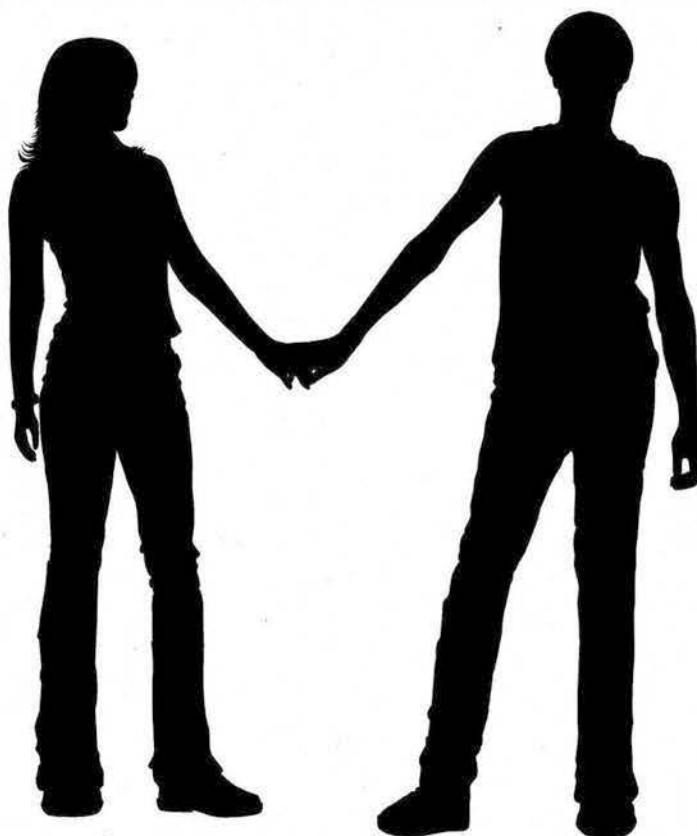
SEX IS...

Sex is the difference in biological characteristics of males and females as determined by a person's genes. For example, only males produce sperm. Only females produce eggs and can become pregnant. Sex is not the same as gender.

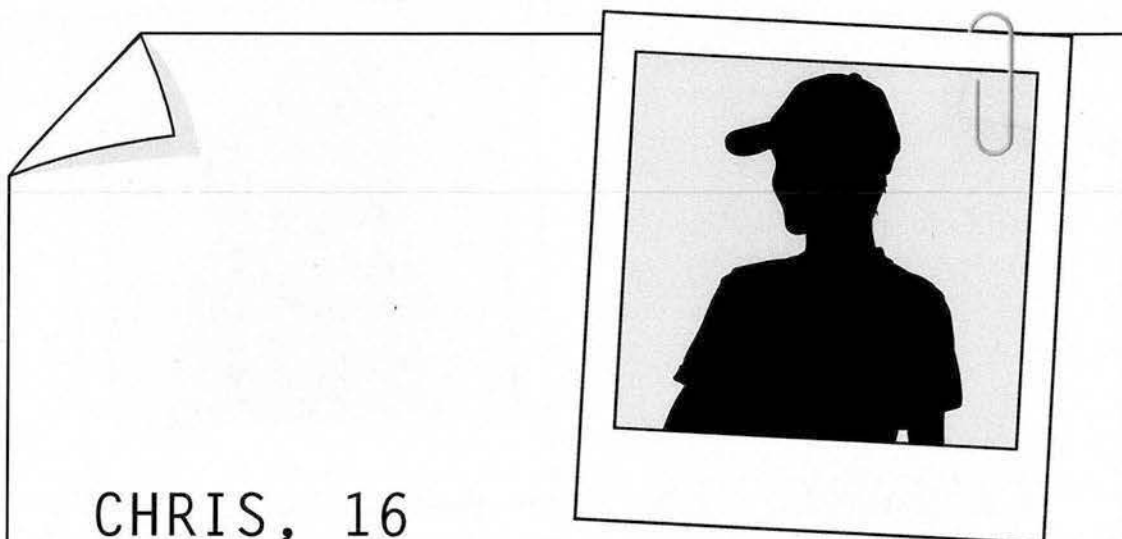
SEXUALITY IS...

Sexuality is how people experience and express themselves as sexual beings. Many factors contribute to people's sexual behaviours, relationships, feelings, identity, desires and attitudes. One of these factors is biology, especially sex hormones. Another factor is individual personality and experience. Yet another factor is culture, which influences people's attitudes, expectations and experiences related to sexuality. Cultural norms also affect laws and policies about sexuality. All of these factors interact throughout life.

(International Sexuality and HIV Curriculum Working Group, 2009)



Chris and Tiffany's stories



CHRIS, 16

I have gone out with heaps of girls. Some of them I've really liked; we've kissed and cuddled. One girl I saw for ages and we used to lay together on her bed, kissing and cuddling and other stuff. But that was all. Dad always calls me the stud of the family and I can tell he's proud of me because he thinks I'm doing it with all those girls. But my older brother gets heaps from Dad because at 22 he hasn't had a girlfriend and only goes out with his mates. Dad's always saying to Mum he's probably gay like her brother.

I'm a virgin but I wouldn't tell anyone that. My friends mouth off about their experiences all the time and I feel like an idiot because I haven't done it yet. I just pretend that I have. I don't know why I keep pretending or what the big deal about going all the way is.

I don't think about sex all the time, there are stacks of other things in my life like football and school and basketball.

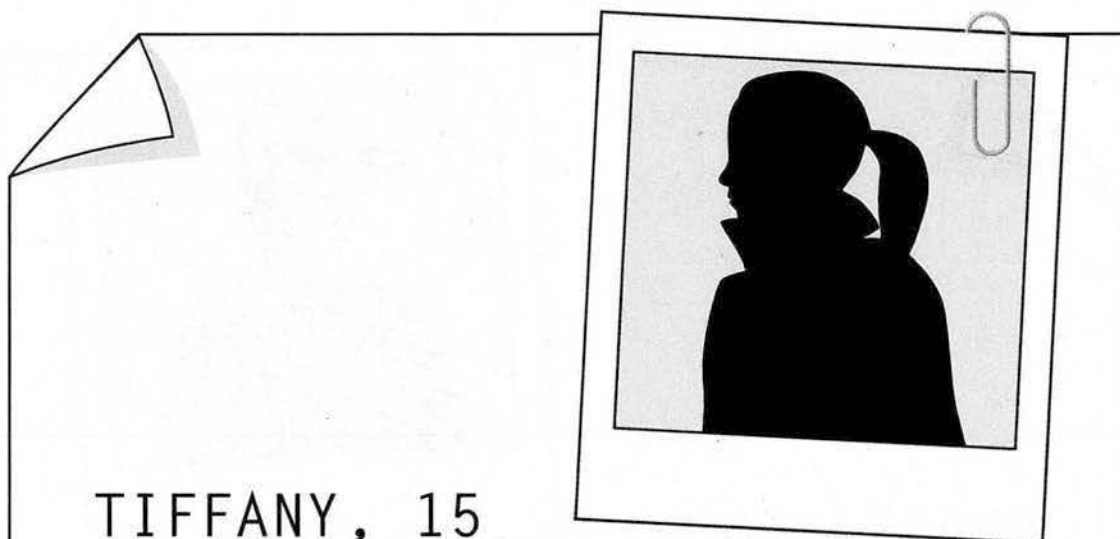
I haven't really met anyone yet that I love enough to want to have sex with.



QUESTIONS

- 1 Why did Chris pretend he wasn't a virgin?
- 2 What does Chris's dad say and think about his sons? What are the messages he's giving his sons?
- 3 Where else might Chris learn these kinds of messages about boys and sex?
- 4 What would have to change to make Chris feel comfortable with his sexuality and gender?

Chris and Tiffany's stories



TIFFANY, 15

I have lived all my life in the country. I did my primary school years of education through correspondence school which was great because I finished all my lessons on Monday and spent the rest of the week following Dad around, helping him mend the fences and fix the tractor and things like that. I'm really good with my hands and would like to be some sort of mechanic one day. Now I go to school on the bus and have to put up with all the other girls talking about boys they like and reading girly magazines.

I don't get on that well with my mum because she worries about me all the time and says how I'll never get a boyfriend if I don't learn to dress up a bit and put on some make-up. I have never had a boyfriend and to tell you the truth I'm not that interested, but maybe that will change one day because I would like to have kids some time. Right now Mum and I are arguing about me going to the local 'deb' ball. She wants to go shopping for a white dress and I know I'll just feel a fool in it, that sort of stuff just isn't me! I really don't know how to get out of it.

Dad says to leave me alone and that I'll find my own way; he's on my side. He says it doesn't matter if I'm not good looking, someone will sweep me off my feet some time and he doesn't want boys hanging around me anyway. Sometimes I just feel if I had been born a boy, life would be a bit easier.



QUESTIONS

- 1 Why doesn't Tiffany want to go to the debutante ball?
- 2 What messages has her family given her about gender?
- 3 Why might she feel that her life would have been easier if she had been born a boy?
- 4 Do you think she will have a hard time in the future?

4 Think, feel, do



LEARNING INTENTIONS

- To enable students to explore their feelings, thoughts and actions in different situations involving sexual attraction and gender identity issues.
- To enable students to develop an understanding of how personal feelings and conflicts may affect our responses to other people's sexuality.

Preparation and materials

- ✓ cards 'Situation', one card only per group

Introduction

Introduce this activity by explaining that there is often conflict between our rational thoughts about sexuality situations and our feelings about them. This conflict can affect the way we respond and so we might give messages we do not intend.

If you are accustomed to the improvisation technique in drama, this is an excellent approach to use in exploring the feelings of the people in each scenario. Using the technique of inner thoughts, students could role play what they think the thoughts might be in each situation.

If you do decide to use this technique it is crucial that you brief students first, only let the role play last a couple of minutes, and, most importantly, debrief students afterwards.

Instructions

- 1 Divide students into groups of three or four. Give each group a 'Situation' card. You may like to give groups all the same cards or give out a mix of cards. One person in each group reads the situation to the others and then they use the three questions at the bottom of the card to guide them in their discussion. For example: 'You enter a room and see two men cuddling on the sofa... I *think* homosexuality is OK and acceptable. I *feel* embarrassed in this situation. I [*do*] leave the room quickly.' Remind students that they shouldn't think of themselves when they read 'you' in the Situation cards, rather someone they may know.
- 2 As a class, now go through each of the Situation cards, asking for general responses from the groups to the situation they had on their card. Individuals could role play responses if they wished. Explore the responses by addressing the following questions: How might their responses affect the person or people involved? How is their response influenced by the situation itself?

Discussion questions

Many people – and young people in particular – care about fairness and basic human rights. Sometimes we need to think about our own values in relation to fairness. Ask yourself: Do I stereotype groups of people? Is this fair?

Our values, and how comfortable we feel in particular situations, also influence our responses. What are your instincts telling you? Do you feel safe?

How can we promote fairness and human rights, including sexual reproductive rights? Can some of these be applied to the responses to the Situation cards? Which ones and how?

Have a look at the following websites:

- Australian Human Rights Commission
http://www.hreoc.gov.au/human_rights/lgbti/index.html
- Cybersmart
<http://www.cybersmart.gov.au/lts%20your%20life%20and%20youre%20in%20control/Sexting.aspx>
- Safe Schools Coalition Victoria
<http://safeschoolscoalitionvictoria.org.au/>.

Wrap up

Round off the discussion by stating the value of self-awareness; that is, being able to acknowledge and assess our thoughts and feelings and how they contribute to the way we react to others.

(This activity has been adapted from Liggins et al., *Affirming Diversity: An Educational Resource on Gay Lesbian and Bisexual Orientations*, 1994.)

**SITUATION 1**

Your friend asks you around to his place but when you get there he and his girlfriend are on the couch pashing.

*What are you thinking? What are you feeling?
What will you do?*

SITUATION 2

You get to your seat at the movies and there are two young women in front of you. Even though it's dark, you think they're holding hands, and during the movie they seem to snuggle up to one another. When the movie is over you realise you know one of them.

*What are you thinking? What are you feeling?
What will you do?*

SITUATION 3

A friend suggests you go away for the weekend with her family. You agree, if you can get permission. On the way to your house to ask, she tells you that her mum's lover will be going along and that she's a woman.

*What are you thinking? What are you feeling?
What will you do?*

SITUATION 4

A week after you get your first mobile phone you are sent a sexual image at school. It is of a girl in your year level. She is completely naked and smiling at the camera.

*What are you thinking? What are you feeling?
What will you do?*

SITUATION 5

You see a message posted on Facebook about your friend Sally having oral sex with a boy she met last weekend. You know who has posted the message. You know Sally will not see it and would certainly not want it there.

*What are you thinking? What are you feeling?
What will you do?*

SITUATION 6

You're sitting with a mixed group at school when a girl you know, through family functions, walks past. One of the boys says to another boy sitting next to you, 'Hey, you'll probably get a bit if you try; she's a real slut.' The girl overhears the comment and turns around and looks at you.

*What are you thinking? What are you feeling?
What will you do?*

SITUATION 7

You are with a group of friends at a party. You overhear someone applying pressure to someone to have sex. This goes on for quite a while.

*What are you thinking? What are you feeling?
What will you do?*

SITUATION 8

You and several of your friends go to Steve's on Saturday. Not long after you arrive, you notice that Steve has put on a pornographic DVD. Some of the guys are laughing but the girls look uncomfortable.

*What are you thinking? What are you feeling?
What will you do?*

SITUATION 9

You and your friend are on your way home from school. You often take a short cut through a lane. Today you see two guys from your school writing some graffiti about a girl in your class.

*What are you thinking? What are you feeling?
What will you do?*

SITUATION 10

You are asked to go to the movies with a friend who is the same sex as yourself. You feel your friend might have a crush on you.

*What are you thinking? What are you feeling?
What will you do?*

5 Dimensions of sexuality



LEARNING INTENTION

- o To introduce different ways of understanding sexuality.

Preparation and materials

- ✓ copies of worksheet 'Defining sexuality', one per student
- ✓ copies of worksheet 'Scenarios', one per group

Introduction

The trialling of *Catching On Later* in schools showed that students find the concepts of sexuality in this activity easy to understand and the session provides some affirmation for young people who may be struggling with their sexual identity. It also enables young people to see sexuality in a much broader context than just sexual behaviours.

To prepare for this session the teacher will need to become familiar with the Teacher notes included. If additional information is required, *Affirming Diversity: An educational resource on gay, lesbian and bisexual orientations* by Liggins, Wille, Hawthorne and Rampton (1994) is an excellent place to start.

More data to help us understand the dimensions of sexuality comes from a national survey of 19,307 people conducted in Australia in 2002 (Smith et al., 2003, pp. 138–145). The Australian Study of Health and Relationships found that while relatively few people identify as gay, lesbian or bisexual, the number of people who have experienced same-sex attraction or sexual activity is three to four times greater. That is, while people may not call themselves lesbian, gay or bisexual, it is a relatively common experience to be sexually attracted to the same sex.

This activity may be useful in helping young people understand that sexuality is not fixed.

Instructions

- 1 Hand out a copy of the worksheet 'Defining sexuality' to each student. Ask them to read it and underline any parts they don't understand or would like to have clarified.
- 2 Spend time answering their questions; the Teacher notes may be useful here.
- 3 Divide the class into small groups.
- 4 Hand out copies of the worksheet 'Scenarios', one to each group.
- 5 Ask the groups to choose a scenario and then discuss which sexual identity (straight, gay, bisexual, transgender) best describes the person in the scenario. If they have time, they can choose one or two more scenarios to discuss.
- 6 When the groups have finished their dialogue (ten minutes) ask them to feed back their ideas during the following class discussion.

Discussion questions

- Did you reach a consensus in your group for any of the scenarios you looked at? (Dispel any stereotyping that might occur by presenting alternative sexual identities for each scenario.)
- Why do you think it is difficult to put a label on different aspects of sexuality?
- Why are people labelled in terms of their sexuality? Who does this benefit?
- Are some labels viewed more positively than others? Why?
- What happens if people don't fit the labels?
- When might a label prove to be a positive thing?

Some people may like to put a label on themselves in regards to where they live so as to identify as being part of a local community. They may like to wear a label about the sporting team they support in order to be part of that community.

Unfortunately, there is still much rejection and discrimination towards people who desire or engage in same-sex relationships.

Wrap up

First and foremost, we are all people. All of us have similarities and differences when compared to others in our families, schools, workplaces and communities. For example, there is wide variation in how we look, what we think, our talents, and our sexuality. This diversity of human experience exists everywhere. Variation in people's sexual desires, behaviours and identities is referred to as sexual diversity.

People may experience feelings of love, attraction and sexual desire for the other sex, the same sex, or both. This variation has been true throughout history. It is true in all societies, whether or not the society accepts same-sex attraction. The term 'heterosexual' is used to describe people who desire people of the other sex. The term 'homosexual' is used to describe people who desire people of the same sex. These terms are preferred in some settings, while in other settings, other terms are used.

Like everyone else, transgender people (people whose gender identity differs from the sex they were assigned at birth) may be attracted to people of the same sex, the other sex, or both.

People may or may not identify themselves as heterosexual, homosexual (gay or lesbian), or bisexual (attracted to people of both sexes). People may be labelled with a sexual identity that they do not claim for themselves. Some people do not want to be categorised in terms of their sexuality or sexual identity, regardless of their desires.

The factors that determine whether a person experiences desire for the same sex, the other sex, or both, are not well understood. These desires cannot be changed by religion, therapy or medical intervention. A person's desires, behaviour or identity may shift over time and from situation to situation. (International Sexuality and HIV Curriculum Working Group, 2009.)

Sexuality is more complicated than just being gay, straight or anything in between. People don't need to have a label. A label doesn't tell us about all aspects of sexuality.

For gender-questioning young people, there are support groups that can make all the difference. To find a group in your area you can contact the Safe Schools Coalition Victoria: <<http://www.safeschoolscoalitionvictoria.org.au/>>. Alternatively, you could contact WayOut: Rural Victorian Youth & Sexual Diversity Project: <<http://wayout.org.au/>>, Minus 18, an Australia-wide support network for gay and lesbian teenagers: <<http://www.minus18.org.au/>> or Zoe Belle Gender Centre: <<http://gendercentre.com/>>.

Sexuality is...

Sexuality is how people experience and express themselves as sexual beings.

Many factors contribute to people's sexual behaviours, relationships, feelings, identity, desires and attitudes. One of these factors is biology, especially sex hormones. Another factor is individual personality and experience. Yet another factor is culture, which influences people's attitudes, expectations and experiences related to sexuality. Cultural norms also affect laws and policies about sexuality. All of these factors interact throughout life.

(International Sexuality and HIV Curriculum Working Group, 2009, p. 113.)

Sexuality is a vital and dynamic part of who we are but it is difficult to define. The term becomes easier to understand if we divide it into three parts, namely **sexual attraction**, **sexual behaviour** and **sexual identity**. In this way we can begin to understand why there is so much diversity in how the term sexuality is defined by different cultures and at different times.

IN SUMMARY:

- **Sexual identity** is how we self-identify and/or publicly identify.
- **Sexual attraction** is who we are attracted to.
- **Sexual behaviour** is the sexual contacts we have.



LEARNING SEQUENCE 1

Worksheet • Scenarios

**SITUATION 1**

Mia dated several boys in Years 8 and 9 but when she was in Year 11 she had a couple of sexual experiences with another girl. Sometimes she doesn't even want to think about dating and relationships because it's just too confusing.

SITUATION 2

Sam says that by the time he was seven or eight years old, he knew he was different from other boys. He is now in Year 11 and has not had sex with a girl, although many of his friends are girls. He has recently met a guy he likes in a way that feels nice but different to how he feels about his other friends.

SITUATION 3

Jo is a university student who had a two-year sexual relationship with her female roommate. When the relationship broke up she began dating a male student. She has married him and enjoys her sex life.

SITUATION 4

Maria is 40 years old and has only ever been attracted to and had sexual relationships with men. Six years ago she met a woman whom she was sexually attracted to and for six months she fantasised about having sex with her. Once this attraction passed she has never been attracted to another woman.

SITUATION 5

Josh is 30 years old and has had a couple of intimate relationships with women but has never been interested in having a sexual relationship with any of them. Josh enjoys friendships with both men and women. He has shared houses with other people but over the last 10 years he has lived happily by himself.

SITUATION 6

After 20 years of marriage and two children, Ginny divorced her husband under difficult circumstances. She moved in with a divorced woman and, after several months, the two of them began a loving, sexual relationship that has continued for several years. Before this experience, Ginny had never imagined having a sexual relationship with another woman.

SITUATION 7

Amy is a 17-year-old at a party. In order to get the attention of one of the guys at the party she begins kissing one of her girlfriends and finds that she rather likes it.

SITUATION 8

Van is 18 and plays football at the local club. He finds himself fantasising about some of the naked guys in the shower.

SITUATION 9

Rae is 26 years old. She grew up male, as Raymond, but for as long as she can remember she has always felt female. She has now 'transitioned' and has had gender reassignment surgery. She has had a boyfriend for a year and enjoys her sex life.

Teacher notes

Sexual attraction

Sexual attraction refers to a person's basic attraction to other people. This attraction may be to members of the other sex (heterosexual), members of the same sex (homosexual) or members of both sexes (bisexual). There has been considerable debate about whether a person's sexual attraction is fixed or if there is an element of choice involved. No objective conclusions have been reached. It would appear that many people believe their feelings to be fixed or inherent while others report a change in attraction at a particular stage in their lives.

Sexual behaviour

Sexual behaviour refers to what a person does sexually. In many cases this behaviour matches our sexual attraction but in many cases it does not. In this sense a person may be involved in heterosexual behaviour but experience sexual attraction to the same sex.

Sexual identity

Sexual identity refers to how people see themselves and how they present themselves to others. At times, sexual identity can be different to people's sexual attraction and sexual behaviour. This can cause a high level of personal stress. This is especially important in terms of the dominance of heterosexuality.

(Human Rights Foundation, 1984.)

Transgender

Transgender is an umbrella term and identity used to describe all kinds of people who sit outside the gender binary or whose gender identity is different from the sex assigned to them at birth. Other terms include trans and transsexual.

(*Gender Questioning*, Trans Melbourne Gender Project, Gay and Lesbian Health Victoria & Rainbow Network Victoria, 2010.)

Resource: *F2M – The Boy Within*, Hazel Edwards and Ryan Kennedy, Melbourne 2010. (Young adult novel.)

AusVELS Level 7 Learning sequence 5, activity 3 'Being 'X' – the importance of fitting in' also includes a focus on young people questioning gender and includes a reference to the DEECD policy 'Gender Identity (students with a transgender or intersex status)', in the *School Policy and Advisory Guide* (2011): <<http://www.education.vic.gov.au/school/principals/spag/health/Pages/genderidentity.aspx>>.

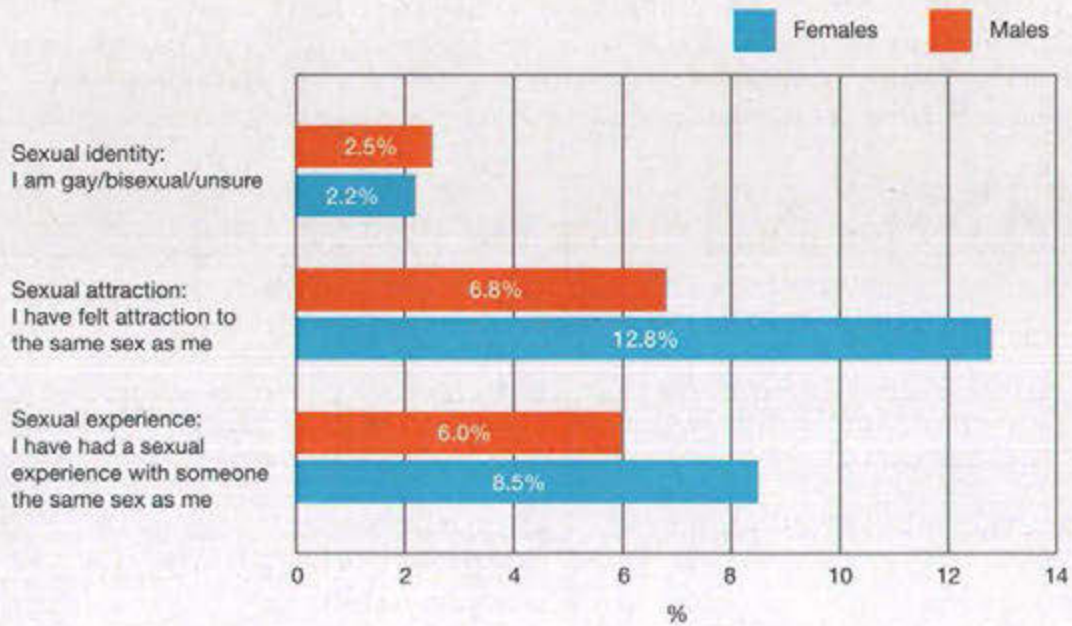
The Australian Study of Health and Relationships, 2002

More data to help us understand the dimensions of sexuality comes from a national survey of 19,307 people conducted in Australia in 2002 (Smith et al., 2003, pp. 138–145). The study found that while relatively few people identify as gay, lesbian or bisexual, the number of people who have experienced same-sex attraction or sexual activity is three to four times greater.

Among men aged 16 to 59	Among women aged 16 to 59
97.4% of men identify as heterosexual; the rest as gay, bisexual or unsure.	97.7% of women identify as heterosexual; the rest as gay, bisexual or unsure.
92.9% of men say they are only attracted to women; the rest are attracted to both men and women, or men only.	86.5% of women say they are only attracted to men; the rest are attracted to both men and women, or women only.
90.7% of men have only had sex with women; the rest with men and women, or only with men.	88.3% of women have only had sex with men; the rest with both men and women, or only with women.

This research confirms the difficulty in defining and explaining sexuality. Not only can we not easily apply the labels ‘heterosexual’, ‘homosexual’ and ‘bisexual’ to all parts of the population, even one person may experience change over a lifetime. Calling oneself heterosexual or homosexual does not necessarily describe a person’s sexual feeling or sexual experiences over a lifetime.

Same-sex identity, attraction and experience in Australia, 2002



Half the men and two thirds of the women who have had a same-sex sexual experience think of themselves as heterosexual rather than homosexual. This tells us that same-sex experience and attraction are more common in Australia than is shown by the smaller numbers of people who call themselves gay, lesbian or bisexual (Smith et al., 2002).

6 Gender impressions



LEARNING INTENTIONS

- To increase students' awareness of the assumptions and judgements we often make about a person based on that person's sex.
- To strengthen critical thinking skills.

Preparation and materials

- ✓ copies of worksheet 'The story of Maya', enough for half the class
- ✓ copies of worksheet 'The story of Rasul', enough for half the class
- ✓ markers and paper for group responses

Introduction

In this activity, students examine their responses to a character in a story based on their assumptions about whether the character is male or female. This will help students understand how gender perceptions can powerfully affect how we think and view things.

Instructions

- 1 Explain that we will break into two groups to read and discuss a story about the experiences, feelings and challenges facing adolescents.
- 2 Divide the class in half. Distribute 'The story of Maya' to the students in one group and 'The story of Rasul' to the other group. (Do not explain anything about the stories.)
- 3 Give students time to read the story and think about the questions at the end, then compare responses within their group. Each group should jot down their responses (adjectives) on a piece of paper. Make sure the two groups are far enough apart that they do not hear each other.
- 4 After 15 minutes, ask the group that read about Rasul to briefly share with the rest of the class its responses to each of the questions without explaining or discussing their reasoning. Write some of the key responses in a list on the board.
- 5 Now do the same for the group that read the story about Maya.
- 6 Write 'Rasul' above the first list of responses on the board and 'Maya' above the second list. Reveal that the two stories are identical except for the sex of the person.



Discussion questions

- What do we notice about the responses for Maya compared with those for Rasul?
- What does this tell us about the standards for girls compared with the standards for boys?
- Does this double standard affect girls in our community?
- How do you feel about this double standard?

Wrap up

Do you think there are double standards for sexual behaviour amongst your friends or in your community? Do you think that boys are often permitted and sometimes pressured to be sexually active where girls are often discouraged from being sexually active?

We can all decide whether or not we agree with the standards for sexual behaviour within our community. We can also decide if we will comply with these norms or live our lives the way we feel is right for us.

(Activity adapted from *It's All One Curriculum: Activities*, p. 56.)



The story of Maya

Maya first had sex at the age of 16. Her two friends sometimes teased her that she had never had a boyfriend, and they encouraged her to ask out a certain boy and to have sex with him. She was curious, but mostly she felt pressured by her friends, so she asked the boy out and they had sex. Almost everyone at school found out that Maya and the boy had had sex.



Over the next two years, Maya had sex with four other boys. One was a schoolmate, one was a neighbour, one she met at her job, and one she met through a friend. She enjoyed having sex. Maya knew that she did not want to marry any of these boys, but she was nice to each boy at the time, and she never lied to them about her feelings. Having sex partners made Maya feel attractive and important.

Most of the time, Maya was careful about using condoms, but one time she became pregnant and had an abortion.

Another time she got a sexually transmissible infection from a partner but was treated for it immediately.

Now Maya is engaged to a young man whom her family wants her to marry. She likes this young man but she knows that she is expected to refrain from having sex with him until they marry in two years. When she was visiting her cousin in another town, she ran into one of her old boyfriends who wanted to have sex with her again. Maya decided that it wouldn't hurt anyone to have sex this one time before settling down in marriage. She felt, after all, two years with no sex is a long time. Afterward, she confided in her closest friend, who understood.

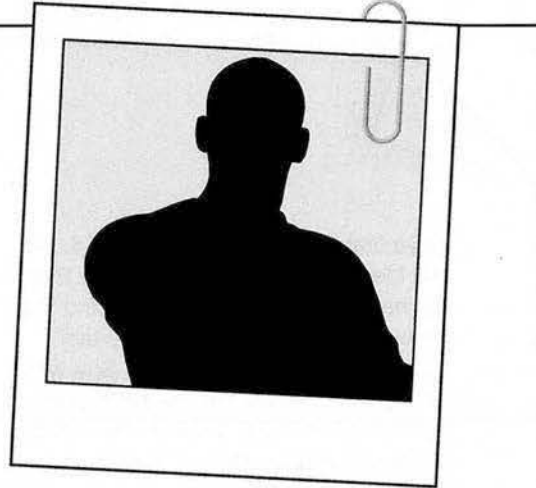


After reading this story, think about these questions and then discuss them with your group:

- 1 What do you think Maya's peers think about Maya? What 'label' might they use to describe Maya?
- 2 How do you feel about Maya?
- 3 Generate a list of at least three or four adjectives that you think describe Maya. For example, is she:
 - Happy or unhappy?
 - Self-confident or insecure?
 - Honest or dishonest?
 - Realistic or unrealistic?
 - Attractive or unattractive?
 - Respectable or not respectable?
 - Typical for a young woman or atypical?
 - Moral or immoral?

The story of Rasul

Rasul first had sex at the age of 16. His two friends sometimes teased him that he had never had a girlfriend, and they encouraged him to ask out a certain girl and to have sex with her. He was curious, but mostly he felt pressured by his friends, so he went ahead and asked the girl out and they had sex. Almost everyone at school found out that Rasul and the girl had had sex.



Over the next two years, Rasul had sex with four other girls. One was a schoolmate, one was a neighbour, one he met at his job, and one he met through a friend. He enjoyed having sex. Rasul knew that he did not want to marry any of these girls, but he was nice to each girl at the time, and he never lied to them about his feelings. Having sex partners made Rasul feel attractive and important.

Most of the time, Rasul was careful about using condoms, but one girl did become pregnant and she had an abortion.

Another time he got a sexually transmissible infection from a partner but was treated for it immediately.

Now Rasul is engaged to a young woman whom his family wants him to marry. He likes this young woman but he knows that he is expected to refrain from having sex with her until they marry in two years. When he was visiting his cousin in another town, he ran into one of his old girlfriends who wanted to have sex with him again. Rasul decided that it wouldn't hurt anyone to have sex this one time before settling down in marriage. He felt, after all, two years with no sex is a long time. Afterward, he confided in his closest friend, who understood.



After reading this story, think about these questions and then discuss them with your group:

- 1 What do you think Rasul's peers think about Rasul? What 'label' might they use to describe someone like Rasul?
- 2 How do you feel about Rasul?
- 3 Generate a list of at least three or four adjectives that you think describe Rasul. For example, is he:

• Happy or unhappy?	• Attractive or unattractive?
• Self-confident or insecure?	• Respectable or not respectable?
• Honest or dishonest?	• Typical for a young man or atypical?
• Realistic or unrealistic?	• Moral or immoral?

7 Tram stop



LEARNING INTENTIONS

- To explore sexuality in the context of human rights.
- To help students develop empathy when confronted with the inequality experienced by others.

Preparation and materials

- ✓ copies of the game board 'Tram stop', one for each group
- ✓ copies of the game instructions, one for each group
- ✓ copies of the worksheet 'Character response', one per student
- ✓ dice, one per group
- ✓ four different colours of game tokens, one set for each group
- ✓ equipment for viewing internet video *LGBTQ Discrimination*
<<http://www.chnyc.org/services/teen/more-than-just-sex-campaign/>>

Introduction

All human beings are born free and equal in dignity and rights. They are endowed with reason and conscience and should act towards one another in a spirit of brotherhood.

(Article 1, Universal Declaration of Human Rights, 1948.)

This activity gives students an opportunity to identify situations where there is no regard, or little regard, for Article 1 of the Universal Declaration of Human Rights. It also allows them to reflect on their own values regarding the rights of young people.

Instructions

- 1 Divide the class into groups of four students.
- 2 Hand out a copy of the game board, instructions, 'Character response' worksheet and a single die to each group.
- 3 Read through the instructions with the students to make sure they understand them.
- 4 Allow approximately 15 minutes for them to play the game and answer the questions on the worksheet.
- 5 Ask each group to report back to the class on the various situations they rolled and a summary of their discussion.

Wrap up

As a society we often claim to adhere to the rights of individuals as defined in many human rights documents. How is this exhibited in our everyday practices? Do our communities, families, social norms and current laws promote sexual wellbeing for everyone?

Many young people in schools are forming support groups (for example, gay-straight alliances) and many schools and individuals belong to the Safe Schools Coalition Victoria (SSCV). This is a coalition of schools and individuals dedicated to creating safer educational environments where same-sex attracted and gender-questioning young people are supported; where every family can belong; where every teacher can teach and every student can learn.

Visit <http://safeschoolscoalitionvictoria.org.au/>.

If time permits, show the video *LGBTQ Discrimination*
<http://www.chnyc.org/services/teen/more-than-just-sex-campaign/>.



TRAM STOP: game instructions

PURPOSE

To develop some understanding of how differences in sexuality can undermine equality in different social environments.

SETTING UP

- 1 Have a look at the possible tram stops. Where there are white dots, add places in your community that are not already included.
- 2 Each player receives a different coloured token. Before starting to play, you will each develop the 'character' assigned to your token by rolling the die twice, as explained below.
- 3 Take it in turns to roll the die.

The first roll determines your biological sex.

- If you roll an even number your character is female.

FEMALE



- If you roll an uneven number your character is male.

MALE



The second roll of the die determines your character's sexual identity.

- If you roll a one your character is gay.

GAY



- If you roll a two your character is straight.

STRAIGHT



- If you roll a three your character is bisexual.

BISEXUAL



- If you roll a four, five or six, roll again.

ROLL AGAIN



You can now give your character a name and begin the tram ride.

HOW TO PLAY

- 1 Place all characters (game tokens) in the centre – 'Start here'.
- 2 Select a beginner and, in a clockwise circle, roll the die and move from the centre towards any large coloured dot. If at any time you land on a large dot, you can choose a destination further from home, such as a different suburb, different city, holiday destination etc. Wherever you land, write this location on your 'Character response' worksheet (including those of your own choice).
- 3 Continue taking it in turns to move around the tram line in a clockwise direction until everyone has made three stops.
- 4 Now discuss the questions with the other players in your group and then complete your worksheet.

TRAM STOP: Character response

Biological sex: female male **Sexual identity:** gay straight bisexual

TRAM STOP 1Location:

- Will you be able to reveal your sexuality at this tram stop or will you need to pretend your sexuality is something else? Explain.
- Will you be welcome at this tram stop? Explain.
- Are there positive or negative consequences for revealing your sexuality at this tram stop? Explain.
- If there are negative consequences, what would need to happen at this tram stop to address this?

TRAM STOP 2Location:

- Will you be able to reveal your sexuality at this tram stop or will you need to pretend your sexuality is something else? Explain.
- Will you be welcome at this tram stop? Explain.
- Are there positive or negative consequences for revealing your sexuality at this tram stop? Explain.
- If there are negative consequences, what would need to happen at this tram stop to address this?

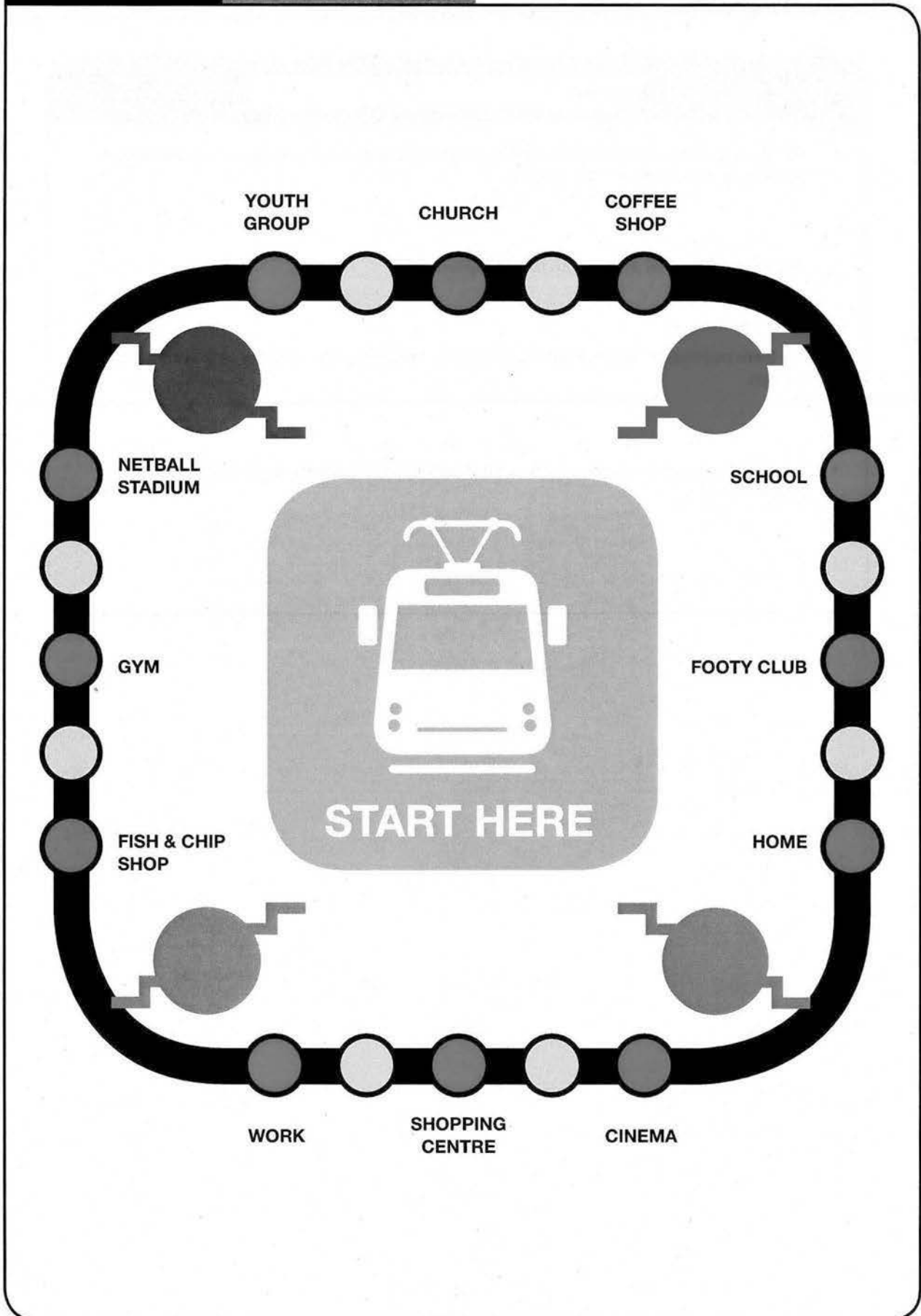
TRAM STOP 3Location:

- Will you be able to reveal your sexuality at this tram stop or will you need to pretend your sexuality is something else? Explain.
- Will you be welcome at this tram stop? Explain.
- Are there positive or negative consequences for revealing your sexuality at this tram stop? Explain.
- If there are negative consequences, what would need to happen at this tram stop to address this?

LEARNING SEQUENCE 1

Gameboard • Tramstops

AusVELS Levels 9 & 10 Learning Sequence 1



8 Presenting sexuality – content analysis exercise



LEARNING INTENTIONS

- To facilitate substantive conversation about assumptions associated with sexuality through the use of media.
- To explore the language of sexuality through the critical examination of media.

Preparation and materials

- a broad range of various types of media materials (if you feel your students may find the task of collecting these too difficult)

Introduction

The media is a major information source for young people, including representations of gender. Therefore, it's important for young people to critically analyse the media to which they are exposed.

This activity will need to be given sufficient time to allow students to undertake their analysis. The activity could be spread over several classes if you decide students could source their own materials and then present findings to the class as a poster, video, PowerPoint etc.

This is a possible assessment task.

Instructions

- 1 Break into pairs or small groups (three or four) to complete a content analysis exercise.
- 2 Ask students to find five examples of intimacy from a mix of media, for example, in a book, novel, movie, advertisement, TV show, music video, magazine article, YouTube video, electronic game or other form of media. If students are analysing internet content, check their sites first to ensure suitability.
- 3 Ask them to develop a question to guide their analysis. Sample questions could include:
 - Is sexuality presented in a positive light?
 - Are young people portrayed as white and heterosexual?
 - How is sexuality used to sell products?
 - Who is missing from these presentations? (People with disabilities, indigenous people etc.)
 - Is the representation real?

To help students address their chosen topic, some of the following questions could be used to focus their analysis. Ensure that all students address the last four questions.

- What themes did the media cover (e.g. sex, love, romance, desire etc.)?
- What is being said in the articles about girls and sexuality, and boys and sexuality?
- Were girls and boys presented in similar or different ways?
- Was sexuality presented in a negative or positive light?

- Did any of the media cover same-sex relationships? How were these presented?
 - Was there any focus on particular cultural groups or other groups such as people with disabilities?
 - What assumptions are being made about sexuality? For example, people who have disabilities do not have sexual relationships; girls only want romance out of relationships etc.
 - What are the implications for young people of the assumptions made? Who does this view benefit?
 - What could be done to change these assumptions?
 - Do different types of media treat sexuality differently? For example, a glossy magazine compared to a local newspaper?
- 4 Allow sufficient time for students to research and write up their findings.
 - 5 Students present their findings to the class as a talk, podcast, poster, tape, video, role play or story.

Wrap up

From the analysis that you have done, and from the presentations you have seen, write a short paragraph describing what impact this exercise has had on you.

LEARNING SEQUENCE

2

Relationships and communication

- 1 Relationships, love, desire and intimacy
- 2 The wall of love
- 3 Breaking the ice
- 4 When love ends
- 5 Sex – what is it?
- 6 Communicating intimacy in a relationship

AusVELS LEVELS 9 & 10**HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion***

- › roles and responsibilities in sexual relationships
- › sexuality and sexual health, e.g. safer sex practices, sexual negotiation, same-sex attraction and the impact of alcohol on sexual and personal safety
- › support strategies for young people experiencing difficulties in relationships or with their sexuality.

INTERPERSONAL DEVELOPMENT – *building social relationships*

- › complex social conventions when interacting with others
- › barriers to achieving positive relationships
- › strategies that could be used to overcome barriers to effective relationships
- › skills and strategies to prevent and resolve conflict.

1 Relationships, love, desire and intimacy



LEARNING INTENTION

- To examine the concepts of love, desire and intimacy and allow students to explore the range of experiences and situations where these concepts are relevant to them.

Preparation and materials

- ☑ equipment for showing PowerPoint presentations 'Definitions of love, desire and intimacy' and 'Romance', or you may wish to develop handouts instead

Note: the PowerPoint presentations 'Definitions of love, desire and intimacy' and 'Romance' are available online at: <http://www.education.vic.gov.au/school/teachers/teachingresources/social/physed/Pages/resources.aspx>.

Introduction

Research and evaluation of sexuality education programs (Carmody et al., 2010; Allen, 2009) clearly shows that many programs concentrate on the physiology of vaginal/penile sex and issues around the prevention of the possible negative consequences of sex, such as STIs and pregnancy. Research has shown, too, that students also want to examine issues of love, intimacy and desire. If schools are to provide a comprehensive program that takes a health-promoting approach, students not only need to examine sexual practices but also the context in which they occur.

Definitions of love, desire and intimacy

LOVE

- 1 A deep feeling of affection, attachment and solicitude for another person.

DESIRE

- 1 To wish; to long for; to hope for; to want; to exhibit or feel desire for. To have a powerful romantic or sexual attraction for someone (or something).
- 2 Sexual desire, lust, passion; a wish, a longing or craving, especially for sexual activity.

INTIMACY

- 1 The state or condition of being intimate; the capacity to relate to another person in an emotionally open, equal, and caring way.
- 2 An instance of being intimate; a close, trusting, confidential friendship (or personal relationship) between two people who are completely at ease with one another and feel free to express their innermost feelings.

(Farlex, Inc. 2004)

Instructions

- 1 Using the definitions provided on the PowerPoint, or a handout you have made from the definitions above, introduce the concepts of love, desire and intimacy. As a whole group discuss the following questions:
 - Is it possible for a person to desire someone without loving him or her?
 - Is it possible for a person to love someone without desiring him or her?
 - Is it possible for a person to be intimate with someone without loving him or her?
 - Is it possible for a person to love someone without being intimate with him or her?
 - Are there members of the community that the law forbids people to sexually desire and be sexually intimate with?
- 2 Brainstorm the positives and negatives of being in love. Record these on the board.

Discussion questions

- Given there are some negatives to loving someone, why do people take the risk of falling in love?
- How might you be able to lessen the impact of the negatives? For example, if one of the negatives is breaking up, how might that occur with as little impact/sadness as possible?

Wrap up

Use the PowerPoint 'Romance' or read out the description of romance and love below on page 234.

Romance

What is falling in love? What is 'true love'?

Ideas about 'romance' and 'love' vary in different settings. Typically, 'falling in love' involves feelings of passion, sexual attraction, and excitement. Sometimes this feeling is called a crush, romance or infatuation.

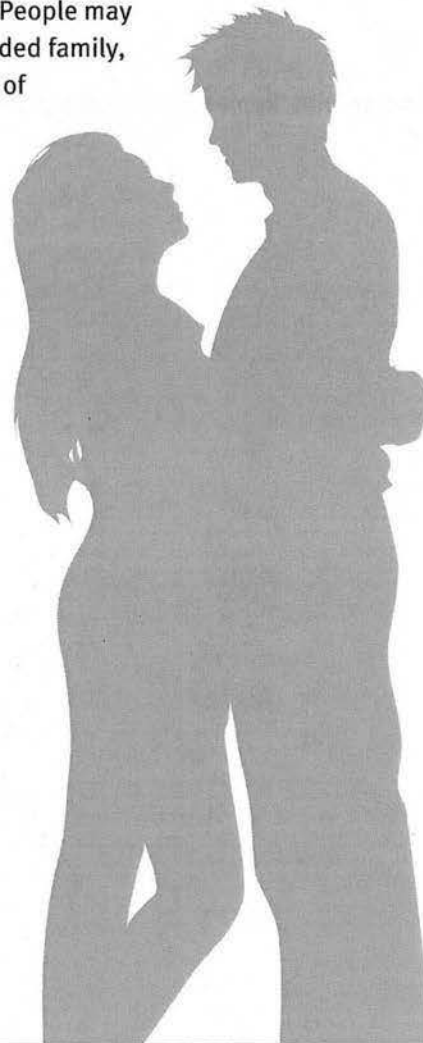
Falling in love is often a thrilling experience. A romantic relationship sometimes (although not always) involves feelings of commitment and intimacy. Falling in love can be a one-sided experience; the object of the love may not feel the same.

Everyone can fall in love. Adults, as well as adolescents, fall in love. People may fall in love only once, more than once, or many times in their lives.

Children grow up absorbing many messages about romance and love. What is 'true love'? Loving someone is caring deeply for that person and being committed to his or her wellbeing and happiness. Loving and being loved can be the source of deep joy and meaning in life. Love is one of the most powerful emotions that people experience. It has inspired great works of art, literature and music.

There are many different ways to love somebody. People may feel love for members of their immediate or extended family, for close friends, and for their partners or spouse of the same or the other sex. The terms 'true love' or 'real love' often refer to an intimate partner bond that has moved beyond the 'falling in love' or infatuation stage. Sorting out feelings of affection, romantic love, sexual desire, and 'true love' is often difficult and confusing. Everyone receives messages from her or his culture about what love is, whom we should (or should not) love, and how we should express (or not express) our love.

(International Sexuality and HIV Curriculum Working Group, 2009, p. 128)



2 The wall of love



LEARNING INTENTIONS

- To think about and discuss the feelings associated with love.
- To challenge students to represent their understandings in multiple ways.

Preparation and materials

- ✓ large paper, two sheets per group
- ✓ markers, one set per group
- ✓ sticky notes, one pad per group
- ✓ bare classroom wall

Introduction

Music is a very powerful medium for expressing many feelings; romance and love, in particular. In this activity, students will have an opportunity to explore these feelings and express them in the form of a lyric.

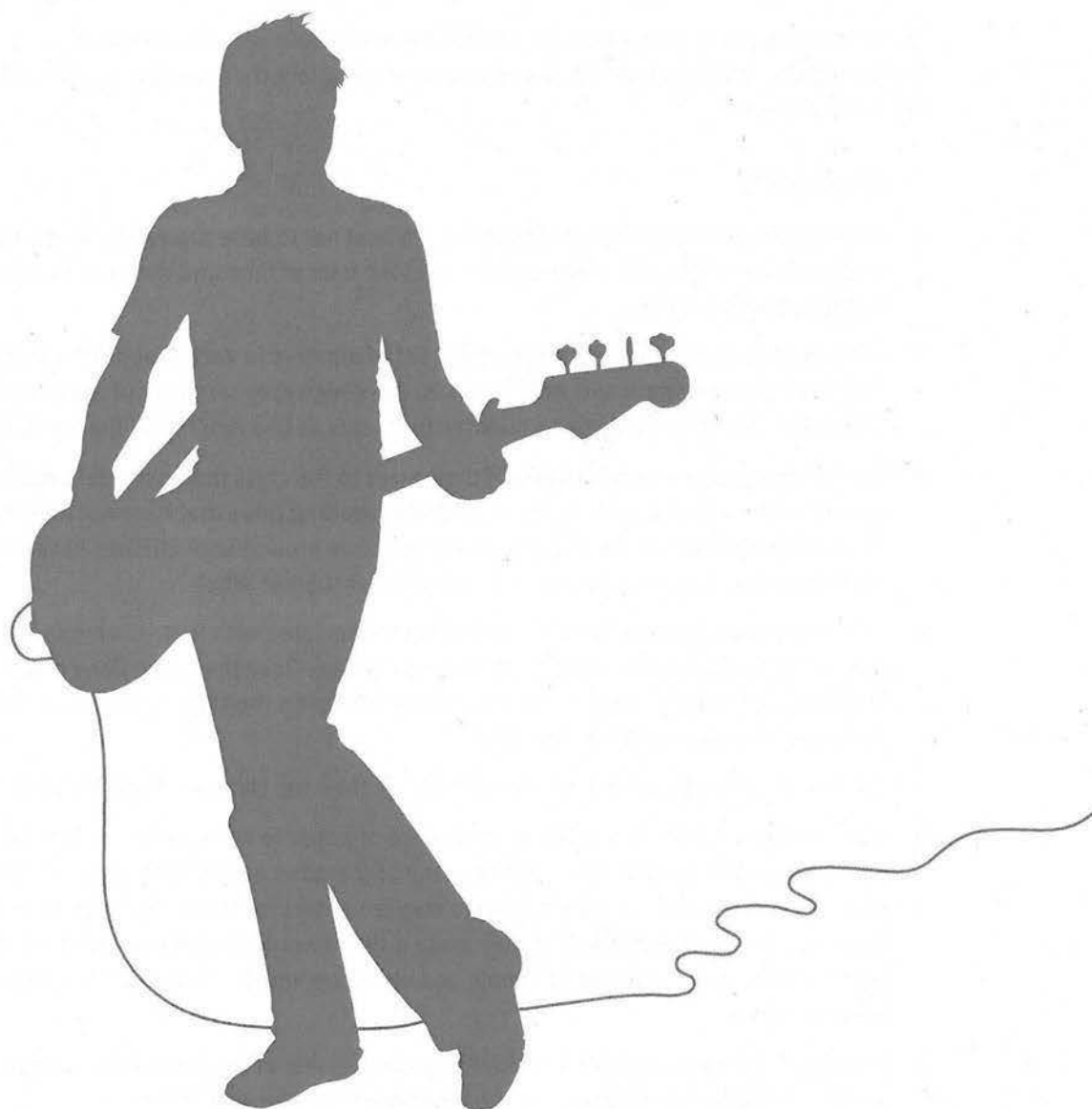
Instructions

- 1 Divide the class into groups of about six. It's best not to have more than four groups as the presentations at the end of the activity can take a lot of time and they are a very important element of this activity.
- 2 Hand out two large sheets of paper and a set of markers to each group. When you say 'start', they need to brainstorm and write down all the songs they can think of with the word 'love' in the title. Give them only three minutes to do this as you don't want the list to be too long.
- 3 Ask the first group to read out one of their titles to the class then have the second group add one. Go on to group three then group four, adding titles that have not already been mentioned. Go back to the first group and continue around until all titles have been contributed. As a class, discuss: Is love a popular theme? Why?
- 4 Now ask groups to brainstorm all the feelings associated with love – being in love or falling in love. Write these words on the sticky notes provided. Once they have done this, each group selects their top three words and sticks the notes up on the class 'wall of love' (to inspire all, when it comes time to create jingles).
- 5 Ask one person from each group to report back their top three words to the class.
- 6 Now ask the students to use the second piece of paper to write a love jingle which must include their top three words – and as many of the other words from the wall of love as they wish. Have them write the jingle in large enough letters for the whole class to read. To get them started, you might suggest they make a list of words that rhyme with their top three words and/or use a tune that is simple and everyone knows, such as a Christmas carol or nursery rhyme.
- 7 Invite each group to perform their love jingle to the rest of the class. After being sung, the jingles should be placed above all the other words on the wall of love.

Wrap up

We see and hear many positive and negative things about love. Music videos sometimes depict love as being ready for sex. Just because you're in love does not necessarily mean you are ready to have sex.

Because love is different for everyone, there is not a checklist for you to go through to make sure this is the real thing. However, there are some indicators, such as: trusting the person; knowing that even when you're not together there is an emotional attachment; being able to be yourself when you're together; sharing some common values and interests; and enjoying each other's company.



3 Breaking the ice



LEARNING INTENTIONS

- To develop language that will promote conversation within a relationship.
- To identify communication strategies that facilitate positive relationships.

Preparation and materials

- ✓ cards 'Opening lines and responses', one set for class
- ✓ worksheet 'Pointers for encouraging conversation', one per student (alternatively, the short PowerPoint presentation could be used, or pointers could be listed on the board)

Note: the 'Pointers for encouraging conversation' PowerPoint presentation is available online at: <http://www.education.vic.gov.au/school/teachers/teachingresources/social/physed/Pages/resources.aspx>.

Introduction

It is expected that students will have already had some lessons on communication skills and how to be an active listener. If this is not the case, you could start with an exercise you know or use the one provided in AusVELS Level 7, Learning Sequence 1, activity 4. If students have not done work around good communication strategies, the worksheet 'Pointers for encouraging conversation' might be useful.

To be able to initiate a conversation confidently, students often need to practice their repertoire. In this activity the students will be given time to develop a strategy for beginning a conversation that may be a little awkward. They will have an opportunity to rehearse and discuss the effectiveness of their strategies.

Instructions

- 1 Make a large circle and include yourself. Ask everyone to have a seat.
- 2 Hand out the worksheet 'Pointers for encouraging conversation' (or show presentation), and ask students to use the pointers during this exercise, particularly the suggestions for body language.
- 3 Assign numbers to students starting from both your left and right sides at the same time – so that there are two '1's, two '2's, two '3's etc. – until you reach the middle of the circle. If there is not an equal number you will need to participate.
- 4 Explain to the class that half of them will be trying out some opening lines in order to start a conversation with someone they may not have spoken to before. The other half will be responding to the lines.
- 5 Ask both number '1's to stand and face each other. This is a good time to remind students about what sort of body language encourages conversation, e.g. eye contact, smiling, open stance etc.

- 6 Now hand out the first pair of 'Opening lines and responses' cards to the number '1's. Explain that the person holding the opening line will read their card first and that this will be quickly followed by the designated response from the other student.
- 7 Using the remaining cards, continue around the group until all pairs of students have had a turn.
- 8 Ask the class which of the opening lines they think might work and why. How could you improve any of them?
- 9 Write up examples of the 'improved' opening lines and when the class has agreed on a few, practice them in pairs. Try to come up with different lines for different situations or circumstances.

? Discussion questions

- o Can this exercise apply to how you communicate on social media?
- o What, if anything, needs to be changed to make it more useful in terms of communicating on social media?

Wrap up

When meeting someone for the first time, whether you want to show your interest in them or not, it's important to think about how you communicate.

If you want the conversation to be more than just a brief exchange, your opening line needs to be something the other person can respond to in some detail. Your body language will tell the other person how interested you really are in them.



LEARNING SEQUENCE 2

Cards • Opening lines and responses

**OPENING LINE 1**

'Hi, how are you going?'

RESPONSE 1

'OK. How about you?'

OPENING LINE 2

'Hi. I'm Sam,
what's going on?'

RESPONSE 2

'Hi. Not a whole lot yet.'

OPENING LINE 3

'Hi, are you having an
OK time?'

RESPONSE 3

'Sure, it's not bad.'

OPENING LINE 4

'How do you
know Jenny?'
(Jenny is giving the party.)

RESPONSE 4

'She lives just across
the street from me.'

OPENING LINE 5

'Are you into this kind
of music?'

RESPONSE 5

'Not really but it's OK.'

LEARNING SEQUENCE 2

Cards • Opening lines and responses

**OPENING LINE 6**

'I'm getting a bite to eat,
can I get you anything?'

RESPONSE 6

'Sure. Just grab me
whatever you're getting.'

OPENING LINE 7

'I noticed that you were
playing the new game on
your phone, is it any good?'

RESPONSE 7

'It's not bad.
Would you like a go?'

OPENING LINE 8

'You're new here...
what school were you at
last term?'

RESPONSE 8

'Yes, I'm new.
I moved from City College
a few weeks ago.'

OPENING LINE 9

'I like that shirt;
I just bought one like it
for a friend.'

RESPONSE 9

'Thanks.
I picked it up cheap
at a sale.'

OPENING LINE 10

'You seem to really get
this stuff; can you help me
get started?'

RESPONSE 10

'Sure, we could do
a bit at lunch time.'

LEARNING SEQUENCE 2

Cards • Opening lines and responses

**OPENING LINE 11**

'That looks like a new phone – what do you like about it?'

RESPONSE 11

'Yeah, I can get really good apps and games on it.'

OPENING LINE 12

'Did you do anything fun on the weekend?'

RESPONSE 12

'Just went to the movies with friends and watched the game on TV.'

OPENING LINE 13

'Are you going to the music festival next weekend?'

RESPONSE 13

'No, I wasn't able to get tickets. What about you?'

OPENING LINE 14

'Have you tried out the new pizza shop near the school?'

RESPONSE 14

'No, but I've walked past it a few times on my way home.'

OPENING LINE 15

'I noticed you at the game yesterday. Which team do you follow?'

RESPONSE 15

'Neither, really. I have friends on both teams.'

Pointers for encouraging conversation

ASK OPEN-ENDED QUESTIONS

Ask questions that allow the person to talk or tell a story. Use words or phrases such as 'how', 'please tell me more' or 'explain what you mean'.

USE BODY LANGUAGE THAT HELPS PROMOTE SUCCESSFUL COMMUNICATION:

- make eye contact
- smile
- use gestures that show you understand, such as nodding your head.

DURING THE CONVERSATION, RESPOND BY:

- Asking clarifying questions, such as, 'So what you're saying is...'
- Asking for an example of what they are saying.
- Not trying to outdo the person you are talking to with a story about how it happened to you but was so much more important, funnier, sadder, etc.

IN A NUT SHELL

Be an active listener. Nod your head, ask questions, and maintain a comfortable level of eye contact.



4 When love ends



LEARNING INTENTION

- To enhance methods of communicating in situations that may be sensitive or difficult.

Preparation and materials

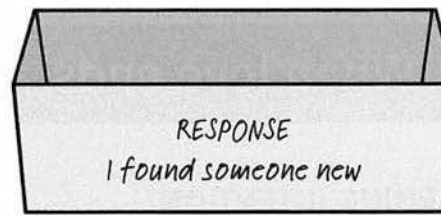
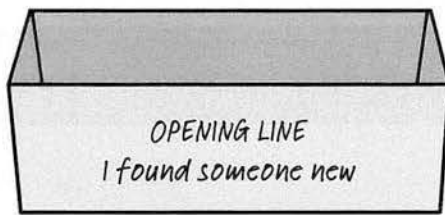
- ✓ paper strips of two different colours (e.g. yellow and green), one of each per student
- ✓ small boxes or envelopes, two per group

Introduction

Break-ups in young relationships happen frequently. They may occur with little or no distress to either person, but sometimes the break-up can carry with it a great deal of hurt and sadness. Many of us have our first romantic relationship during our teens, so realistically it's unlikely to be our only one. We will therefore experience the thrill of a new relationship, and also the sadness of one ending, more than once. In this activity it is intended that students will acquire some skills to say what they are feeling and to communicate clearly why it is time to end a relationship. It is desirable for this to be relayed in a manner that is honest and sympathetic, having regard for the other person. You will notice the similarities with this activity and the previous one.

Instructions

- 1 As a class, brainstorm ideas about when and why a relationship might end. Record the responses on the board. Some examples might be:
 - you don't feel the same about the other person anymore
 - the relationship isn't equal
 - trust is gone
 - there may be a change of circumstances, e.g. where you live or go to school
 - you found someone else you're interested in
 - the relationship feels uncomfortable
 - you have different values
 - you argue all the time
 - the relationship is violent
 - it's not fun anymore.
- 2 Select five representative examples of why a relationship might end and write these up on the board.
- 3 Divide the class into five groups and assign one of these examples to each group. Give each group two small boxes or envelopes and ask them to write their example scenario on both boxes/envelopes, as well as 'opening line' on one and 'response' on the other.



- 4 Ask each group to discuss amongst themselves ways they could start the break-up conversation in their given scenario, and how the other person might respond.
- 5 Hand out the slips of paper, one of each colour to each student. Using the first colour, e.g. yellow, students should write an opening line on the slip. They should then write a response to this on their other slip (e.g. the green one). Each student should then put these into the appropriately labelled boxes or envelopes where they will be mixed up.
- 6 Now students take it in turns within their groups to draw out an opening line while another member draws out a response. Ask students to practice these out loud. After everyone in the group has had a turn at opening the conversation and replying, discuss ways that might make it better. Make changes on the slips or write new ones (in which case, the teacher will need to provide more slips).
- 7 Put the opening lines and responses back into the envelopes or boxes and transfer these to a different group.
- 8 When each group has received their new scenario, repeat instructions 4–7. At the end of this, each group selects the two best opening lines from their current box/envelope.
- 9 Ask for volunteers to read out the break-up scenario and then read out the two best ways of beginning the conversation. For teachers who enjoy it, this could be done as a role play, being sure to debrief the participants at the end.

? Discussion questions

- How does it feel being the person to initiate the break-up?
- How does it feel having someone tell you they want to break up?
- What things should we consider when we know it's the right time to end a relationship?

Wrap up

The important thing is to make sure that you have communicated your feelings. Sometimes, ending a relationship can be accompanied by strong feelings. These feelings may be felt not only by the partners who are breaking up, but also by their friends and family. There may be feelings of sadness, anger and hurt, but there may also be feelings of relief. Some young people may feel they have learned from the experience – such as how important it is to remember your friends, who we sometimes put aside when we are in the middle of a romantic relationship. After a break-up, we may feel better prepared for the next relationship.

5 Sex – what is it?



LEARNING INTENTIONS

- To enable students to connect and organise new content with prior learning about sexuality.
- To provide an opportunity for students to sustain a conversation that deepens their individual and collective understanding of sex.

Preparation and materials

- ✓ cards 'Sexual behaviours' including the voting cards 'sex' and 'not sex', one set per group

Introduction

In order to engage in public debate, students need an opportunity to practice verbalising their ideas, and to listen and scrutinise the opinions of others. In this activity the topic they will discuss is how we define sexual behaviours.

It is important that students have participated in AusVELS Level 7 'Teacher's choice' Learning sequence 2, activity 1, 'The "sex" in sexuality', before commencing this activity.

Instructions

- 1 Divide the class into groups of four and hand out a set of 'Sexual behaviours' cards and voting cards to each group.
- 2 The groups need to sort the cards into two categories: 'sex' or 'not sex'. Allow time for discussion and for a consensus to be reached.
- 3 Once all the groups have completed this task, read out a behaviour card to the class and allow each group to vote either 'sex' or 'not sex' by holding up one of their voting cards. Keep track of the results on the board. Repeat with each behaviour card.



Discussion questions

- Where there was class agreement, ask why this was an easy or more straightforward behaviour to classify.
- Where the whole class was not in agreement, ask if there had also been disagreement within the groups and, if so, why? Why is it more difficult to classify these behaviours?
- What would be a good definition of sex?
- Is it important for everyone to have the same way of defining these behaviours?
- What could be the implications for couples who have different definitions of sex?
- If oral sex is classified as not having sex, is your partner unfaithful if he/she engages in oral sex with someone else? Could they catch or pass on a STI?

Wrap up

Nobody is ever obligated to have unwanted sexual contact. Should you desire and agree to have sexual contact, remember that it may include holding hands, kissing, caressing and other intimate activity, as well as sexual intercourse. For some people, sexual activity may be in a context of love, and for others, in certain situations, it may not. It should, however, always be in a context of trust and respect.

It's also important for young people to know what their options for intimacy are. It doesn't have to be sexual intercourse to be pleasurable.

Some questions you may like to ask yourself, before committing to having sex, are:

- Why do I want to have sex?
- Am I ready to have sex?
- Is my partner ready to have sex?

If you look at the research from 4th National Survey of Australian Secondary Students (Smith et al. 2009), you can see that less than a third of Year 10 students have ever had sexual intercourse.

Table: Sexual experience – sexual activity

Sexual activity	Percentage of students who reported sexual activities in 2008	
	Year 10 total M/F	Year 12 total M/F
Survey question: Have you had an experience of... ?		
deep kissing	70.5	89.2
sexual touching	55.6	77.6
oral sex	33.6	58.4
sex without a condom	16.6	41.1
sex with a condom	27.4	55.6
Survey question: Have you ever had sex?		
students who have ever had sexual intercourse	27.4	56.1

(Smith et al., 2009, p. 26)

LEARNING SEQUENCE 2

Cards • Sexual behaviours



Holding hands

A person gets sexual pleasure from holding hands with someone.

Kissing

Partners use their mouths to pleasure each other's mouths. Can also kiss anywhere on partner's body.

Body and/or genital rubbing

Rubbing genitals against a partner's body or genitals for sexual pleasure.

Love letters

A person gets sexual pleasure from writing or receiving love letters.

Anal intercourse

A man inserts his penis into his male or female partner's anus.

Cuddling

A person gets sexual pleasure from cuddling their partner.

Oral sex (cunnilingus)

A person uses his or her tongue to stimulate the female partner's genital area.

Vaginal intercourse

A male inserts his penis into his female partner's vagina.

Fantasy

Imagining things that are sexually arousing.

Oral sex (fellatio)

A person uses his or her mouth/tongue to stimulate their partner's penis.

LEARNING SEQUENCE 2

Cards • Sexual behaviours



Digital stimulation

A person inserts their finger(s) into their partner's vagina or anus.

Internet messages

Messages which are sexually arousing but not abusive.

Massage

A person gets sexual pleasure from being massaged.

Masturbation

Giving yourself sexual pleasure, usually by touching or rubbing your genitals. Can involve fantasy.

Nipple stimulation

Licking, sucking or rubbing etc. the nipples for sexual arousal.

Pornography or sex toys

Using images or toys for sexual arousal and pleasure.

Phone sex

Phone calls which are sexually arousing but not abusive.

Text messages

Messages which are sexually arousing but not abusive.



SEX

**NOT
SEX**

6 Communicating intimacy in a relationship



LEARNING INTENTIONS

- To develop language that is helpful in negotiating your wants or desires in an intimate relationship.
- To provide a safe environment for students to rehearse this conversation.

Preparation and materials

- ✓ paper strips of two different colours (e.g. yellow and green), one of each per student
- ✓ two small boxes differentiated by the same two colours as the paper strips (you could paint or paper the boxes, or just label them with a coloured marker)

Introduction

Sexual intercourse may – but does not always – happen within an intimate relationship. There are many reasons why the nature of a relationship can change and many ways for this to occur. In the previous activity, the class discussed several different ways of being intimate.

In order to increase their repertoire for managing this rather difficult conversation, it's important for students to rehearse opening lines and responses. You will notice the similarities between this activity and several of the previous activities.

Instructions

- 1 Brainstorm and write up, on the board, the reasons young people may want to have sex. Then brainstorm the reasons young people may *not* want to have sex and record these next to the first list.
- 2 Hand out one slip of yellow paper and one slip of green paper to each student. (Other colours can be used.)
- 3 Ask all students to think about an opening line they might use to get a conversation started about whether or not to have sex. Each student writes this statement on the piece of yellow paper and places it into the yellow box. They can use the statements already on the board to help them get started.
- 4 Now ask all the students to think of a response they might use if their partner had started the conversation about having a sexual relationship. Students now write this response on the green paper and place it in the green box. It might be a 'yes, because ...' response or a 'yes, but ...' response with attached conditions; or it might be a 'no, because ...' response pointing out the reasons why not.
- 5 Ask the students to sit in a circle with the teacher as part of the circle. Place the boxes in the centre of the circle.
- 6 Ask the student on your right and the student on your left to move to the centre. The student from your right will take a slip from the yellow box and the student from your left will take a slip from the green box.
- 7 Beginning with yellow, the student reads out the statement and the student with green reads the reply. The statements that have been read are left on the floor beside the boxes.

- 8 Go around the circle twice, until each student has read both a yellow statement and a green statement. Sometimes the replies will not make a very good match for the opening line. Don't worry about it – have a laugh and proceed to the next pair.
- 9 Once you have finished the discussion questions below, students may like to have another attempt at writing opening lines and responses. Or, they may select just a few of the ones they think work and repeat the activity using just those lines.

Discussion questions

- Why do you think it might be difficult to start the conversation?
- Why do you think it might be difficult to reply to your partner?
- Can you think of other ways of raising the topic?
- Where might this conversation lead?
- Is it OK to have the conversation and decide not to have a sexual relationship?
- Why is communication about sex important? Possible answers:
 - It helps to ensure that consent to having sex is given freely, without coercion.
 - It helps to avoid misunderstandings.
 - It might help prevent an unintended pregnancy.
 - It might help prevent the spread of STIs.
- What do you think are the most common reasons for having unwanted sexual intercourse? (Refer to the table on page 252, 'Sexual experience'.)
- What happens when you add alcohol to the situation? (Refer to the table on page 252, 'Sexual experience'.)
- If you're not quite sure about participating in a sexual act but go ahead despite those inner feelings, how might you feel afterwards? (Sometimes it's important to go with our 'gut' feelings as they often reflect our own values.)
- What is the law with regard to consent?

The following link may be of use in your discussion. It's also a good site for young people to view – http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Sex_are_you_ready?open.

Wrap up

The level of intimacy you share with your partner is a personal decision. The greater the intimacy the more important it becomes for you to determine what feels comfortable, safe and right for you in this context. Thinking about sex before it happens is a good thing. It should enable you to make the decision you want. Remember that sometimes you or your partner may be under the influence of alcohol when you find yourself having to decide whether to stop or go further. Although alcohol may lessen inhibitions and you may feel more inclined to have sex, the downside might be that you make a decision you regret, i.e. have sex or have unprotected sex.

There are some circumstances where consent has not been given. The following information from Victoria Legal Aid is important.

When one person does not agree to sex

As well as imposing age limits, the law says that two people can't have sex unless they both agree (consent). If you don't agree and someone threatens you or touches you sexually they are breaking the law.

If someone has sex with you or touches you sexually when you are asleep, unconscious or so affected by alcohol or drugs that you are not able to agree, it is still sexual assault.

Victoria Legal Aid website: < <http://www.legalaid.vic.gov.au/745.htm>>.

Table 1: Sexual experience – Sexually active students who discussed sex-related issues during their last sexual encounter (%)

Sex-related issues discussed	Percentage of students who were sexually active in 2008	
	Year 10 total M/F	Year 12 total M/F
Survey question: <i>Think back to the last time you had sex. Before you had sex, did you talk to this person about... ?</i>		
avoiding pregnancy	46.6	42.8
avoiding HIV infection	21.9	13.3
avoiding other STIs	26.6	16.2
how to get sexual pleasure without intercourse	37.1	31.2
using a condom	75.1	67.2
Survey question: <i>Have you ever had sex when you didn't want to?</i>		
sexually active students who have ever had unwanted sex	29.2	33.8

Table 2: Sexual experience – Sexually active students who discussed sex-related issues and ever had unwanted sex: reasons (%)

	Percentage of students who are sexually active and who have ever had unwanted sex	
	Year 10 total M/F	Year 12 total M/F
Survey question: <i>Reasons given for having unwanted sex</i>		
too drunk	16.3	17.4
too high	6.0	2.4
my partner thought I should	15.5	18.9
my friends thought I should	3.6	2.5

(Smith et al., 2009, pp. 35–36)

Teacher advice

Recommended legal resources for teachers and students

Am I old enough? is a handy booklet for young people about the law.

Order or download for free at: www.legalaid.vic.gov.au/583.htm

Young people and the law is a teachers' kit.

Order or download for free at: www.legalaid.vic.gov.au/803.htm

LEARNING SEQUENCE

3

Pressure, power and sexuality

- 1 What are the rules?
- 2 Stepping out

AusVELS LEVELS 9 & 10**HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion***

- › factors influencing the development of identity
- › roles and responsibilities in sexual relationships
- › assumptions, community attitudes and stereotypes about young people and sexuality
- › policies/practices related to sexual harassment, homophobia and discrimination.

INTERPERSONAL DEVELOPMENT – *building social relationships*

- › complex social conventions when interacting with others
- › local and global values and beliefs, and the impact on their own and others' social relationships
- › barriers to achieving positive relationships
- › strategies that could be used to overcome barriers to effective relationships.

1 What are the rules?



LEARNING INTENTION

- To examine intimate relationships and sexual standards for young people.

Preparation and materials

- spend time navigating the website <www.lawstuff.org.au> or other sites you find helpful
- copies of the worksheet 'What are the rules?', one per student

Introduction

This activity caters for a broad range of students, from those who are not sexually active to those who may be. All students can consider the laws, social norms, peer norms, parent/carer rules and their own views and values regarding sexual behaviours.

This activity is appropriate to complete for homework or in class.

Instructions

- 1 Divide the class into groups of four or five. Hand out the worksheet 'What are the rules?' to each student. Discuss what we mean by unwritten rules, standards and expectations, and why they may be different for the various groups listed at the top of the worksheet. You might want to use the following example scenario:

I'm 17 and my parents have just split up. I'm allowed to have my boyfriend sleep over (which may include sexual intercourse) when I'm at my dad's house but not when I'm staying at my mum's house.

Using this example, some possible responses might be:

- **the law** – age of consent would need to be considered
 - **social norm** – in the context of your community, is this ok?
 - **peer norm** – your peers may think it's ok even if they are not allowed to do it
 - **parent/carer rules** – in this instance the rules for each are different
 - **my own rules** – you believe it to be OK, or maybe there has been pressure applied to you and you really aren't comfortable with it.
- 2 Ask groups to discuss amongst themselves how the scenarios listed on the worksheet apply to young women and men between the ages of 17 and 25.
 - 3 Inform students they will have to do some research to find out what the laws in Victoria are in relation to some of the statements. Students can either research the laws themselves or teachers may like to guide students through the website <www.lawstuff.org.au>.
 - 4 All students are required to do is record answers in the first three columns on the worksheet. If the norms are different for males and females, include this information in the grid. Filling in the last two columns – parent/carer and self – is optional, but students may want to reflect on these during their class discussions and/or later by themselves. Some of these topics may not have been discussed at home and students may not know their parent/carer's view.

Discussion questions

- How do the laws differ from the unwritten rules such as those determined by our peers and parents?
- Are there benefits to the rules and, if so, who do they benefit?
- What are the laws governing sexuality in Victoria?
- What are the sexual rules for girls of this age?
- What are the sexual rules for boys of this age?
- What are the differences according to age? Why are there differences?
- Are there differences for other groups of young people?
- Who is it acceptable to have sex with?
- Who is it not acceptable to have sex with?
- How do you feel about the rules, standards and expectations?
- Do rules determine a level of power? If so, who do they benefit?
- Where do these unwritten rules, expectations and standards come from?
- Is it possible to change any of these unwritten rules, expectations and standards? How?

Wrap up

It is important to consider social and gender norms around sexuality, and to critically analyse them in relation to laws pertaining to sexuality. Laws are written to protect people, and while all people are held accountable to the law there is a choice about how much you want to subscribe to social expectations.

What are the rules?

What are the rules for?	What's the law?	What's the social norm?	What's the peer norm?	My parent/carer rules	My own rules
age for social networking					
receiving a nude photo on a mobile					
taking responsibility for contraception					
time to be home on the weekend					
having sex with someone of the same sex					
having sex with someone of the other sex					
being part of an abusive relationship					
sending a nude photo of a friend to a third person					
travelling on trains after midnight					
being coerced or threatened to have sex					
looking at porn on the internet					

2 Stepping out



LEARNING INTENTIONS

- To provide students with an opportunity to feel and understand empathy.
- To demonstrate the importance of respectful relationships.

Preparation and materials

- ✓ copy of question sheet 'Stepping out', for teacher use
- ✓ large working space to enable students to move around easily

Introduction

This activity enables students to move from identifying assumptions made about sexual diversity and looking at how they have developed, to more closely investigating the implications of these assumptions. Students will have the opportunity to experience someone else's situation so that they can become more aware of what it might be like to be gay, lesbian or bisexual. Putting themselves into someone else's shoes, if they have not before considered the issues and implications, can be challenging, so it is crucial that a supportive classroom environment is created and maintained.

Through being aware of these common misconceptions and their implications for those who do not identify as exclusively heterosexual, schools can work to eliminate them and provide a supportive environment for all.

Instructions

- 1 Divide the class into two groups. Assign one group to be 'straight' and the other to be 'gay'. Once they have been assigned their identities, the students can mingle again. Inform students that the aim of this activity is to gain awareness of issues affecting different groups in the community.
- 2 Ask students to clear a space in the centre of the room then form a line across the middle, facing the teacher, in no particular order. The line should stretch across the width, not length, of the room, as students will need space to move backwards and forwards. It doesn't matter if they are a bit squashed at the start as they will soon spread out.
- 3 Explain that you will ask a series of yes/no questions (from the 'Stepping out' question sheet). Students will have to decide if they should answer 'yes' or 'no' with reference to their assigned sexual identity. The students will not have all the relevant information for each scenario so will have to make a response based on their assumptions.
- 4 Before you begin asking the questions, get the students to shut their eyes for a minute to imagine themselves into the position of the person with the sexual identity they have been assigned. Then tell them to open their eyes and answer aloud as you read the questions out one at a time. Those who answer 'yes' are to take a step forward. Those who answer 'no', take a step back. Emphasise that the questions must be answered according to what they think *really* happens, not what they feel *should* happen. Observe the response time – i.e. quick to answer or hesitant – as it says a bit about how easy or comfortable a particular question is.

- 5 When all the questions have been answered, begin the debriefing process by asking those students closest to the front of the room to reveal their sexual identities. Then do the same with the students furthest to the back. Compare the identities of the other students who are somewhere in between.
- 6 Ask students how they felt about their character as they saw others move ahead or behind them. Did everyone who represented a straight person end up in the same place? Why? Did everyone who represented a gay person end up in the same place? Why?

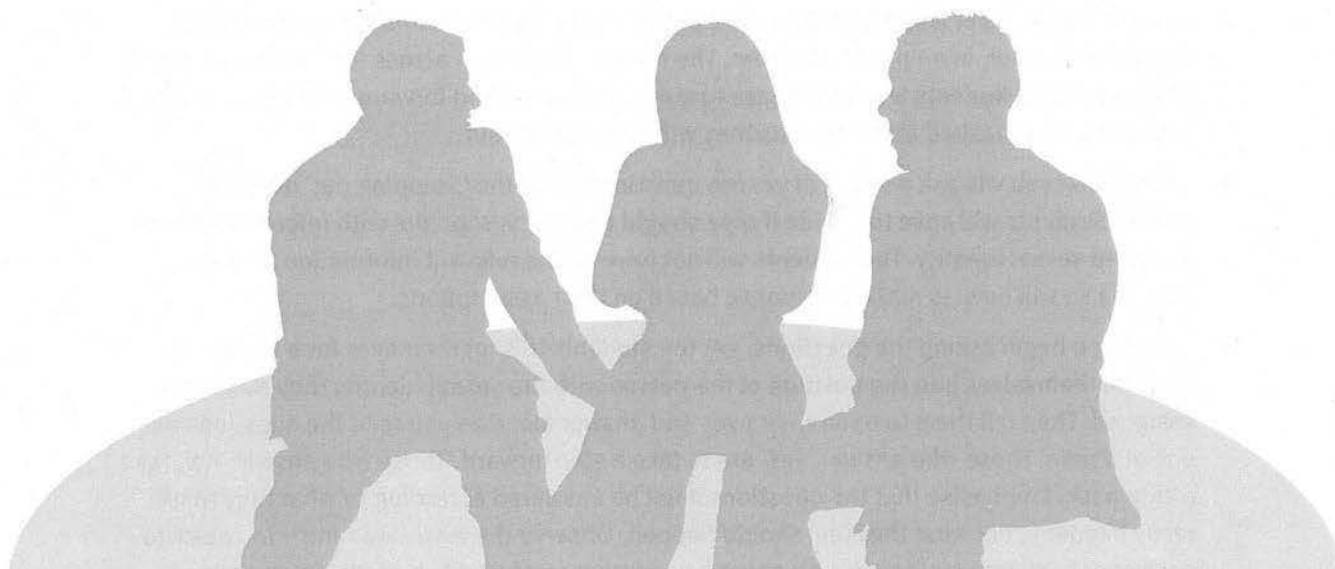
Teacher advice

It is important to manage the time for this exercise so that every question is asked and all students can respond. It is essential to leave enough time to discuss the activity with the class at the end.

? Discussion questions

- o What did you feel about your character and their situation?
- o What did you learn from your participation in this activity?
- o How safe and supportive is your school for a disclosure about sexual identity?
- o How can you work with others to bring about changes at your school?

(Adapted from Ollis and Mitchell, 2001, pp. 138–143, which was adapted from *HIV/AIDS Education in Health and Physical Education, Early Childhood to Year 10: A Training and Development Package*, Department for Education and Children's Services, now DEET, South Australia, 1997.)



Question sheet: Stepping out

- Can you talk to a parent about your sexuality?
- Could you invite your partner home?
- Is your family likely to support and recognise your relationship?
- Would your partner be included in family gatherings like weddings, birthdays, New Year's Eve parties?
- Would your family feel OK if they started introducing your partner to their friends as your boyfriend/girlfriend?
- Can you go to school without harassment?
- Would you take your partner to the school dance?
- Could you tell people in your sports club about your sexuality?
- Could you tell your friends what you did on the weekend and with whom?
- Would you chat about your love life with a close friend on the bus?
- When you go out in a crowd of friends do you feel you can give your partner a kiss and a hug?
- Could you easily find other couples like yours if you wanted to go out as a group?
- Can you be fairly confident you won't get put down or physically hurt by others because of your relationship?
- Could you talk to the leader of your church youth group, sporting club etc. if you were having problems with your relationship?
- Do love scenes on TV and the movies commonly show relationships like yours?
- Could you tell your boss about your sexual preference without putting your job at risk?
- Are you able to be open with your doctor when he/ she talks to you about contraception?
- Can you get married when you want to?



LEARNING SEQUENCE

4

Safer sex issues

- 1 Safer sex quiz
- 2 What do you need to know more about?
- 3 What are the things to consider when being sexually active?
- 4 How much do you know about STIs?
- 5 Who can I trust?
- 6 Dear Doctor, information please!
- 7 Contraception – how to prevent an unintended pregnancy
- 8 Fertility and forming a family
- 9 How safe is that?
- 10 Things are not always what they seem
- 11 Thinking about sexual safety
- 12 Did I really press ‘send’?
- 13 Nightclub dilemmas
- 14 Writing the rights – positive approaches to sexuality

AusVELS LEVELS 9 & 10**HEALTH AND PHYSICAL EDUCATION – *health knowledge and promotion***

- › factors influencing the development of identity
- › variations in relationships over time
- › roles and responsibilities in sexual relationships
- › sexuality and sexual health, e.g. safer sex practices, sexual negotiation, same-sex attraction and the impact of alcohol on sexual and personal safety
- › assumptions, community attitudes and stereotypes about young people and sexuality
- › policies/practices related to sexual harassment, homophobia and discrimination
- › Medicare.

INTERPERSONAL DEVELOPMENT – *building social relationships*

- › complex social conventions when interacting with others
- › local and global values and beliefs, and the impact on their own and others' social relationships
- › barriers to achieving positive relationships
- › strategies that could be used to overcome barriers to effective relationships
- › strategies for managing peer influence on relationships
- › skills and strategies to prevent and resolve conflict.

1 Safer sex quiz



LEARNING INTENTION

- To provide an opportunity for students to demonstrate their current level of understanding of safer sex.

Preparation and materials

- ✓ copies of 'Safer sex quiz A: Sexual activities', one per student
- ✓ copies of 'Safer sex quiz B: What do you know?', one per student
- ✓ copy of 'Answers: quiz A', for teacher use
- ✓ copy of 'Answers: quiz B', for teacher use

Introduction

This activity is designed to help students determine their own level of knowledge regarding safer sex. By participating in the quiz, students will be able to determine what they would like to know more about. It's not particularly important, therefore, how students perform on the quiz. It's more important that they begin to identify which issues regarding safer sex they would like more information about, or more opportunities to discuss.

Instructions

1. Ask students to explain what they think is meant by 'safe sex'. Ask students to explain the difference between 'safe sex' and 'safer sex'.
2. Once you have allowed time for this discussion, read out the following definition from Better Health Channel, 2011:

'Safe sex' is having sexual contact while minimising the risk that you will get a sexually transmissible infection (STI). Sexual contact that doesn't involve the exchange of semen, vaginal fluids or blood between partners is considered to be safe sex. Unsafe sex may pass on STIs such as chlamydia, HIV or gonorrhoea, or result in an unintended pregnancy. Safe sex is also called 'safer sex' to highlight the fact it is not a 100 per cent guarantee but it significantly reduces the risk of STIs.

3. Hand out copies of parts A and B of the 'Safer sex quiz' to each student. Allow around 10 minutes for them to complete it.
4. Once the students have completed the quiz, go through all the questions with the class, providing correct answers and explanations where required. Teacher notes are included after the quiz to assist with this discussion.

LEARNING SEQUENCE 4

Safer sex quiz A • Sexual activities

SAFER SEX QUIZ A Sexual activities

Tick the box you think best describes the level of risk for each of the sexual activities listed.

Sexual activities	Safer	Low-risk	High-risk or unsafe
kissing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
open-mouthed kissing (also called deep kissing)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
massage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
having sex without a condom (male or female)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cuddling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ejaculating on unbroken skin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
sexual intercourse using a barrier contraception such as a condom (male or female)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
re-using a condom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
doing anything that involves blood-blood contact	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
masturbation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
using a condom that is past its use-by date	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
withdrawing the penis before ejaculation instead of using a condom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
mutual masturbation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
having sex without a condom (male or female)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(Adapted from the 'Survey Questions', Smith et al., 2009, Section G1, p. 83.)



LEARNING SEQUENCE 4

Safer sex quiz A • Answers

QUIZ A Answers

Tick the box you think best describes the level of risk for each of the sexual activities listed.

Sexual activities	Safer	Low-risk	High-risk or unsafe
kissing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
open-mouthed kissing (also called deep kissing)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
massage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
having sex without a condom (male or female)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
cuddling	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ejaculating on unbroken skin	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
sexual intercourse using a barrier contraception such as a condom (male or female)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
re-using a condom	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
doing anything that involves blood-blood contact	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
masturbation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
using a condom that is past its use-by date	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
withdrawing the penis before ejaculation instead of using a condom	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
mutual masturbation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
having sex without a condom (male or female)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

(Adapted from the 'Survey Questions', Smith et al., 2009, Section G1, p. 83.)

LEARNING SEQUENCE 4

Safer sex quiz B • What do you know?

SAFER SEX QUIZ B What do you know?

Tick the appropriate boxes to indicate if the following statements are True or False.

	TRUE	FALSE
You can't always tell when someone has an STI.	<input type="checkbox"/>	<input type="checkbox"/>
Practising safer sex means that one person in the relationship has an STI.	<input type="checkbox"/>	<input type="checkbox"/>
You have to be 18 years of age to buy condoms.	<input type="checkbox"/>	<input type="checkbox"/>
Being drunk does not increase the risk of unsafe sex.	<input type="checkbox"/>	<input type="checkbox"/>
Lesbians do not get STIs.	<input type="checkbox"/>	<input type="checkbox"/>
Condoms come in a variety of sizes.	<input type="checkbox"/>	<input type="checkbox"/>
Apart from HIV, all STIs can be cured.	<input type="checkbox"/>	<input type="checkbox"/>
Chlamydia is a STI that affects only women.	<input type="checkbox"/>	<input type="checkbox"/>
Chlamydia can lead to sterility in women.	<input type="checkbox"/>	<input type="checkbox"/>
Once a person has caught genital herpes, they will always have the virus.	<input type="checkbox"/>	<input type="checkbox"/>
People who always use condoms are safe from all STIs.	<input type="checkbox"/>	<input type="checkbox"/>
Gonorrhoea can be transmitted during oral sex.	<input type="checkbox"/>	<input type="checkbox"/>
Human Papilloma Virus (HPV) can affect both men and women.	<input type="checkbox"/>	<input type="checkbox"/>
HPV infections can increase the risk of cervical cancer.	<input type="checkbox"/>	<input type="checkbox"/>

(Adapted from the 'Survey Questions', Smith et al., 2009, Section G1, p. 83.)



QUIZ B Answers

Tick the appropriate boxes to indicate if the following statements are True or False.

	TRUE	FALSE
You can't always tell when someone has an STI.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Practising safer sex means that one person in the relationship has an STI.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
You have to be 18 years of age to buy condoms.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Being drunk does not increase the risk of unsafe sex.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lesbians do not get STIs.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Condoms come in a variety of sizes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Apart from HIV, all STIs can be cured.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Chlamydia is a STI that affects only women.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Chlamydia can lead to sterility in women.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Once a person has caught genital herpes, they will always have the virus.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
People who always use condoms are safe from all STIs.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Gonorrhoea can be transmitted during oral sex.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Human Papilloma Virus (HPV) can affect both men and women.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
HPV infections can increase the risk of cervical cancer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>

(Adapted from the 'Survey Questions', Smith et al., 2009, Section G1, p. 83.)

Teacher notes

Rating the safety of sexual activities

Safer sex activities

Sexual contact that carries a low risk of STI transmission includes:

- kissing
- cuddling
- massage
- masturbation
- mutual masturbation
- ejaculating on unbroken skin.

Low-risk sexual activities

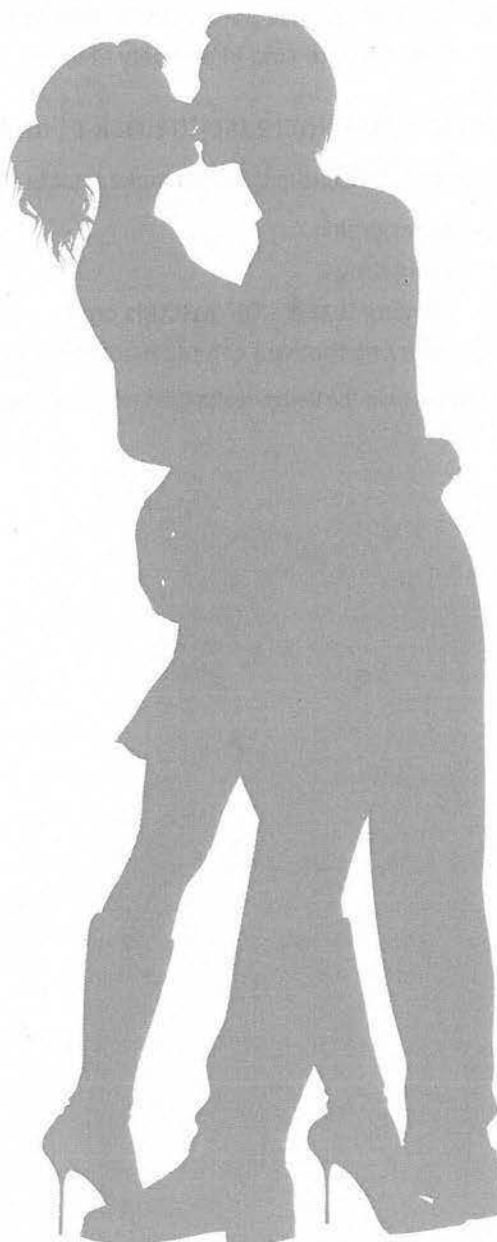
Activities that probably won't involve the exchange of bodily fluids include:

- open-mouthed kissing – also called deep or French kissing. This type of kissing is fine if neither of you has a mouth sore and no blood is present.
- sexual intercourse using barrier contraception such as a male or female condom. Remember that a diaphragm (a cap worn high in the vagina to cover the cervix) offers good protection against pregnancy but low protection against STIs.

High-risk or unsafe sexual activities

Unsafe sex outside of a monogamous relationship is risky. Examples of unsafe sexual activities include:

- having sex without a male or female condom
- withdrawing the penis before ejaculation instead of using condoms (pre-ejaculatory fluid may be infectious and can also contain sperm)
- trying to re-use a condom or using a condom that is past its use-by date
- using a condom incorrectly or continuing to have sex once the condom is broken
- doing anything that involves blood-to-blood contact
- getting bodily fluids like menstrual blood, semen or vaginal fluids inside another person's body (e.g. mouth, vagina or anus).



Facts about STIs

- There are a number of STIs that cannot be cured.
- Chlamydia is a STI that affects women and men.
- Chlamydia can lead to sterility in women.
- Once a person has caught genital herpes, they will always have the virus.
- People who always use condoms are not safe from all STIs.
- Gonorrhoea can be transmitted during oral sex.
- HPV affects both men and women.
- There are many different kinds of HPV infections. Some increase the risk of getting cervical cancer though most women who have HPV will never develop cervical cancer. (4th National Survey of Secondary Students and Sexual Health, 2008)
- Condoms can be purchased in supermarkets, petrol stations, public toilets etc.
- Condoms are sold in a variety of sizes, colours etc.

Factors that increase the risk of unsafe sex

Some of the factors that can make unsafe sex more likely include:

- being drunk
- using drugs
- thinking that it's OK 'just this once'
- believing that you can tell if someone has an STI.

(Adapted from The Better Health Channel: <<http://www.betterhealth.vic.gov.au/>>.)

2 What do you need to know more about?



LEARNING INTENTIONS

- To provide students with the opportunity to prioritise what they think are important topics to discuss.
- To establish meaningful learning goals through the inclusion of young people in the development of said goals.
- To use activities to explore the suggested topics of interest.

Preparation and materials

- ✓ statement cards 'I would like to know more about...', one set per pair

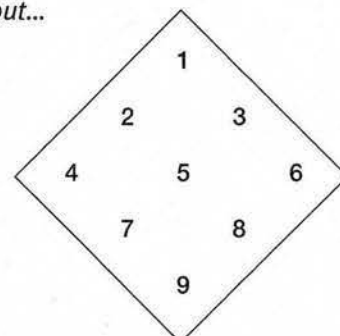
Introduction

In the previous activity we established students' knowledge of safer sex and dispelled some myths through the Safer sex quiz. It is now a good idea to explore what else students would like to know about. This activity is useful to determine what students have been taught in previous years and is similar to 'Think back' in AusVELS Level 7, Learning sequence 2.

Explain to the group that many of the activities in this unit are related to STIs because the research from the 4th National Survey of Australian Secondary Students conducted in 2008 showed that students exhibited the poorest knowledge in relation to chlamydia and the transmission of gonorrhoea and genital warts. However, there may be other areas of sexuality they wish to know more about. This activity is designed to determine what these areas might be and the importance the students place on them.

Instructions

- 1 Begin with a discussion about the students' sexuality classes from previous years. Possible discussion questions might be:
 - Did you have sexuality education last year?
 - Did you learn about STIs?
 - What else did you learn?
 - Is there anything you wanted to learn about but didn't?
 - Why do you think you weren't taught some things?
- 2 Write the following statement on the board:
In our sexuality education class, we would like to learn more about...
- 3 Ask the students to work in pairs and give each pair a set of the nine statement cards.
- 4 Ask them to prioritise these into a specific order using a diamond shape, with their number one priority at the top; two and three on the next row; four, five and six on the row below that; seven and eight under this; and number nine on its own at the bottom as the statement with the least importance.



- 5 When the students have finished this activity, ask each pair to join up with another pair. They should work together as a group to agree on an order of priorities they all feel happy with.
- 6 Ask each group to feed back their top three priorities. Write these on the board. Discuss why the groups thought these were the most important topics to learn about. As part of the class, the teacher should also have some input into this discussion.
- 7 Remind students that if one of their priorities did not make the 'top three' list in their group, they should use the Question Box for any specific questions they may have.

Teacher advice

The following activities may cover some of the topics students have prioritised. You can cover more with additional activities or discussions but you may not be able to cover all of them. Several activities on STIs have been included here based on the findings from the 4th National Survey of Australian Secondary Students (Smith et al. 2009).

Discussion questions

- How important is it for your interests and needs to be recognised in these classes? Why?
- What opportunities do young people have to participate in activities and discussions about sexuality?
- What are the advantages of doing this?

LEARNING SEQUENCE 4

Statement cards • I would like to know more about...



I WOULD LIKE TO KNOW MORE ABOUT...

Chlamydia

Why is it so common?
How do I prevent infection and
what do I do if I have an infection?

I WOULD LIKE TO KNOW MORE ABOUT...

Genital herpes

Why is it so common?
How do I prevent infection and
what do I do if I have an infection?

I WOULD LIKE TO KNOW MORE ABOUT...

Genital warts (HPV)

I would like more information
about genital warts.
What's the vaccination all about?

I WOULD LIKE TO KNOW MORE ABOUT...

**The implications of
teen pregnancy**

What are the rules about the mother
attending school? What if I decide
not to tell the father? Will the father get
into trouble if he's still at school?

I WOULD LIKE TO KNOW MORE ABOUT...

Romance

What is love? What does love feel like?
Why or why not have romantic relationships
at this age? What are the different kinds of
romantic relationships?

I WOULD LIKE TO KNOW MORE ABOUT...

**How to manage a sexual
relationship**

How do I begin the conversation with
my partner? What things do we need to
consider? What bits should be negotiated
and what should be assumed?

I WOULD LIKE TO KNOW MORE ABOUT...

Sex

When is 'it' considered sex?
Is there a difference between sex
and sexual intercourse?
How do I make up my mind?
What's the right age?

I WOULD LIKE TO KNOW MORE ABOUT...

HIV/AIDS

How does it spread?
Who's at risk?

I WOULD LIKE TO KNOW MORE ABOUT...

Contraception

What's most effective?
How/where do you get contraceptives?

I WOULD LIKE TO KNOW MORE ABOUT...

Write your own and exchange it
for one that's of no interest to you.

3 What are the things to consider when being sexually active?



LEARNING INTENTION

- To identify some of the issues associated with being sexually active.

Preparation and materials

- ✓ play money, enough for \$700 per student (\$100 bills from *Monopoly* are useful; if no *Monopoly* money is available, a quick search on Google using the search term 'play money Australian' will provide many options)
- ✓ a pack of envelopes

Introduction

This activity is designed to get students thinking about some of the issues associated with being sexually active, and to determine what they consider the key issues might be.

Instructions

- 1 Ask students to reflect for a couple of minutes on the possible issues or risks associated with becoming sexually active at age 16. Follow this with a brainstorming session and write the risks up on the board. The following list may be useful if the students are having trouble getting started:
 - getting pregnant
 - feeling used
 - getting a STI
 - breaking up
 - sexual pleasure-giving and receiving
 - parents disapproving
 - getting a reputation
 - friends disapproving.

If STIs have not been listed, you as the teacher should include it in the brainstorm.
- 2 Inform students they have \$700 to spend on reducing these risks for young people. Explain that there are certain rules as to how they can spend their money. For example, they cannot spend any less than \$200 on reducing any one risk. They could spend the money on three issues – \$200, \$200 and \$300 – or they could spend \$300 and \$400 on two risks. Or, if they felt very strongly about one risk, they could spend all \$700 on that risk. Give students a few minutes to decide how they will spend their money.
- 3 While students are deciding how to spend their money on risk reduction, the teacher will need to write the identified risks onto the envelopes. (Make sure you have enough to cover all of the risks.) Now place them around the room, allowing enough space for students to move about freely without other students closely observing them.

- 4 Now ask students to wander around the room and place their money in the appropriate envelopes.
- 5 When students have finished distributing their money, ask for volunteers to count the total for each risk and report back to the class. Using this information, determine the students' priorities.
- 6 Discuss how important it was to reduce the risk of contracting STIs as determined by the amount of money placed in the appropriate envelope. How can you minimise this risk? (The websites listed in the following activity could be visited at this time if the teacher thinks it would be useful.)
- 7 Now ask them to form groups of three or four and instruct each group to jot down three ways they could minimise a risk for the top four risks prioritised.
- 8 Collect the groups' responses then read them out and discuss how realistic they are.

Wrap up

Students can respond to the following questions as a journal entry or piece of reflective writing:

- What did the class see as the most important risks to reduce?
- Do you think there are any gender differences in the risks that students considered important to reduce?
- Did your own view of the risks match those of the class? Explain.
- Reflect on the risk that you considered most important to reduce. What strategies would you use to reduce this risk?

4 How much do you know about STIs?



LEARNING INTENTION

- To check students' understanding of the symptoms of STIs, and the importance of maintaining good sexual health.

Preparation and materials

- ✓ write up this list of common STIs on the board:

- chlamydia
- gonorrhoea
- genital herpes
- hepatitis A
- hepatitis B
- HIV
- human papilloma virus (genital warts)
- pubic lice
- scabies
- syphilis
- trichomoniasis.

(This is not a definitive list of STIs. It is for discussion purposes for this activity only.)

- ✓ equipment for showing PowerPoint 'Symptoms of STIs'
- ✓ copy of list 'Possible symptoms of STIs', for teacher use
- ✓ use your own resources or one of the following sites to ensure you have the most recent information regarding STIs:

STI Health Australian Government

<<http://www.sti.health.gov.au/internet/sti/publishing.nsf/content/home-1>>

Better Health Channel

<http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/ct_sexuallytransmitted_infections?open>

Family Planning Victoria

<<http://www.fpv.org.au/sexual-health-info/sexually-transmissible-infections-stis-bbvs/what-are-stis-and-bbvs/>>

Melbourne Sexual Health Centre

<<http://www.mshc.org.au/Default.aspx?alias=www.mshc.org.au/general>>

(Most of these sites provide fact sheets.)

- ✓ equipment for viewing internet video *Face Your Fears* – <<http://vimeo.com/32214917>>

Note: the 'Symptoms of STIs' PowerPoint presentation is available online at: <<http://www.education.vic.gov.au/school/teachers/teachingresources/social/physed/Pages/resources.aspx>>.

Introduction

This activity is designed to check students' understanding of the possible risks associated with being sexually active, and to emphasise the importance of sexual health checks and safe behaviours for those who are sexually active.

This activity is suitable for interactive whiteboards with voting capacity.

Instructions

- 1 Go through the list of common STIs on the board.
- 2 Use the PowerPoint 'Symptoms of STIs' or read out the first symptom (but *not* the STIs) from the list 'Possible symptoms of STIs'. Ask students which STI this may be a symptom of. Once you have heard from a number of students, read out the STIs that may have this symptom or bring up the answer slide on the PowerPoint. (It is important to remind students that there are other STIs not mentioned here which may also have these symptoms, and that there are more symptoms than the ones mentioned in this activity.)
- 3 Continue with this line of inquiry, moving through the list or PowerPoint until you reach the last one – 'May have no symptoms'.
- 4 Discuss the following:
 - What has this exercise taught us? (Some STIs have symptoms common to other STIs. In many cases there are no symptoms, or the symptoms are so slight they go unnoticed.)
 - What are the implications of this for the sexual health of young people?
 - What behaviours place people at risk of contracting STIs?
 - What behaviours reduce the risk of contracting STIs? (Be sure to include abstinence here.)
- 5 Show the video *Face Your Fears* – <<http://vimeo.com/32214917>>.
- 6 Using an overhead projector or interactive white board, visit one or more of the reputable Australian websites listed above on page 274. These are good resources for students to use if they have concerns.



Wrap up

If you have sex, you may also have an STI, along with subtle or noticeable STI symptoms. Straight or gay, married or single, you're vulnerable to STIs and STI symptoms, whether you engage in oral, anal or vaginal sex. Although condoms are highly effective for reducing transmission of STIs, no method is foolproof. This is particularly true with certain STIs, such as genital warts and genital herpes.

STI symptoms aren't always obvious. If you think you're experiencing STI symptoms, see a doctor. Some STI symptoms can be treated easily and eliminated, while others require more involved and long-term treatment. Either way, it's essential to be evaluated, and — if diagnosed with a STI — get treated. It's also essential to inform any partners so that they can be evaluated and treated. If left untreated, STIs can increase your risk of acquiring another STI, such as HIV. This happens because a STI can stimulate an immune response in the genital area, or cause sores, either of which might make HIV transmission more likely. Some untreated STIs can also lead to infertility.

You could have a STI and be asymptomatic — without any signs or symptoms. In fact, this happens with a lot of STIs. Even though you have no symptoms, you're still at risk of passing the infection along to your sex partners. That's why it's important to visit your doctor on a regular basis for STI screening, so you can identify a potential infection and get treated for it before passing it along to someone else. As well as being able to pass on symptomless STIs, you can also sustain long-term damage yourself — such as infertility.

If you are sexually active, or thinking about becoming sexually active, it's a good idea to have regular check-ups in order to take responsibility for your own sexual health.

(Modified from Mayo Clinic — <http://www.mayoclinic.com/health/std-symptoms/ID00053>)

When and where to get help

http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Sexually_transmitted_diseases_symptoms_you_should_discuss_with_your_doctor?open

A NOTE ON MEDICARE

Under Australian law, people become eligible for a Medicare card at 15 years of age.

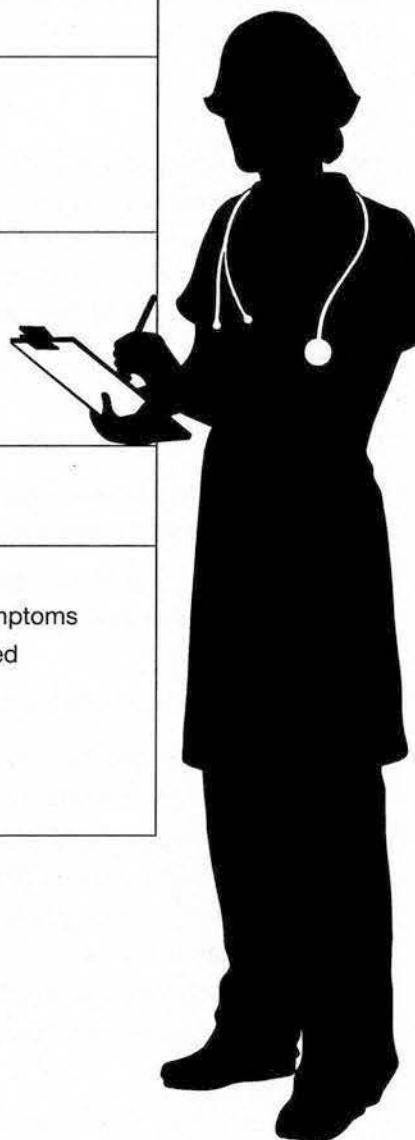
Further information is available at: <http://www.medicareaustralia.gov.au/public/update/index.jsp>.

LEARNING SEQUENCE 4

List • Possible symptoms of STIs

Possible symptoms of STIs

Symptom	Sexually transmissible infections
painful urination	chlamydia genital herpes gonorrhoea trichomoniasis
dark urine	hepatitis A hepatitis B
discharge from the penis or vagina	chlamydia gonorrhoea trichomoniasis
pain during sexual intercourse, either in men or women	chlamydia gonorrhoea trichomoniasis
fatigue	hepatitis A hepatitis B HIV syphilis (secondary stage)
itching	genital herpes human papilloma virus (genital warts) pubic lice scabies trichomoniasis
rash	HIV syphilis (secondary stage)
may have no symptoms	chlamydia gonorrhoea – up to a month before symptoms genital herpes so mild they go unnoticed hepatitis A hepatitis B HIV – when first infected human papilloma virus (genital warts)



5 Who can I trust?



LEARNING INTENTIONS

- To find out where young people get their information about sexuality.
- To explore how much they trust these sources of information.
- To critically examine the sources of information young people use.

Preparation and materials

- copies of the worksheet 'Where do I get my information?', one per student
- equipment for showing the short PowerPoint 'Information sources used and trusted by adolescents' or worksheet 'Information sources used and trusted by adolescents', for teacher use

Note: the PowerPoint presentation 'Information sources used and trusted by adolescents' is available online at: <http://www.education.vic.gov.au/school/teachers/teachingresources/social/physed/Pages/resources.aspx>.

Introduction

Two challenges for young people are working out who they can trust and where they can get accurate information about sexuality. Popular culture transmitted through the media often presents a distorted and inaccurate picture to young people. Research by Smith et al. (2009) found that adolescents do not necessarily use the sources of information they trust. This activity is designed to help students identify the information sources they do use and why.

This activity could be used as a homework task.

Instructions

- 1 Hand out the worksheet 'Where do I get my information?' to each student and allow about five minutes for them to complete it.
- 2 Present students with the information on the worksheet 'Information sources used and trusted by adolescents' or use the PowerPoint.



Discussion questions

- Is your picture similar to what the research tells us about young people?
- Why do you think mothers are often used as a source of information?
- Look at your own worksheet – does the source used change according to the type of information being sought? Why?
- In the research, why do you think young people trust doctors but don't use them for advice and information?
- Which of the sources do you think can be relied on to provide accurate information?
- Can you think of any ways the sources young people trust but do not use could be made more accessible?

- In the research, why do you think the internet was the source least trusted?
- How can young people ensure that they access reliable internet sites for information?
- Are there other sources of information that young people use that have not been mentioned?

Wrap up

If you had a difficult decision to make, where would you turn for advice and help? Think of three or more sources (allow a minute or so). Ask yourself: Will the help I get be reliable, trustworthy and useful? There are many sources of help for young people and choosing one can be confusing, but seeking help is a good beginning.

Teacher advice

If students have not previously done work around reliable websites, it might be useful to complete AusVELS Level 8, Learning sequence 6, activity 1 'Surfing – is it the best source of information?'

EXTENSION ACTIVITY >>

- Using any of the five questions from the worksheet 'Where do I get my information?', ask students to find three places in their local community where they could go for help or information. It's possible to share this information with the class by compiling a small student directory using the different local services (teachers would need to check that the information provided by the students is correct.)
- Invite your local health services (including youth-friendly doctors) to provide a speaker who can address the questions from the worksheet and also talk about the health services they provide for young people.

Where do I get my information?

For each of the questions complete the following three instructions:

- 1 Put a tick next to the sources you have used or which have provided you with most of your information and ideas about sex, sexuality and relationships.
- 2 Circle the sources that you trust.
- 3 Explain why on the lines provided.

1 If you wanted some information about STIs, which of the following sources would you use? Why?

Mum	<input type="checkbox"/>	Pamphlets/posters	<input type="checkbox"/>	Internet	<input type="checkbox"/>
Dad	<input type="checkbox"/>	Health Ed at school	<input type="checkbox"/>	Teachers	<input type="checkbox"/>
Sister	<input type="checkbox"/>	Television	<input type="checkbox"/>	Doctor	<input type="checkbox"/>
Brother	<input type="checkbox"/>	Female friends	<input type="checkbox"/>	Boyfriend/girlfriend	<input type="checkbox"/>
Books/magazines	<input type="checkbox"/>	Male friends	<input type="checkbox"/>	School nurses	<input type="checkbox"/>

2 If you thought you had a STI, which of the following sources would you go to for advice? Why?

Mum	<input type="checkbox"/>	Pamphlets/posters	<input type="checkbox"/>	Internet	<input type="checkbox"/>
Dad	<input type="checkbox"/>	Health Ed at school	<input type="checkbox"/>	Teachers	<input type="checkbox"/>
Sister	<input type="checkbox"/>	Television	<input type="checkbox"/>	Doctor	<input type="checkbox"/>
Brother	<input type="checkbox"/>	Female friends	<input type="checkbox"/>	Boyfriend/girlfriend	<input type="checkbox"/>
Books/magazines	<input type="checkbox"/>	Male friends	<input type="checkbox"/>	School nurses	<input type="checkbox"/>

LEARNING SEQUENCE 4 Worksheet • Where do I get my information?

3 If you wanted to talk about relationship issues such as love, attraction, starting or ending a relationship and so on, which would you use? Why?

Mum	<input type="checkbox"/>	Pamphlets/posters	<input type="checkbox"/>	Internet	<input type="checkbox"/>
Dad	<input type="checkbox"/>	Health Ed at school	<input type="checkbox"/>	Teachers	<input type="checkbox"/>
Sister	<input type="checkbox"/>	Television	<input type="checkbox"/>	Doctor	<input type="checkbox"/>
Brother	<input type="checkbox"/>	Female friends	<input type="checkbox"/>	Boyfriend/girlfriend	<input type="checkbox"/>
Books/magazines	<input type="checkbox"/>	Male friends	<input type="checkbox"/>	School nurses	<input type="checkbox"/>

4 If you wanted factual information about sex, such as pregnancy, sexual practices, wet dreams, and so on, which would you use? Why?

Mum	<input type="checkbox"/>	Pamphlets/posters	<input type="checkbox"/>	Internet	<input type="checkbox"/>
Dad	<input type="checkbox"/>	Health Ed at school	<input type="checkbox"/>	Teachers	<input type="checkbox"/>
Sister	<input type="checkbox"/>	Television	<input type="checkbox"/>	Doctor	<input type="checkbox"/>
Brother	<input type="checkbox"/>	Female friends	<input type="checkbox"/>	Boyfriend/girlfriend	<input type="checkbox"/>
Books/magazines	<input type="checkbox"/>	Male friends	<input type="checkbox"/>	School nurses	<input type="checkbox"/>

5 If you and your partner were having an unintended pregnancy, where would you get help? (DO NOT USE TICKS; JUST CIRCLE THE ONES YOU WOULD TRUST.) Why?

Mum	Pamphlets/posters	Internet
Dad	Health Ed at school	Teachers
Sister	Television	Doctor
Brother	Female friends	Boyfriend/girlfriend
Books/magazines	Male friends	School nurses

Information sources used and trusted by adolescents

Information source	% used	% trusted
doctor	28.4	69.5
school program	44.6	52.3
school nurse	13.7	40.9
teacher	30.0	41.2
pamphlets	40.7	41.7
internet websites	34.3	27.7
mother	47.8	67.2
father	26.8	51.4
female friend	48.5	57.9
male friend	31.4	40.1
older brother	12.8	28.2
older sister	17.6	34.5

(4th National Survey of Australian Secondary Students, 2008.)

There were some gender and year level patterns to student-use of information sources for sexual health.

Compared to young male students, young women were more likely to consult their doctor (44 per cent compared to 30 per cent), their mother (62 per cent compared to 44 per cent) and female friends (63 per cent compared to 38 per cent) for sexual health information. In contrast, young men typically were more likely than young women to confide in either their father (40 per cent versus 27 per cent) or a male friend (42 per cent versus 31 per cent) for

advice regarding sexual health. Generally, it was more common for young women (91 per cent) to seek advice regarding sexual health than it was for young men (82 per cent).

Year 12 students were generally more likely to seek advice for matters relating to sexual health than those in Year 10. Compared to their Year 10 counterparts, students in Year 12 were more likely to consult a doctor (52 per cent versus 28 per cent), their mother (66 per cent versus 48 per cent) or confide in a female friend (62 per cent versus 49 per cent) for information on sexual health.

(Smith et al., 2009, pp. 58–59)

6 Dear Doctor, information please!



LEARNING INTENTION

- To assist students to connect and use their new and existing knowledge of STIs.

Preparation and materials

- ✓ copies of the letters 'Dear Doctor', one letter per group
- ✓ internet access or fact sheets for the STIs mentioned in each letter
- ✓ equipment for viewing internet video *The Importance of Condoms* <<http://vimeo.com/32160162>>

Introduction

Given the increase in the rate of chlamydia in young people in Australia, it is important that we give priority attention to this STI. We have also included a number of other STIs in this activity as they continue to receive media attention and students may wish to find out more about them. The previous activity – 'Who can I trust?' – is a good introduction to this one.

This activity could be used as an assessment task.

Instructions

- 1 To get started, show the video *The Importance of Condoms* <<http://vimeo.com/32160162>>.
- 2 Divide the class into groups of four and provide each group with one of the 'Dear Doctor' letters. It's OK if some groups have the same letter. At least one group should have the chlamydia letter.
- 3 Each group now has to adopt the role of doctor and respond to the letter from their client requesting further information. Remind students that they need to consider the gender of the person who has the infection.
- 4 Before groups begin their research, go through the following common questions as a class so that the 'doctors' can convey the best possible information to their clients:
 - Is there a test for it?
 - Is it treatable and what does the treatment involve?
 - If I decide not to go ahead with treatment, what will happen?
 - How did I get it?
 - Do I need to tell anyone I have it?
 - Will I still be able to have sex?
- 5 To find the information they need, students can refer to the websites (and the website's fact sheets) explored in activity 4 of this learning sequence, 'How much do you know about STIs?' Or provide fact sheets you have prepared yourself.
- 6 When the replies are finished, ask one student from each group to read out their letter to the rest of the class.

- 7 If you think any details could be incorrect, take the time to check them out to ensure no misinformation goes home with the students.

Discussion questions

- How would you feel receiving any one of these letters from your doctor? Is the response judgemental? Has it answered your questions?
- Who should be told if a person has a STI?
- How should a person be told they have an infection?
- What would your advice be to a friend who confided in you that they had a STI?

Wrap up

If you are considering being sexually active, or are sexually active already, you should have regular check-ups for STIs. You will need to consider where you go for help. Where are the local health services in your area?

More information can be found on the Better Health Channel website

http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Sexually_transmissible_infections_avoid_the_risk?open.

LEARNING SEQUENCE 4

Letters • Dear Doctor



Dear Doctor

After you confirmed that I have contracted **chlamydia** there were a number of questions I forgot to ask you.

Could you please provide me with the following information:

- Is there a test for it?
- Is it treatable and what does the treatment involve?
- If I decide not to go ahead with treatment, what will happen?
- How did I get it?
- Do I need to tell anyone I have it?
- Will I still be able to have sex?

Yours sincerely

Karen

Dear Doctor

After you confirmed that I have contracted **genital herpes** there were a number of questions I forgot to ask you.

Could you please provide me with the following information:

- Is there a test for it?
- Is it treatable and what does the treatment involve?
- If I decide not to go ahead with treatment, what will happen?
- How did I get it?
- Do I need to tell anyone I have it?
- Will I still be able to have sex?

Yours sincerely

Sam

Dear Doctor

After you confirmed that I have contracted **genital warts** there were a number of questions I forgot to ask you.

Could you please provide me with the following information:

- Is there a test for it?
- Is it treatable and what does the treatment involve?
- If I decide not to go ahead with treatment, what will happen?
- How did I get it?
- Do I need to tell anyone I have it?
- Will I still be able to have sex?

Yours sincerely

Kate

Dear Doctor

After you confirmed that I have contracted **HIV** there were a number of questions I forgot to ask you.

Could you please provide me with the following information:

- Is there a test for it?
- Is it treatable and what does the treatment involve?
- If I decide not to go ahead with treatment, what will happen?
- How did I get it?
- Do I need to tell anyone I have it?
- Will I still be able to have sex?

Yours sincerely

Tri

7 Contraception – how to prevent an unintended pregnancy



LEARNING INTENTION

- To explore the most common methods of contraception that young people are likely to use, including withdrawal, the morning-after pill, implants, 'the pill', and condoms.

Introduction

In this activity students will explore various methods of contraception, including abstinence. The activity is organised into two parts. In part A, the students will have the opportunity to connect and organise new and existing knowledge by researching the effectiveness, cost, availability and suitability of various methods of contraception to create an informational poster. In part B of the activity, students will provide 'email advice to a friend', allowing them to test their understanding in this area and justify their decisions. Part B could be used as an assessment task.

If students have not participated in AusVELS Levels 9 and 10, Learning sequence 2, activity 6, 'Communicating intimacy in a relationship', now would be a good time.

PART A INFORMATIONAL POSTERS

Preparation and materials

- one set of the cards 'Contraception'
- prepare a fact sheet for each of the contraceptives, including brief information on how it works; how to obtain it; and approximate cost where possible. A useful website for this is http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/contraception_choices_explained
- A2 paper, several sheets for each group
- coloured markers

Instructions

- 1 Divide the class into six groups.
- 2 Place all the 'Contraception' cards face-down on the floor and invite one student from each group to collect one of the cards for their group.
- 3 The groups should now design a poster for the contraceptive they have picked which will be used by the rest of the class in the second part of the activity. Each group will need several sheets of A2 paper for drafting and making the poster, the relevant fact sheet, and coloured markers.

- 4 Things to consider for inclusion on the poster are:
 - name of contraceptive
 - how it is used
 - who's responsible for using it
 - approximate cost (where possible)
 - effectiveness
 - benefits other than contraception (where applicable)
 - where and how can you get it.
- 5 Groups need to first submit a draft poster to allow the teacher to check the suitability and quality of the information. Once the draft has been checked, students can prepare the final poster. Share the tips below with the students.
- 6 Display the posters around the room for all to see and allow students an opportunity to ask clarifying questions of the groups responsible for making each poster.



TIPS FOR MAKING A POSTER

- Have something that gets the viewer's attention.
- Make it simple; have a single central message.
- Keep the message brief, catchy and able to be read in 10 seconds.
- The lettering should be large enough to see from a few metres away.
- Leave plenty of space between words.
- Do not use all uppercase lettering as it is hard to read.
- Make sure the colours you use are strong enough to be seen from a few metres away and will show up on the chosen background colour.
- If you like a particular colour but it's not very strong, it is sometimes helpful to outline it in black.
- Check that your spelling and information are correct before you begin the final poster.

PART B EMAIL ADVICE TO A FRIEND

Preparation and materials

- copies of the worksheet 'Advice to a friend', one per student
- ensure the posters from part A contain accurate information and are well-displayed
- equipment for viewing internet video *Meet the Contraceptives* – <http://www.chnnyc.org/services/teen/more-than-just-sex-campaign/>

Instructions

- 1 Ask each student to imagine they have just received a private email message in their inbox from a very close friend. This friend has provided them with the following information (students to invent this):
 - name
 - name of their partner
 - age
 - age of their partner
 - something about the family and community they come from
 - something about where the relationship is currently (never had sex through to having regular sex).
- 2 Referring to the informational posters, students should now research their response, including:
 - recommended type of contraceptive and STI protection
 - reasons for their recommendation
 - how to use it
 - where to get it
 - its effectiveness
 - any implications or consequences of using it
 - whether or not the friend will need to see a doctor or health worker
 - who in the relationship should take responsibility for acquiring it and understanding how it works.
- 3 Each student then writes a return email using the worksheet 'Advice to a friend'.

Wrap up

Think about it – what would you do if you were in a relationship where sexual intercourse was likely? Have you had an open conversation with your partner? Where would you get advice if you need it? Think back to some of the previous activities; in particular, activity 5 of this learning sequence, 'Who can I trust?'

If time permits, watch the video *Meet the Contraceptives*
<http://www.chnnyc.org/services/teen/more-than-just-sex-campaign/>.

LEARNING SEQUENCE 4 Cards • Contraception

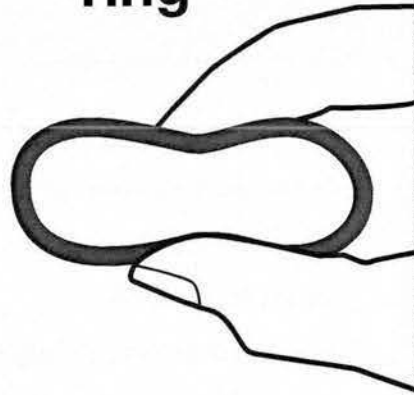
AusVELS Levels 9 & 10 Learning Sequence 4



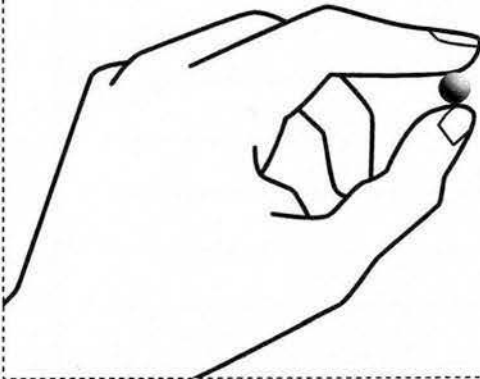
Withdrawal



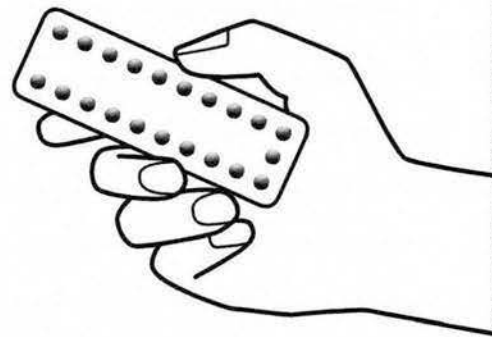
Contraceptive ring



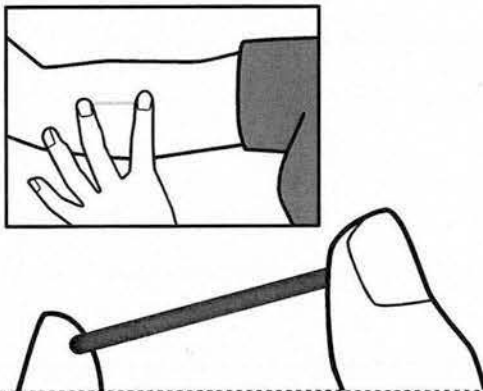
Morning-after pill



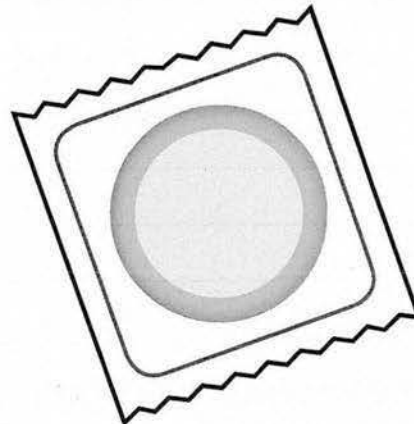
Contraceptive pill



Contraceptive implant




Condom




LEARNING SEQUENCE 4

Worksheet • Advice to a friend

AusVELS Levels 9 & 10 Learning Sequence 4


 From:


 To:

Subject:

Hi _____ (friend's name)

I know you are interested in becoming sexually active.

You said you met _____ (partner's name) and that you've been seeing each other for _____ (length of time).

You want to know what I think about the sort of protection you should use to have safer sex, in other words, you want to avoid STIs and pregnancy.

I think it's your birthday next month and you'll be _____ (age) and your partner just turned _____ (age). In these circumstances, I think the best thing for you to do is to

use _____ (type of protection), for the following reasons:

(address the age, gender and sexuality of your friend)

If you decide to follow my advice, some important thing to know are:

(correct use, side effects, etc.)

Your best friend, _____ (name of student author)

Please let me know how you get on.

8 Fertility and forming a family



LEARNING INTENTIONS

- To support student investigation of the different ways in which families can be formed.
- To provide opportunities for students to demonstrate their understanding of fertility in both men and women.
- To facilitate substantive conversation regarding available methods of forming a family.

Preparation and materials

- ✓ worksheet 'Matters of fertility', for teacher use
- ✓ cards 'Forming a family – scenarios', one per group (it's OK for some groups to have the same scenario)
- ✓ cards 'ART plus adoption', one set per group

Introduction

Fertility refers to the ability to conceive and bear children. In Australia, one in six couples experience difficulties conceiving and/or maintaining an ongoing pregnancy (Victorian Assisted Reproductive Treatment Authority [VARTA] – <http://www.varta.org.au/>).

Infertility is a condition experienced equally by men and women and can be treated successfully with medical or surgical procedures, or a positive change of lifestyle. It might be that you need to quit smoking to make your sperm healthier. Or that you don't understand when you are ovulating and your timing is off. The causes of infertility are many, ranging from simple to complex. In around 20 per cent of presented cases, the causes are unknown (VARTA).

Although for most students pregnancy is not an option right now, it may be something they desire in the future. This activity requires students to consider that fertility cannot be taken for granted, and in some instances assisted reproductive technology (ART) may be required to form a family.



Instructions

- 1 Ask students to imagine themselves in 10–15 years' time. Pose the following questions (students should make mental notes of their answers rather than respond aloud):
 - Where do you hope to be?
 - What do you hope to be doing?
 - What sort of relationship do you hope to be in?
 - Will this relationship include children?
- 2 Explain that although we can't see into the future, there may come a time when they wish to become a parent so it's appropriate to learn about what might stand in the way of this. We should not take risks with our sexual health and/or assume that everyone who wants to become pregnant is able to.
- 3 Deliver the information from the worksheet 'Matters of fertility' to help facilitate a class conversation.
- 4 Divide the class into groups of three or four. Explain that the objective of the activity is to gain an understanding of the different ways of forming a family by answering the questions that accompany the scenario.
- 5 Hand out one scenario card and a set of the ART cards to each group. The ART cards are then handed out within each group (students will have more than one). Allow time for the students to read their cards and become familiar with the information. Ask students if they need anything clarified. Now ask students to share their information with the rest of their group.
- 6 One of the students now reads out their group's scenario card. After listening to the scenario, each member in the group determines whether or not their method of forming a family (as outlined on their ART card/s) would work in this instance. They discuss why they think it would work and then answer the questions on the scenario card, bearing in mind the age of the person in the scenario and their general health:
 - What are the choices available? (Place the possible methods on the table for all to see.)
 - How would each work in this instance?
 - If there is more than one option, which do you consider better and why?
 - What might be some issues that arise in this scenario?
 - Is there any advice you would like to offer? If so, explain.
- 7 Ask each group to report back to the class. They will need to read out their scenario and then present the various methods of forming a family available to this person or couple.

Wrap up

This is a summary of the information in the worksheet 'Matters of fertility' that was used earlier in the activity.

For teenagers and young adults, questions of fertility are mostly about avoiding pregnancy. Having children is probably not on your radar now but research shows that almost everyone wants to have children at some stage. Most of us take our fertility for granted and expect that the fertility switch can be turned from the 'off' to the 'on' position when we're ready, and that nine months later we'll have a baby. For some it might be as easy as that but to give yourself the best chance of having a baby when you're ready, here are some tips.

Protect your fertility

One of the greatest risks to your future fertility is sexually transmissible infections (STIs). The most common STIs are chlamydia and gonorrhoea. If they are not treated promptly, both of these infections can cause permanent damage to your reproductive tract and jeopardise your chance of having children in the future.

Don't leave it too late

As women and men get older their fertility and chance of having a healthy baby decreases. Although most information about how age affects fertility focuses on the woman's age, it is now known that the man's age also matters. Basically, the rule is that the younger you are the more fertile you are.

Watch your weight

We all know that being overweight is bad for your health but most people don't know that body weight also affects fertility and the chance of having a healthy baby. Being very underweight or overweight can lead to hormonal imbalances that disrupt ovulation and reduce sperm quality, which in turn decreases the likelihood of pregnancy occurring.

Quit smoking

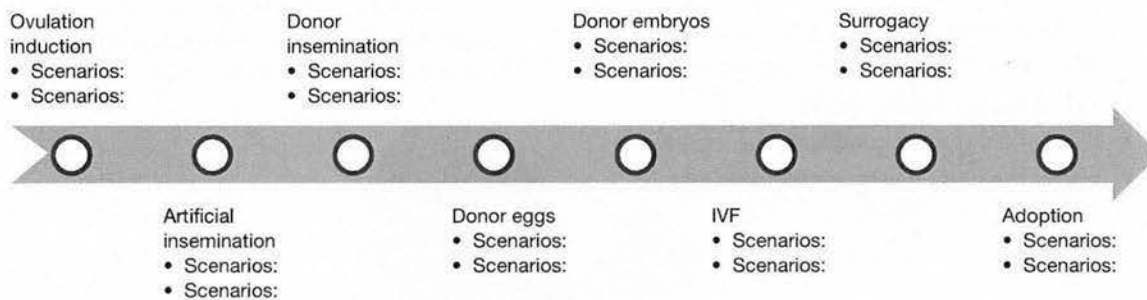
Smoking causes harm to every part of the body, including the reproductive organs. Couples where one or both partners smoke have much lower fertility than non-smoking couples.

Remember!

There are many ways of forming a family.

EXTENSION ACTIVITY >>

The objective of the extension activity is to devise a visual graphic that clearly shows the possibilities for forming a family in a situation where conception by the most common method – that of sexual intercourse between a male and female – is not possible. A diagram is provided below for guidance but the visual graphic may be of any sort. The point is to have clear information at a glance. Using the two sets of cards provided, students should identify the options (treatments etc.) in the graphic and then locate the various scenarios at those options available to them.



Matters of fertility

WHAT IS INFERTILITY?

VARTA defines infertility as the failure to conceive after 12 months of regular unprotected intercourse, or the inability to carry a pregnancy to live birth.

HOW CAN I PROTECT MY FERTILITY?

One of the greatest risks to your future fertility is sexually transmissible infections (STIs). The most common STIs are chlamydia and gonorrhoea. If they are not treated promptly, both of these infections can cause permanent damage to your reproductive tract and jeopardise your chance of having children in the future.

SOME FACTS ABOUT STIS

- STIs don't discriminate – anyone can get them and there is no way of knowing who is passing them on.
- Stopping the spread of STIs is everyone's business, so if you have a STI make sure you receive treatment before you have sex with anyone.
- Using condoms is the best way to avoid getting STIs.

DON'T LEAVE IT TOO LATE

As women and men get older their fertility and chance of having a healthy baby decreases. Although most information about how age affects fertility focuses on the woman's age, it is now known that the man's age also matters. Basically, the rule is that the younger you are the more fertile you are. For women the fall-off in fertility is only very slow up until the age of 35. After that, fertility drops more rapidly and by the age of 40 the chance of having a healthy baby is pretty slim. Men's fertility starts to decline a bit later, but by age 45 the chance of a man's partner conceiving is lower than when he is younger.

Some facts about fertility as age increases:

- chance of falling pregnant decreases
- risk of miscarriage increases
- risks of pregnancy complications increase
- risk of the baby having a chromosomal abnormality increases.

WATCH YOUR WEIGHT

We all know that being overweight is bad for your health but most people don't know that body weight also affects fertility and the chance of having a healthy baby. Being very underweight or overweight can lead to hormonal imbalances that disrupt ovulation and reduce sperm quality, which in turn decreases the likelihood of pregnancy occurring.

Some facts about obesity and fertility:

- chance of falling pregnant decreases
- risk of miscarriage increases
- risks of pregnancy complications increase
- risk of needing a Caesarean-section birth increases
- risk of the baby having health problems when he or she is born, and later in life, increases.

QUIT SMOKING

Smoking causes harm to every part of the body, including the reproductive organs. Couples where one or both partners smoke have much lower fertility than non-smoking couples and this is thought to be because the many chemicals in cigarette smoke damage eggs and sperm. Even passive smoking reduces fertility so keep your distance! There is some good news, too: within a year of stopping, most of the negative effects of smoking on fertility are reversed.

Some facts about smoking and fertility:

- chance of falling pregnant decreases
- women who smoke reach menopause earlier than non-smoking women
- babies of mothers who smoke have more birth defects than babies of non-smoking mothers
- babies of mothers who smoke are at greater risk of having health problems when he or she is born and later in life.



(From materials prepared by VARTA.)



TEN THINGS TO ASK YOURSELF BEFORE YOU HAVE A BABY

- 1 Why do you want to have a baby? Do you want to have a baby or is your partner, parent or someone else pressuring you?
- 2 How will a child affect your relationship with your partner? Are you both ready to become parents?
- 3 If you are not in a relationship, are you prepared to raise a child alone? Who will help support you?
- 4 How will a baby affect your future educational or career plans?
- 5 Do you and your partner have religious or ethnic differences? Have you discussed how you will handle these and how they might affect your child?
- 6 What will you do for childcare?
- 7 Are you prepared to parent a child who is sick or has special needs?
- 8 Are you ready to give up sleeping in on Sunday mornings? Are you prepared to find childcare every time you want to go out without your baby?
- 9 Do you enjoy spending time with children? Can you see yourself as a parent?
- 10 What did you like about your childhood? What did you not like? What do you want for your child?

These are tough questions and there are no correct answers. Only you can decide if you are emotionally ready to have a baby.

(Adapted from North Carolina Department of Public Health's 'Are you ready? Sex and your future' and Florida Department of Health's 'Healthy Start Program'.)



Forming a family – scenarios



SCENARIO 1

Peter and Alexandra are in their mid-30s and have been trying to have a baby for over 12 months without success. While tests have been performed, the cause of the infertility problem is not apparent.

QUESTIONS

- What are the choices available?
- How would each work in this instance?
- If there is more than one option, which do you consider better and why?
- What might be some issues that arise in this scenario?
- Is there any advice you would like to offer? If so, explain?

SCENARIO 2

Debbie had her uterus removed due to a medical condition but is still able to produce eggs. Her partner is fertile. Debbie is able to create an embryo for use in IVF procedures. Her sister is willing to be a surrogate.

QUESTIONS

- What are the choices available?
- How would each work in this instance?
- If there is more than one option, which do you consider better and why?
- What might be some issues that arise in this scenario?
- Is there any advice you would like to offer? If so, explain?

SCENARIO 3

Catherine's daughter, Chelsea, is eight years old. She has a medical condition that will cause her to be infertile in adulthood. Catherine wants to do whatever she can to give her daughter the best chance to conceive a child when she is ready to start a family. Chelsea could possibly use a donor egg but Catherine believes that it would be better to have a child with a genetic link to her family.

QUESTIONS

- What are the choices available?
- How would each work in this instance?
- If there is more than one option, which do you consider better and why?
- What might be some issues that arise in this scenario?
- Is there any advice you would like to offer? If so, explain?

**SCENARIO 4**

Tash and Emily are in their early 30s and want to form a family. They want to take it in turns to be a birth mother using the same donor.

QUESTIONS

- What are the choices available?
- How would each work in this instance?
- If there is more than one option, which do you consider better and why?
- What might be some issues that arise in this scenario?
- Is there any advice you would like to offer? If so, explain?

SCENARIO 5

Sonya is 33 and has broken up with her long-term boyfriend. She would like to have children one day, but is worried about meeting someone suitable before her fertility starts to decline. She would like to ensure that she has the best chance possible to become pregnant when she is ready in five to 10 years.

QUESTIONS

- What are the choices available?
- How would each work in this instance?
- If there is more than one option, which do you consider better and why?
- What might be some issues that arise in this scenario?
- Is there any advice you would like to offer? If so, explain?



SIMPLE TECHNIQUE

Ovulation induction

Ovulation induction may be used by women who are not ovulating or are not ovulating regularly, or who are producing only low levels of the hormones required to enable her to conceive. Ovulation induction involves taking a hormone medication (oral tablet or injection) which stimulates the production of follicle-stimulating hormone. This encourages the development of one or more follicles. When the follicles are large enough, another hormone is administered which releases the egg from the follicle. If the couple has intercourse around this time, the chances of conception are greatly increased.

SIMPLE TECHNIQUE

Artificial insemination or intrauterine insemination

Artificial insemination is used to treat women who have normal and healthy fallopian tubes, but for some reason cannot achieve conception. This may be because a man is not able to achieve an erection. Artificial insemination might also be used when semen has been frozen because of a male partner's absence or before cancer treatment.

The process of artificial insemination involves insertion of a male partner's semen through the female's cervix and into the uterus, at or near the time of ovulation. This procedure can be performed during a natural menstrual cycle, or hormonal stimulation can be used if the woman has irregular menstrual cycles.

DONOR TREATMENT

Donor insemination

Donor insemination using the sperm of a donor is utilised when:

- a male partner does not produce sperm
- a male partner does not produce normal sperm
- there is a high risk of a man passing on a genetic disease or abnormality to a child.

Donor insemination may also be used as part of IVF for single women or women in same-sex relationships. The process of donor insemination is the same as artificial insemination, but the sperm used is that of a donor rather than the male partner within a relationship.

DONOR TREATMENT

Donor eggs

Treatment with donor eggs is possible if a woman cannot produce eggs or her eggs are of low quality. This may occur due to age or premature ovarian failure (where the woman has stopped producing eggs). Use of donor eggs may also be an option in cases of recurrent miscarriage, or if there is a high risk of the woman passing on a genetic disease or abnormality to a child. In these cases, the egg donor undergoes the initial steps of IVF to collect her eggs. When this has been done, sperm from the male partner of the recipient woman, or donor sperm, will be combined with the donor eggs. Two to five days later, when embryos are formed, embryo transfer will be carried out and an embryo will be inserted into the woman's uterus. Hormone tablets must be taken in preparation for the embryo transfer, and for approximately 10 weeks after the embryos have been transferred.



DONOR TREATMENT

Donor embryos

Treatment using donated embryos is also possible if a person or couple needs donor sperm and donor eggs. Although rare, some couples choose to donate frozen embryos that they no longer need (after IVF procedures, for example) for use by people undergoing IVF. The embryo is transferred into a woman's uterus in the few days after ovulation occurs.

ADVANCED TECHNIQUES

In-vitro fertilisation (IVF)

IVF is used in a range of circumstances to assist with conception but is often the sole means of achieving pregnancy for women whose fallopian tubes are damaged or blocked due to disease. If there is an obstruction between the egg and sperm, IVF is required to allow fertilisation to occur.

In IVF, the woman's eggs are collected, along with sperm from the male partner or donor. The egg and sperm are left in a culture dish in a laboratory to allow the egg to be fertilised by the sperm. This creates an embryo, which is then placed back into the woman's uterus in a procedure called embryo transfer.

Sometimes more than one embryo develops in the laboratory, and it is possible to freeze these embryos for use in later transfer procedures.

SURROGACY

Surrogacy is a form of ART in which a woman (the surrogate mother) carries a child for another person or couple with the intention of surrendering the child to that person or couple immediately after birth.

Some things to consider:

- The commissioning parent/s must meet the eligibility criteria for treatment.
- The surrogate's egg will not be used in the conception of the child.
- The surrogate has previously carried a pregnancy and given birth to a live child.
- The surrogate is at least 25 years of age.
- All parties are prepared for the consequences if the arrangement does not proceed in accordance with their intentions, including if the commissioning parent/s decide not to accept the child once born and also if the surrogate refuses to relinquish the child to the commissioning parent/s.

The surrogate cannot be paid to act as a surrogate. However, the surrogate can be reimbursed for costs. All parties must complete a criminal records check and a child protection order check prior to entering a surrogacy arrangement.



ADOPTION

Sometimes, for many different reasons, children need to be raised by a family other than the one they were born into. This enables them to benefit from the commitment of parenthood.

Adopting a child in Victoria

About 20 or so babies are put forward for adoption in Victoria each year. Adoption in Victoria is the legal process by which a child becomes a member of a new family. Making the decision to give up a child is never easy, but sometimes situations arise where birth parents feel it is impossible to raise their child. In these situations they voluntarily relinquish all their legal rights and responsibilities in relation to their child, and an adoption order is made by the County Court of Victoria.

Adopting a child from overseas

In Victoria, the Intercountry Adoption Service (ICAS) is responsible for the management of the Intercountry Adoption Program. ICAS cannot assist with the adoption of children related by birth or marriage. You may be eligible to sponsor the child under Orphan Relative provisions in migration law.

(<<http://www.dhs.vic.gov.au/for-individuals/children,-families-and-young-people/adoption-and-permanent-care>>)

9 How safe is that?



LEARNING INTENTIONS

- To examine the safety of different sexual practices.
- To provide an opportunity for students to test their knowledge of safer sexual practices and facilitate substantive conversation in regards to this issue.

Preparation and materials

- ✓ cards 'Sexual behaviours', one set per group (these are very similar to those in AusVELS Levels 9 and 10, Learning sequence 2, activity 5, 'Sex – what is it?')
- ✓ Teacher notes from activity 1 of the current learning sequence – 'Safer sex quiz'

Introduction

In this activity students will be examining the idea of safer sexual practices. To do this, students will look at a range of sexual practices that place people at risk of contracting a STI as well as those that are safer. This also enables young people to start thinking about safety in terms of risk behaviours rather than risk groups.

This activity is similar to AusVELS Levels 9 and 10, Learning sequence 2, activity 5, 'Sex – what is it?' and provides another opportunity to look at safer sex practices. If students have not yet participated in AusVELS Level 7 'Teacher's choice' Learning sequence 2, activity 1, 'The "sex" in sexuality', it would be good to do this before proceeding with the current activity.

Instructions

- 1 Use the 'Sexual behaviours' cards included with this activity or the ones from AusVELS Levels 9 and 10, Learning sequence 2, activity 5, 'Sex – what is it?' (There are five extra cards in the present set that will need to be added if you use cards from the earlier activity.)
- 2 Divide students into single-sex groups of about six students per group and give each group a set of the prepared cards. Each group has to sort their cards into three piles: 'safer', 'unsafe' and 'unsure' using the corresponding cards with these words.
- 3 Give students about 10 minutes to complete the task and provide an additional few minutes for students to walk around and look at the piles sorted by the other groups.
- 4 As a class, go through each of the behaviours debating their relative safety. Discuss:
 - Was there a difference in female and male group responses? Why?
 - Can you think of any aspect of the 'unsafe' sexual behaviours that is similar to all behaviours in this category? What is a common factor amongst the 'safer' behaviours?

- 5 Read the following definition from <www.betterhealth.vic.gov.au>:

'Safe sex' is having sexual contact while minimising the risk that you will get a sexually transmissible infection (STI). Sexual contact that doesn't involve the exchange of semen, vaginal fluids or blood between partners is considered to be safe sex. Unsafe sex may pass on STIs such as chlamydia, HIV or gonorrhoea, or result in an unintended pregnancy. Safe sex is also called 'safer sex' to highlight the fact it is not a 100 per cent guarantee but it significantly reduces the risk of sexually transmissible infections.

(Better Health Channel fact sheet)

Visit <http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Safe_sex?open> to find more information regarding the following:

- how to stay safe
 - condoms
 - safer sexual activities
 - low-risk sexual activities
 - high-risk or unsafe sexual activities
 - factors that increase the risk of unsafe sex.
- 6 Now ask students to move the 'Sexual behaviours' cards that were in the 'unsure' pile to either the 'safer' or 'unsafe' piles, bearing in mind that they may still have questions about these behaviours. Once any questions have been answered and re-sorting is complete, students can arrange the 'Sexual behaviours' cards on a continuum from least risk to greatest risk using the corresponding cards with these words.
- 7 Finish the activity with each group developing their own definition of safer sex that is clear and easy for students their age to understand.
- 8 If time permits, ask the students to develop their idea into an advertising slogan.

Wrap up

Remember that sex is a big deal. Tenderness, intimacy and pleasure are all part of this. Sex should take place in the context of trust and the full consent of the people involved.

To wrap up, it would be good to review the Teacher notes on sexual consent from AusVELS Level 7, 'Teacher's choice', Learning sequence 2, activity 1, 'The "sex" in sexuality'.

LEARNING SEQUENCE 4

Cards • Sexual behaviours



Holding hands

A person gets sexual pleasure from holding hands with someone.

Kissing

Partners use their mouths to pleasure each other's mouths. Can also kiss anywhere on partner's body.

Body and/or genital rubbing

Rubbing genitals against a partner's body or genitals for sexual pleasure.

Love letters

A person gets sexual pleasure from writing or receiving love letters.

Anal intercourse

A man inserts his penis into his male or female partner's anus.

Cuddling

A person gets sexual pleasure from cuddling their partner.

Oral sex (cunnilingus)

A person uses his or her tongue to stimulate the female partner's genital area.

Vaginal intercourse

A male inserts his penis into his female partner's vagina.

Fantasy

Imagining things that are sexually arousing.

Oral sex (fellatio)

A person uses his or her mouth/tongue to stimulate their partner's penis.

LEARNING SEQUENCE 4

Cards • Sexual behaviours



Digital stimulation

A person inserts their finger(s) into their partner's vagina or anus.

Internet messages

Messages which are sexually arousing but not abusive.

Massage

A person gets sexual pleasure from being massaged.

Masturbation

Giving yourself sexual pleasure, usually by touching or rubbing your genitals. Can involve fantasy.

Nipple stimulation

Licking, sucking or rubbing etc. the nipples for sexual arousal.

Pornography or sex toys

Using images or toys for sexual arousal and pleasure.

Phone sex

Phone calls which are sexually arousing but not abusive.

Text messages

Messages which are sexually arousing but not abusive.

LEARNING SEQUENCE 4

Cards • Sexual behaviours



**Behaviours
that we are
unsure of**

**Behaviours
that are
safer**

**Behaviours
that are
unsafe**

**Least
risk**

**Greatest
risk**

10 Things are not always what they seem



LEARNING INTENTION

- To provide an opportunity for students to explore and clarify their own beliefs and values regarding common myths of sexual safety.

Preparation and materials

- ✓ cards 'Statements about sexuality', one set for the class
- ✓ equipment for viewing internet videos *The Importance of Condoms* <<http://vimeo.com/32160162>> and *Face Your Fears* – <<http://vimeo.com/32214917>>

Introduction

Research shows that one of the reasons young people do not practise safe sex in a consistent way may be due to some common misconceptions about STIs, gender and relationships. This activity is designed to dispel these myths by examining the logical consequences of a series of statements.

Instructions

- 1 Divide the class into groups of three or four. Inform students they are going to be given a statement relating to young people and sexuality.
- 2 Give each group a statement card or let them select one. Inform them that the task of the group is to a) discuss how they feel about the statement, and b) decide whether or not they think it is true, and why.
- 3 Have one person from each group report back to the class on their findings. If there are any statements cards that were not used, discuss these now as a class.
- 4 When you have heard back from all the groups, inform students that these statements are all myths and are partly responsible for young people sometimes engaging in unsafe sex behaviours. Go through each of the statements explaining why it is incorrect. If necessary use a website such as Better Health Channel – <http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Sexually_transmitted_diseases_symptoms_you_should_discuss_with_your_doctor?open>.

Wrap up

Show the videos and explain that although they are American, the messages are transferable to young people in Australia. After viewing the videos, talk about how each might look if the videos had been made by young people in Australia. What would be your messages?

LEARNING SEQUENCE 4

Cards • Statements about sexuality



It is only necessary to use condoms if you have casual sex.

If you love someone, they won't give you a STI.

It is the girl's responsibility to insist on using condoms.

You can tell by looking at someone whether they could have a STI.

Young people don't use condoms to prevent pregnancy but to prevent themselves from getting infections.

Young people never have unintended sex if they have been drinking.

It would be easy to discuss using condoms with a person during a sexual encounter.

It would be easy to say no to sex without a condom if the other person was putting pressure on you.

The main reason why young people don't use condoms is that condoms are hard to get.

11 Thinking about sexual safety

LEARNING INTENTIONS

- To enable students to appreciate the impact of personal, social and cultural factors on their capacity to manage their sexual health.
- To understand how, and to what extent, these factors are gendered.
- To begin to devise appropriate strategies to address these issues.

Preparation and materials

- copies of the worksheet 'Case studies of Melissa and Rafat', one per student
- copies of the worksheet 'Thinking more deeply', one per student

Introduction

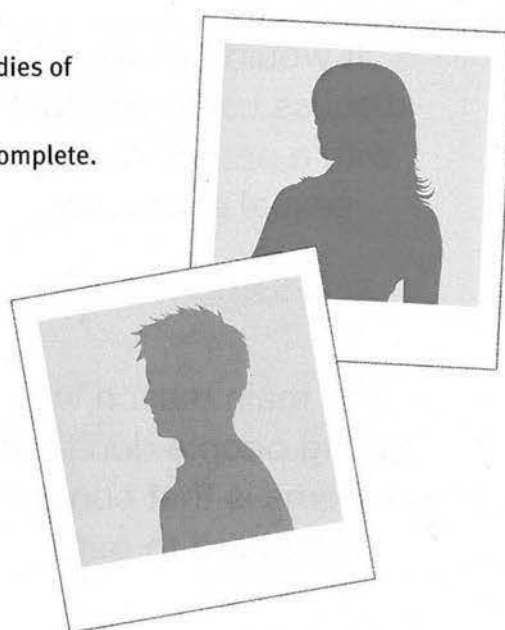
Sexual health and STI prevention is often seen as belonging to the medical realm and best addressed through the dissemination of physical health-related information. Current research indicates, however, that STI prevention messages – particularly for young people – cannot be effective unless they take into account the social and cultural context in which sexual behaviour takes place. It is these social and cultural pressures to behave, or be seen to behave, in particular and prescribed ways, which have the most profound influence on the sexual beliefs and behaviours of young people. Becoming aware of the personal, social and cultural nature of sexual behaviour, and of the kinds of pressures that personally affect them, can help young people to clarify their own values relating to sexual behaviour and make informed decisions about which influences they choose to accept.

Instructions

- 1 In this activity, students will be asked to work alone.
- 2 Give each student a copy of the worksheet 'Case studies of Melissa and Rafat' to complete.
- 3 Now give them copies of 'Thinking more deeply' to complete.

Wrap up

- As a class, ask students if they have any insights they would like to share about the scenarios. Use the following questions as a guide. Understanding the contexts of barriers is very important, and can help with identifying strategies to overcome them.
- Are your observations different for Melissa and Rafat? If so, can you suggest why?
- Which things are similar?



- Which context do you think has the most significant barriers to practising safer consensual sex? Are the three contexts – personal needs, social safety and sexual safety – interconnected?
- Which context do you think young people value most in a sexual relationship? Is this how it should be?
- Which barriers could be removed by talking to a doctor or health care worker?
- Which barriers could be removed by a good, frank conversation between Melissa and Rafat? How would that conversation begin?
- What strategies might be useful for addressing the barriers in any of the contexts?

Teacher advice

This activity could be used as an assessment task, checking students' understanding of sexual health in the context of their own socio-cultural environment. Have they identified important implications in the scenarios and been able to meaningfully describe them within personal, social and sexual contexts?

Melissa and Rafat

Read the following case studies.

MELISSA

Melissa is 16 and lives in a country town. At the moment she has a big interest in starting a relationship with Rafat but is unsure if he is interested. She has not had a sexual relationship before but feels that if this one works out, it could be serious. The idea of having a relationship that's intimate, pleasurable and fun appeals to her. She has always promised herself that if she did have a sexual relationship, she would make sure it was a safe one and that if she ended up having intercourse she would ensure condoms are used. She would also like to be in contact with a health service where she could get some advice about contraception as well as STI prevention. She is thinking a lot about these issues at the moment and about whether or not she will be able to keep her promises to herself.

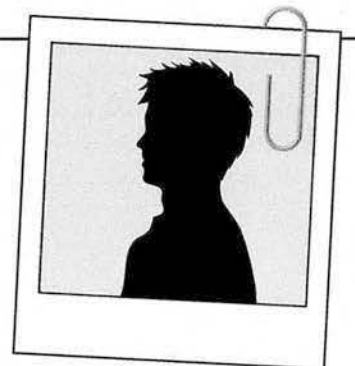
Make a list of *all* the things you think could stop Melissa living up to her promises to herself and having a safer sex relationship. Try to make the list as extensive as you can. You will be placing them into contexts later.



RAFAT

Rafat is 18 and lives in the same country town as Melissa. He is interested in a relationship with Melissa and he gets the impression it could be about to happen. He is committed to safer sex if sex is on the agenda, but he does not know what Melissa thinks about any of it. He likes to act 'tough' about his personal life but knows deep down he is inexperienced and uncertain about how he should manage this side of things... He would like to be able to talk it over with someone. He has a good relationship with his parents but feels it is part of their culture to think of him as a good boy and not a man with sexual feelings; he knows he could never broach the subject with them. And so that leaves his mates. However they seem to think that for sex to be good, it has to be like the porn on the net. He knows this isn't what it would be like with Melissa so he is feeling really alone with his thoughts.

List the things that might get in the way of Rafat living up to his promises to himself to have a safer sexual relationship. Try to make the list as extensive as you can. You will be placing them into contexts later.



Thinking more deeply

Thinking about the lists of barriers you created beneath the scenarios, identify those that fit into the below contexts.

PERSONAL NEEDS

List those things that relate to sexual desires for Melissa and Rafat (what each may desire in a sexual relationship such as intimacy and pleasure).

MELISSA	RAFAT

SOCIAL SAFETY

List those things that relate to social safety for Melissa and Rafat (looking after your reputation and ability to be socially accepted; what's real and what's not).

MELISSA	RAFAT

SEXUAL SAFETY

List those things that relate to sexual safety for Melissa and Rafat (looking after your physical health from a sexual point of view).

MELISSA	RAFAT

12 Did I really press 'send'?

LEARNING INTENTIONS

- To investigate the impact of sending and receiving unfavourable or sexually explicit electronic messages.
- To facilitate conversation regarding the laws in Victoria on 'sexting' and child pornography.

Preparation and materials

- ✓ cards 'Why you want to send the photo', enough sets to ensure each group has two to three cards
- ✓ copies of the worksheet 'Are you sure you want to continue?', one per group
- ✓ equipment for showing internet videos *What's Next* and *What's Next 2* (<http://www.chnny.org/services/teen/more-than-just-sex-campaign/>)

Introduction

Mobile phone pictures and the risks of 'sexting'

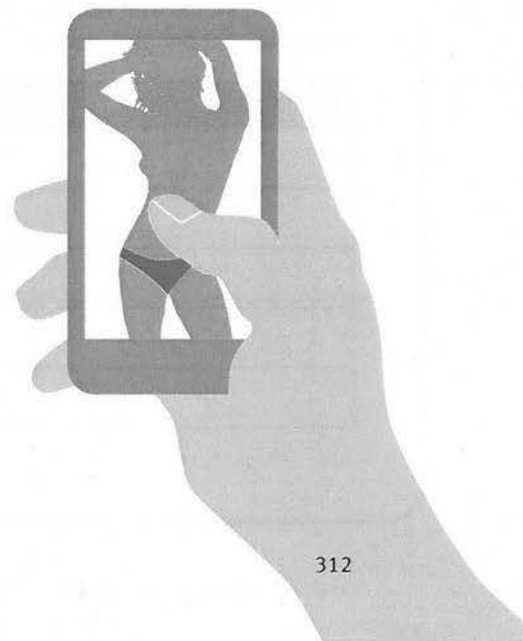
'Sexting' or sending 'sex messages' is when nude and/or sexual images are taken on a mobile phone, tablet, web-cam or other device, often by young people and their friends. This is a crime if the photo includes a person under the age of 18. Sexting is already leading to young people being charged by police with child pornography offences.

Think carefully about the consequences of taking or sending pictures of your friends on your mobile phone, or other device, or posting such images online, especially if they are not fully dressed, and even if they agree. It may seem like harmless fun but be careful – once you send pictures electronically they can become part of your 'digital footprint' and this lasts forever. It could damage your future career prospects or relationships. (Victoria Legal Aid: <http://www.legalaid.vic.gov.au/745.htm>)

Child pornography

You could be charged by the police with producing child pornography if:

- you take a nude or semi-nude picture of a person under 18, even if they are your friend and consent (agree) to the picture being taken
- you take photos or video of a person under 18 involved (or looking like they are) in sexual activity or posing in an indecent sexual manner.



You could also be charged with possessing child pornography if you go onto the internet and download pornography showing people under 18.

If you put a pornographic photo or video showing a person under 18 onto the internet or your phone, print a photo, or email or text it to a friend, you could be charged with publishing or transmitting child pornography. You could be charged even if you are the same age or younger than the person in the picture or video.

People found guilty of sexual offences or child pornography are stopped from working (e.g. as a teacher or sports coach) or volunteering with children.

OK, now you know what the law in Victoria is, but what else is there to consider before pressing send...

Instructions

- 1 Divide the class into groups of four to five.
- 2 Hand out two or three 'Why you want to send the photo' cards and a copy of the worksheet 'Are you sure you want to continue?' to each group.
- 3 Ask the groups to read out one of the cards and then complete the worksheet, discussing each of the questions and writing down their answers when they reach a consensus about whether to send or delete the photo in the given scenario. They can include a message with the photo if they think that's appropriate. There are blank scenarios at the bottom of the worksheet if students would like to think up some situations of their own.
- 4 Repeat with the remaining cards, allowing a few minutes for students to read and discuss each. It should not take long to complete this.
- 5 When everyone has finished, ask the groups to report back to the class the scenarios in which they agreed to send the photo.
- 6 As a class, discuss why or why not photos might be sent in the various scenarios. You may want to refer again to the introductory material for clarification.

Discussion questions

- You are sent a photo that you know was not meant for you – what's the ethical thing to do?
- An unauthorised photo of you goes up on a social media site – what do you do?
- An unauthorised photo of someone you know goes up on a social media site – what do you do?
- You're at a party and your friend has had too much to drink. One of the other kids is using their phone to take photos of your friend to put on a social media site. What do you do?
- You have taken a photo of your friend getting off with someone at a party. You think it will be funny to post it on a social media site. What will you do?

Wrap up

Ask students to consider the following:

Some surveys in the United States have shown that around 40 per cent of teens and young adults say they have had a sexually suggestive message (originally meant to be private and intended for someone else) shown to them. (The National Campaign to Prevent Teen and Unplanned Pregnancy: <http://www.thenationalcampaign.org/sextech/PDF/SexTech_Summary.pdf>.)

- Will knowing this make a difference to your own behaviour? How will you feel tomorrow if you act now without considering the consequences?
- How important or real are the consequences?
- Could this affect your friendship with someone?

Once it's out there, it's out there. There is no getting it back.

Show the videos *What's Next* and *What's Next 2*

<http://www.chnyc.org/services/teen/more-than-just-sex-campaign/>.

LEARNING SEQUENCE 4

Cards • Why you want to send the photo



LEARNING SEQUENCE 4

Cards • Why you want to send the photo



New message Cancel

To:

Using your phone you take a photo of yourself posing seductively. You want to send the photo because...

it's just a joke that's between friends.

~ Q 1 W 2 E 3 R + T - Y \$ U (I) O \$ P
 & A 4 S 5 D 6 F = G / H [] K ; L ←
 ↑ 7 Z 8 X 9 C % V \ B | N < M > |
 ↓ * # 0 # @ . ' ?

New message Cancel

To:

Using your phone you take a photo of yourself posing seductively. You want to send the photo because...

it's someone older and you think that by sending it you will seem more mature.

~ Q 1 W 2 E 3 R + T - Y \$ U (I) O \$ P
 & A 4 S 5 D 6 F = G / H [] K ; L ←
 ↑ 7 Z 8 X 9 C % V \ B | N < M > |
 ↓ * # 0 # @ . ' ?

New message Cancel

To:

Using your phone you take a photo of yourself posing seductively. You want to send the photo because...

you would like to spice up your relationship.

~ Q 1 W 2 E 3 R + T - Y \$ U (I) O \$ P
 & A 4 S 5 D 6 F = G / H [] K ; L ←
 ↑ 7 Z 8 X 9 C % V \ B | N < M > |
 ↓ * # 0 # @ . ' ?

New message Cancel

To:

Using your phone you take a photo of yourself posing seductively. You want to send the photo because...

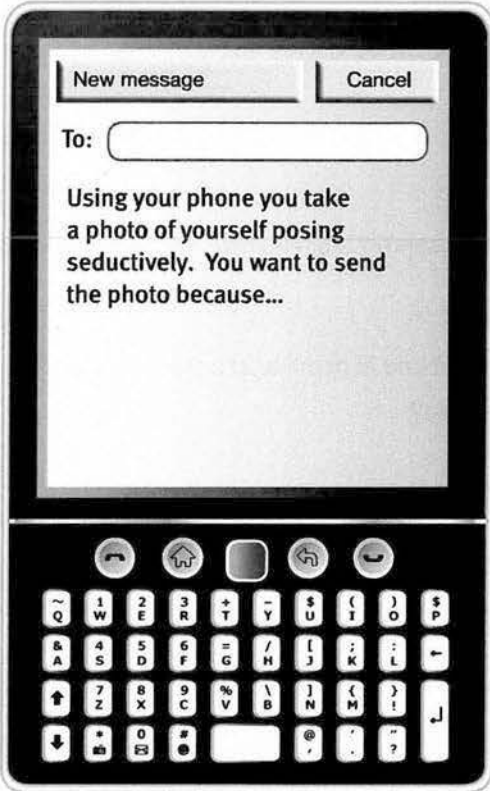
you have had a bit to drink so it seems like a daring, fun thing to do.

~ Q 1 W 2 E 3 R + T - Y \$ U (I) O \$ P
 & A 4 S 5 D 6 F = G / H [] K ; L ←
 ↑ 7 Z 8 X 9 C % V \ B | N < M > |
 ↓ * # 0 # @ . ' ?

LEARNING SEQUENCE 4

Cards • Why you want to send the photo

AusVELS Levels 9 & 10 Learning Sequence 4



Are you sure you want to continue?

Read out one of the scenarios on the cards then discuss the questions below as a group. Decide if you would attach a photo, attach the photo with a message, or cancel the text message. Add your reasons and comments.



QUESTIONS

- Will the photo be shown to anyone else?
- Will it 'send the sort of message' you want to send?? (For example, was it funny, were you seen in a positive light?)
- What if the phone is loaned to someone else?
- What if the phone is lost, stolen or left lying around at home or at a friend's place?
- What if the relationship ends – will it be deleted?
- Will the photo be sent to anyone else?

SCENARIO 1

✓ Tick your answer:

- attach photo with a message
- attach photo
- cancel text message

Why?/comments:

SCENARIO 2

✓ Tick your answer:

- attach photo with a message
- attach photo
- cancel text message

Why?/comments:

SCENARIO 3

✓ Tick your answer:

- attach photo with a message
- attach photo
- cancel text message

Why?/comments:

13 Nightclub dilemmas



LEARNING INTENTION

- To facilitate conversation regarding the consequences of posing for sexually provocative photos.

Preparation and materials

- ✓ copies of the worksheet 'Fury as under-age girls used to sex-up nightclub', one per student
- ✓ copies of the worksheet 'Dilemmas – people involved and possible consequences', one per group

Introduction

Young people sometimes take risks and often these risks are associated with the use of alcohol. The posing for, taking of, and distribution of photos has become more of an issue for young people in conjunction with electronic media. In this activity, students will consider the various dilemmas involved in a story reported in *The Age*, 30 October 2011.

Instructions

- 1 Hand out copies of the worksheet 'Fury as under-age girls used to sex-up nightclub'. Ask students to read the worksheet and underline all the people involved in this scenario.
- 2 Divide the class into groups of four or five. Hand out the worksheet 'Dilemmas – people involved and possible consequences', one copy per group.
- 3 As a group, have students discuss the scenario and fill in the worksheet (there is no need to include the sociologist or ethics expert).
- 4 Ask each group to report back to the class on who they named as being involved. They should include at least: parents of the girls, the girls themselves, the school and principal, friends of the Facebook page, the club's promoter, and door staff at the club. If some groups omitted a person or persons from their list, allow time for them to update their worksheet.
- 5 Using the following instructions, ask the groups to respond to the dilemmas in this situation through role play. The role play should not take more than one to two minutes but it is important to give students a minute or two to prepare.
 - Ask each group to act out for the class a very short scenario using the information from their worksheet.
 - After 30-60 seconds, the director (one member of the group) should say 'cut', those in the skit freeze, and then the director says 'take two'.
 - The group then replays the scenario but altering the involvement of one of the persons to result in a more positive outcome.

Discussion questions

- Could this have happened to males, and, if so, how might it have been reported in the news?
- Was there one particular person at fault? If so, who and why?
- How might the use of alcohol influence this scenario?
- What significant problem/s could arise for the students involved? Was this the intention of the night out?

If time permits, repeat the role play but this time change it so that it is boys going to the nightclub and having their photos posted on a social media site.

Wrap up

Posing for the camera, provocatively or not, is often part of a young person's online profile. Sharing your profile electronically can at first appear to be a safe and fun thing to do, and keeping up with family and friends through social media is fine. Maybe some questions to ponder before posing for the camera or on Skype, or before pressing 'send' or posting something online, would be:

- What's truly going to be private?
- What's almost always going to be public?
- What's probably best left to a face-to-face conversation?
- Is there a difference in what you let your friends see and what you want your partner in a new relationship – or someone in your family, or your current employer – to see?

Sharing photos should be a good fun way of keeping in touch with your friends and families. But we all have a responsibility to those who share with us. A second article from a week later, 'Promoter fired over girl photos', illustrates some of the consequences in this particular event.

FURY AS UNDER-AGE GIRLS USED TO SEX-UP NIGHTCLUB

The parents of several students from a Melbourne school are considering suing a prominent nightclub for using provocative images of their daughters, some just 16, to promote the venue.

More than 15 girls from Qwerty High were photographed at Gloss Drop nightclub, which is held at the King William Hotel every Saturday night.

Up to 50 images of the students appeared on the club's Facebook page over the past month, despite the girls being under 18 and not legally permitted to enter the licensed premises. Several photographs include young women kissing each other or posing provocatively.

Victoria's liquor authorities are investigating the allegations, and several parents are considering legal action against the venue and its promoter after parents were notified by the school of their daughters' involvement.

Ted Carly, the school's principal said he was deeply concerned by the exploitation of the students on social media sites.

"We deplore the manner in which young women are commodified and sexualised in this way," he said. "As soon as the school was made aware of the Facebook page, it took immediate action by communicating its concerns to students involved and their parents."

Ted Carly did not disclose whether any of the students involved in the Gloss Drop matter would face disciplinary action.

Max Sands, the club's promoter, denied the students' images had been used as a promotional tool, although several photographs were removed from the site on Friday afternoon.

Max Sands said door staff at the nightclub had not been aware the girls were under age. "We screen everyone at the door. I'm not sure what the situation is, but we do have a problem with fake IDs," he said.

But one mother of a year 11 student accused door staff of "turning a blind eye".

"They know that if they let pretty girls in, then the boys will come and their places will be successful," the mother said.

Victoria University sociologist Dr Meagan Tyler said the use of the students' images reflected the broader sexualisation of girls. "This sounds like it's straight out of the *Girls Gone Wild* genre, where young women are represented in a 'pornified' way that has become part of our popular culture," she said.

But sexual ethics expert Nina Funnell said the young women needed to accept some responsibility. "To say these girls are innocent victims ignores the fact that many girls actually seek out and pose for the party photographers specifically to have those images uploaded," she said.

"These girls are posing for the camera and the pictures become part of their online identity. Kids have been sneaking into clubs for decades. What's changed is that it can now be documented and be made publicly available."

A spokeswoman for Responsible Alcohol Victoria said the venue faced fines of up to \$7300 if found guilty of serving alcohol to minors.

(Note: identifying names of those involved, including the organisations, have been changed in the article.)



Stockphoto © Photolyric

(Houston, C 2011, 'Fury as under-age girls used to sex-up nightclub', *The Age*, 30 October, p. 1.)

Dilemmas – people involved and possible consequences

Name of the person involved	Their involvement or reaction	Possible consequences

PROMOTER FIRED OVER GIRL PHOTOS

A PROMINENT nightclub and music promoter has been sacked by the owners of St Kilda's King William Hotel after provocative images of students from at least 10 private schools were used to spruik the venue on social media sites. Gloss Drop's Max Sands has also been linked to a mid-semester party this year where under-age students were provided with alcohol in a private function room. The "secret warehouse party" was attended by students from several schools, with photographs of the event uploaded to Facebook.

Last week, *The Sunday Age* revealed that parents of students from Qwerty High were considering legal action against Max Sands and his promotion company, after images of their daughters appeared on the Gloss Drop Facebook page.

Ted Carly, principal, denounced "the manner in which young women are commodified and sexualised in this way". Images of students from other schools have also been uploaded to the site. At least two schools have notified parents and taken disciplinary action.

Victoria's liquor authorities are investigating the allegations, which could lead to fines of up to \$7300 and a review of the venue's licence fees.

Concerns have also been raised about other Melbourne clubs catering to under-age students looking to party after exams.

A website promoting a function called Class Dismissed held at CBD venue Roxanne Parlour targets year 11 and 12 students for its Wednesday night functions.

Melinda Tankard Reist, author of *Getting Real: Challenging the Sexualisation of Girls*, accused the clubs and their promoters of placing profit ahead of student safety.

"This is systematic and exploitative. These clubs don't seem to care the girls are under-age and are clearly using them for promotional purposes."

King William was sold last month to the Melbourne Pub Group, which takes control of the hotel next month.

The group met with current owner Gerard Makeham on Friday afternoon, before a decision was made to terminate Max Sand's contract and cancel Gloss Drop. Max Sands did not respond to allegations that his promotion company deliberately targeted under-age students, who are not legally permitted to enter licensed premises or consume alcohol.

Last week, Max Sands said he was unaware that under-age students frequented the club or appeared on its Facebook page.

But up to 50 images of young women, some posing provocatively or kissing each other, were removed from the site this week. And up to 100 students from a number of private schools are Facebook friends with the club's doorman.

(Note: identifying names of those involved, including the organisations, have been changed in the article.)



!Stockphoto © Lise Gagne

(Houston, C 2011, 'Promoter fired over girl photos', *The Age*, 6 November, p. 1.)

14 Writing the rights – positive approaches to sexuality



LEARNING INTENTIONS

- To explore ways of feeling positive about sexuality.
- To develop literacy around sexual rights.
- To help students generate and test principles around sexuality in order to make and justify their decisions.

Preparation and materials

- board for recording the 'rights' from each group
- Universal Declaration of Human Rights worksheet, one per group

Introduction

It is important that students finish the learning sequence feeling positive about sexuality – or at least understanding why it is often difficult to make choices about sexuality. For this final activity, students need to reflect on the range of issues and information covered in the *Catching On Later* activities they have participated in.

Part of this activity requires students to talk about an issue to try and convince others of its importance. Depending on the experience of your students, you could teach them the voting principles of meetings, such as putting a motion, speaking to the motion, and so on.

This activity could also be used as an assessment task.

Instructions

- 1 Divide the class into groups of three or four. Tell students they have been hired by the Victorian government to provide advice on the development of a list of rights to help young people feel positive about their sexuality. Each group must come up with one right for inclusion and a justification of why it is important. Encourage students to think broadly about issues of gaining information, discrimination, and sexual orientation, access to advice, using community services, being provided with education, gender identity and so on.
- 2 Using the 'Universal Declaration of Human Rights' worksheet as a kick starter, allow about 10 minutes for the groups to discuss and develop the right of their choice, then have each group present the right and justify it to the class. Write them up on the board.
- 3 When all groups have presented, ask students if they agree with the rights and if there are any that need to be added or if some that are similar could be combined.
- 4 Now tell students that only five rights can be included in the charter. This means that the groups will have to vote on which five to include. To ensure the best possible selection, people must put forward their ideas and arguments about which rights should be included. In other words, they must put forward a motion to be voted on. As in any meeting, they must ask for someone to second the motion and then speak to it. Let other students speak for and against the right, and then vote.

- 5 Once the five rights have been established, each student must select one of the rights and prepare a one-page report to the Victorian Minister for Health, outlining the importance of including this particular right into Victoria's Charter of Human Rights and Responsibilities, and how it could be achieved.

Wrap up

The World Health Organization (WHO) says 'Sexuality is a central aspect of being human throughout life and encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction.' Learning about how to be sexually healthy is a basic human right for all of us the world over. We learn important lessons at school, from our families and loved ones, from reputable information sources, and from health professionals such as doctors. There are many issues related to sex – STIs, unwanted pregnancies, bullying, exploitation, abuse etc. – and we need to learn about these too, and about safe, respectful approaches to sex, bearing in mind that sexuality itself is a positive, healthy thing and a fundamental ingredient of life.

WHO identifies 10 sexual rights – the right of all persons, free of coercion, discrimination and violence, to:

- the highest attainable standard of sexual health, including access to sexual and reproductive health care services
- seek, receive and impart information related to sexuality
- sexuality education
- respect for bodily integrity
- choose their partner
- decide to be sexually active or not
- consensual sexual relations
- consensual marriage
- decide whether or not, and when, to have children
- pursue a satisfying, safe and pleasurable sexual life.

(From The World Health Organization, 'Sexual and reproductive health – Gender and human rights': http://www.who.int/reproductivehealth/topics/gender_rights/sexual_health/en/)

Universal Declaration of Human Rights

The United Nations' Universal Declaration of Human Rights identifies many rights.

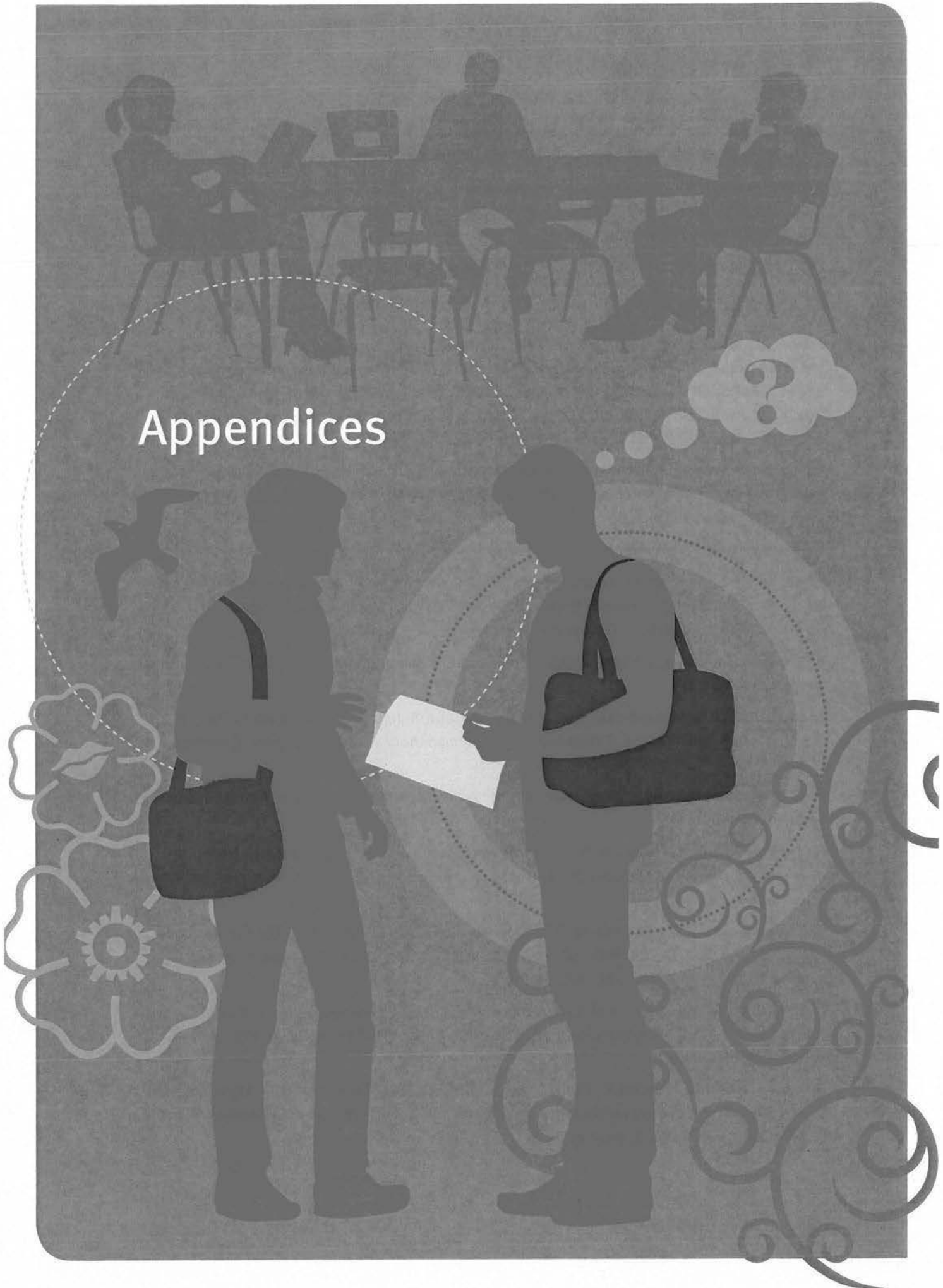
Here are some examples:

- life, liberty and security of person
- freedom from slavery and servitude
- freedom from torture, or cruel, inhuman or degrading treatment or punishment
- equality before the law
- not being subjected to arbitrary arrest, detention or exile
- freedom of movement and residence
- nationality
- freedom of thought, conscience and religion
- peaceful assembly and association
- work
- health
- education.

If you were to add a right specifically about sexuality, what would it be?

What arguments could you present to justify it?

Appendices



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Some key findings of the 4th National Survey of Australian Secondary Students

Knowledge – key findings

Smith et al. (2009, Chapter 4, p. 12)

- HIV knowledge remains relatively high and comparable to the levels found in 2002.
- There has been a marked improvement in student STI knowledge between the 2002 and 2008 studies. Despite this, in some areas student STI knowledge remains relatively poor.
- Despite generally poor student knowledge of chlamydia, knowledge of this infection has nonetheless improved significantly since 2002.
- Hepatitis A, B and C knowledge remains relatively poor, but there has been some improvement in student knowledge regarding hepatitis B and C.
- HPV knowledge was measured for the first time in 2008 and student knowledge of this STI was very poor. In most cases, more than half the sample reported being 'unsure' of correct answers to HPV knowledge questions.
- Cervical cancer knowledge was measured for the first time in the 2008 study and knowledge was generally poor.
- There were no gender differences in students' HIV knowledge; however, young women demonstrated better knowledge generally in terms of STIs, HPV, cervical cancer and hepatitis compared with young men.

Sexual behaviour, beliefs and perceptions – key findings

Smith et al. (2009, Chapter 5, p. 25)

- The majority of students have experienced some form of sexual activity.
- Over one quarter of Year 10 students and just over half of Year 12 students had experienced sexual intercourse.
- The proportion of students who had experienced sexual intercourse has increased between the 2002 and 2008 surveys.
- Student condom-use has remained stable between the 2002 and 2008 surveys.
- A considerable proportion of sexually active students have sex with three or more people in a year, and this proportion had increased significantly in 2008.
- For young women, experience of unwanted sex has increased significantly between the 2002 and 2008 surveys.
- Almost one in 10 students surveyed reported their most recent sexual encounter was with someone of the same sex. For young men, the likelihood of having a same-sex encounter at the most recent sexual experience had increased since 2002.
- Most students report positive feelings after having sex; however, for young women there is some evidence of a decline in more positive feelings between the 2002 and 2008 surveys.
- Between 2002 and 2008, there has been an increase in student confidence with respect to talking with their parents about sex and sexual health-related matters.
- Fewer students in the 2008 survey reported using no contraception the last time they had sex. Use of the birth control pill and morning after pill increased between 2002 and 2008.