



Sexuality Education in
Life Orientation

Scripted Lesson Plans

Grade 10 Learner Book



basic education

Department:
Basic Education
REPUBLIC OF SOUTH AFRICA

Sexuality Education
in Life Orientation

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BACKGROUND AND CONTEXT FOR THE GRADE 10 SLPs

1. INTRODUCTION

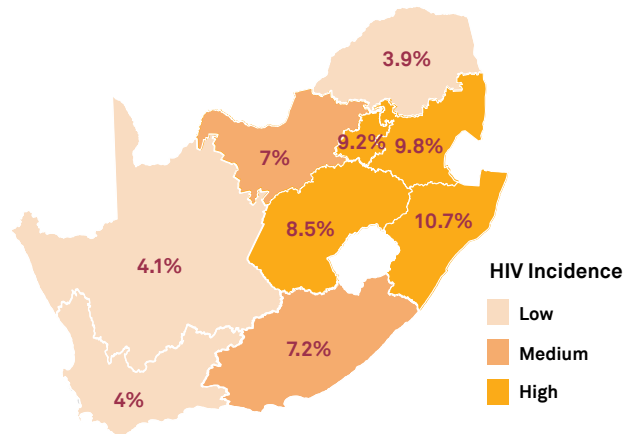
Young people face many pressures and risks; many of these are different than the risks adult may have faced when we were younger. HIV and other infections and early and unintended pregnancy are those we may think of first. But there are many unhealthy pressures around relationships, and influences that come from many sources.

The difficult facts on HIV prevalence highlight the need for effective Sexual and Reproductive Health (SRH) education so that young people will be well equipped to deal with today's challenges.

HIV is everyone's problem.

No matter where we live in South Africa, everyone is affected or at risk in some way. Working together to break the silence, show compassion, support those on treatment, and address risks, are the only way to stop the epidemic.¹

HIV:² While all young people are at risk, girls are getting infected with HIV at higher rates than boys. This trend continues through young adulthood.



Source: SANAC, accessed January 18, 2019

Figure 1: HIV prevalence by province, 2016

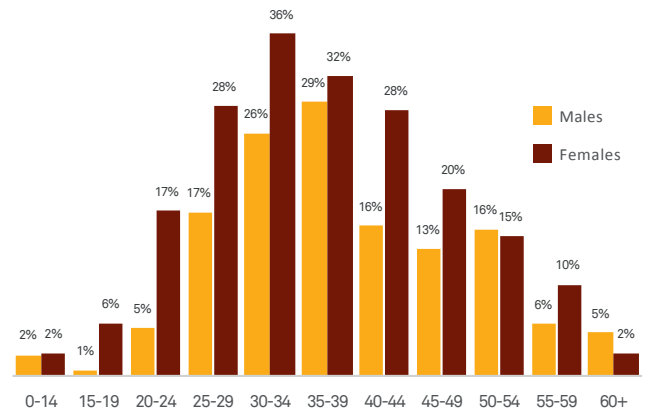


Figure 2: HIV infection rate by age

2. PURPOSE

The Scripted Lesson Plans (SLPs) include comprehensive lessons or activities, with assessment tasks, that will help you to understand the concepts, content, values and attitudes related to sexuality. The lessons encourage you to think about the kind of behaviour and attitudes that lead to a safe and healthy lifestyle.

The aim of the activities is to provide you with accurate (true) information on many issues or questions that young people have, or about decisions that young people face regarding their sexual health and well-being. The activities are practical and interesting for you to try. The activities are done individually, in pairs or in groups so that you can share information and have discussions with your peers. Some of the tasks require that you have discussions with your parents, guardians or another trusted adult who you feel comfortable talking to about sex openly.

The activities have assessment tasks that you need to complete. The assessment tasks are engaging and help consolidate new Sexuality Education (SE) content that is included in the lessons. Many assessment tasks require you to reflect on your own understanding and decisions about what is being taught. Through the assessment tasks you are able to consider your own behaviour and make decisions that will bring you closer to the behaviour, values and attitudes you think are acceptable and good for you. You can discuss,

1 Shisana, O., Rehle, T., Simbayi, L.C., Zuma, K., Jooste, S., Zungu, N., Labadarios, D., and Onoya, D. (2014). *South African National HIV Prevalence, Incidence and Behaviour Survey, 2012*. Cape Town, South Africa: HSRC Press.

2 Ibid

share, compare and encourage your peers with your responses. Try setting up a group with friends who have thoughts and attitudes similar to yours. This supportive group of friends will encourage you in your decisions, as you will encourage them, and help you to build a safe environment in which you will feel free to talk about difficult issues in a trusting, positive and open way.

In the earlier grades, activities required that you identify your goals. Setting goals comes with choosing how you will live a healthy lifestyle, which includes a healthy sexual and reproductive life.

In Grades 10 to 12, the SLPs will help you determine if your goals need to change, if you need to develop new goals, which behaviour, values and attitudes are best to support your goals and what should you put in place to ensure that you sustain a healthy, well-balanced life in the future

3. STRUCTURE

Each part of the SLPs is important and has a specific purpose. Please refer to the diagram below:



4. THE CORE MESSAGES

The following have been selected as CORE MESSAGES to be reinforced throughout the activities. Use these messages to remind yourself and your peers of what you should know about choosing a safe and healthy sex life. Use them on postcards, bookmarks, posters, bumper stickers etc. to raise awareness and show what you choose to do!

5. I will choose if, and when, to have sex and when not to.
6. I have the right to say “no” and the responsibility to respect “no” to sexual attention and sex at any time and in any situation.
7. If my partner and I choose to have sex, my partner and I will use a condom correctly every time.
8. To protect myself and others, I need to be honest and communicate well in sexual relationships.
9. I respect my own and others’ wellbeing.
10. I know my HIV and STI and general sexual and reproductive health status.
11. My partner and I are equally responsible for preventing pregnancy, HIV and other STIs.
12. I want to be part of a community that stops gender harm and violence and creates safety and peace in its place.



5. KEY TO ICONS

A set of icons is included to guide you on different parts of the activity



ACTIVITIES



READING



ASSESSMENT



HOMEWORK



RESOURCES



CONSOLIDATION



GLOSSARY



Lesson 10.1

Developing my
self-confidence

Lesson 10.1

Developing my self-confidence

BRIEF LESSON SUMMARY

The lesson will begin with a brief review of Grade 9 SMART goal-setting, sexual and reproductive health and well-being. During the lesson you will develop a more in-depth understanding of self-confidence and what may weaken or strengthen your self-confidence. You will identify media messages around race, sex, sexual orientation, gender and abilities linked to romantic/sexual relationships, and how they can affect self-confidence, self-esteem and self-awareness. You will make up your own media messages to show that equality can result in healthy and satisfying romantic/sexual relationships. Finally, you will identify strategies for building self-confidence, well-being and happiness in your transition from puberty to adolescence and young adulthood. The spotlight will turn to promoting healthy romantic relationships through good self-confidence.

KEY POINTS

1. When you have self-confidence you are more likely to make choices and decisions that are good for your overall well-being.
2. In life we all experience difficulties and disappointments. There are ways to get through them, especially when you have people who understand, support and encourage you.
3. Self-confidence is like a shield. You can build it by loving yourself, knowing that you are special and unique, and standing up for what you believe in.
4. You often become a stronger and more confident person when you have overcome challenges.
5. We all as individuals, groups, communities and societies, have the power to support other people like our friends, peers and family members, through their challenges.
6. Media messaging has an influence on our self-confidence, self-esteem and self-awareness, and can reinforce both negative and positive messages about sexuality.



ACTIVITIES

Activity A: Self-confidence and achieving our goals

Introduction: You will begin with a review of your goals, and then explore how your self-confidence, self-esteem and self-awareness influence your ability to achieve your goals.

1. You will start by having a quick check-in on the goal-setting you did in Grade 9.
 - What is a SMART goal?
 - What goals did you set last year? Were you able to achieve them? Did you have to re-set any because things changed (as often happens in life)?
 - How have you used SMART goal-setting since you learnt about it?
 - What sexuality education messages from Grade 9 do you remember?
 - If you are not sure what these messages are, then look at the end of the lesson.

Look at **Reading 10.1.2: Core Messages in** your learner books for the full set of core messages for Grades 7-9 and 10-12. What do you see as the links between sexuality education and achieving your life goals?

2. In Grade 9 you learnt that anyone involved in sexual relationships should use condoms correctly every time they have sex, to protect themselves and their partners from sexually transmitted infections (STIs) including, HIV - and unintended pregnancy.
3. In this lesson you will explore how self-respect as well as respect for others affects our romantic and intimate relationships and our ability to reach goals that we set for ourselves. Do the following:
 - a. Explain what you think it means to have good self-confidence by giving examples from your own life.
 - b. Give examples of how we have the power to influence each other's self-confidence in either a positive or negative way. Our relationships at school, home and in the community have the power to influence how we feel about ourselves. This happens through what we say, what we do, and what we communicate through our body language. Different relationships may affect us in different ways, and influence our ability to reach our potential.
 - c. Think about your own life and what may affect your self-confidence. Share your reflections with a partner.
 - d. Work in pairs. Look at the different types of relationships below:
 - **In romantic relationships** – whether the relationship includes sex or not
 - **At home** – with siblings, cousins, parent figures or elders
 - **At school** – with friends, peers, teachers, or in extra-mural activities
 - **In your community** – in clubs, choirs, volunteer groups or religious organisations
4. Brainstorm the meaning of each term (without looking at the possible definitions in the table): self-esteem; self-awareness and self-development.
5. Refer to **Worksheet 10.1.1: Things to help you in life**. Match each term with its definition. When you have completed this activity, review your responses together as a class.

In the next activity, you will identify ways in which you can build your own, and others' self-confidence.

Activity B: Media and its messages. What's cool, what's not?



Introduction: In this activity we will look at how the media influences the way we feel about ourselves.

1. When the teacher asks, identify all the icons for the different social media you are familiar with and use.
2. How do you think the media can influence your self-awareness, self-esteem and self-confidence? Give concrete examples that (a) have a positive influence or (b) have a negative influence.

Consider different media platforms:

- **Print Media:** Magazines, newspapers
- **Social Media:** Facebook, Instagram, Twitter, Snapchat , Youtube (music videos)
- **Mainstream media:** Television, radio
- **Educational Media:** Educational entertainment programmes
- **Adverts:** Billboards, television, radio, magazine (including alcohol and beauty products)

Share your ideas with the class.

3. In groups, choose a specific programme, advert or type of social media you would like to work with. Turn to **Worksheet 10.1.2: Messages we get from the media: group activity.**

Briefly share the main points discussed in your group on negative media messaging. You could also share the message/slogan you have developed with your classmates to help other teenagers feel good about themselves.

Activity C: Our strategies for self-confidence

1. Say what things you do, or experience, that makes you feel self-confident.
2. Turn to **Worksheet 10.1.3: Three important self-confidence boosters**. Three important requirements to boost our self-confidence include feeling appreciated, having skills, and being responsible.
3. Read the question in each box of the worksheet. Form groups to answer the questions. You will be assigned one of the following: (a) having skills, (b) feeling appreciated, or (c) taking responsibility in romantic or sexual relationships. Take notes of your ideas as a group. Discuss responses with the class.
4. You are also responsible for taking care of yourself both physically and mentally. Discuss how regular physical activity and exercise might affect one's:
 - a. body
 - b. self-esteem
 - c. self-confidence
 - d. ability to communicate assertively
 - e. emotions
 - f. school work
 - g. energy
 - h. ability to manage and control one's sexual feelings
5. How else can you take care of yourself positively in the items in the list above?



CONSOLIDATION

Go through the Key Points. Remember that you have looked at how our self-confidence, self-esteem and self-awareness affect our decisions and well-being, and how the media impacts how we see ourselves and our relationships.

Think about what you have learnt that relates to the Core Messages below:

Core messages

- I will choose if, and when, to have sex and when not to.
- To protect myself and others, I need to be honest and communicate well in romantic relationships.
- I want to be part of a community that stops gender harm and violence and creates safety and peace in its place



HOMEWORK

1. Reflection: You and self-confidence

- a. Think about a situation where you felt confident. What made you feel confident?
- b. Think about a situation where you did not feel confident.
 - What made you feel that way?
 - What can you do to feel more confident next time?
- c. Think about a time when you may have made someone else feel bad in a way that negatively affected their self-confidence. What would you do differently next time?

2. Physical activity log for one week

- a. Use the table below to keep a diary of the exercise you do for the week and how it made you feel. Reflect on how these activities influence your self-confidence, self-awareness and self-esteem.

My well-being: my physical activity log for one week					
	The physical activity I did	The time I spent doing physical exercise	The part of my body I worked on	The challenges I had	Positive effects I felt physically and emotionally
Day 1					
Day 2					
Day 3					
Day 4					
Day 5					
Day 6					
Day 7					

3. Start a private journal



Find a book you can use as a private journal. Write or draw your thoughts, experiences, goals and dreams that motivate you. It is freeing to be able to express ourselves by writing down our thoughts, feelings and experiences. You can go back to them again later as a reminder. You will not be asked to hand in your journal, and it will not be assessed. It is yours to keep in a private place.



ASSESSMENT

Do this assessment task after the discussion in Activity A.

1. Make your own notes on the class discussion on what SMART goals are so that you can record your own goals. SMART goals are referred to again in later SLPs.

Make notes on the following:

- Do you remember what SMART stands for? Write down one of the goals you set for yourself.
 - Did you achieve it or did you have to re-set your goal?
 - Have you used SMART goal-setting since you learnt about it?
 - Have you set one or two goals *this year* to make sure you develop yourself?
2. Wrap up the class by discussing the following:
 - How would you define self-confidence?
 - There are three very important parts to self-confidence. What are they?
 - Will poor self-confidence impact on how you achieve your goals? Give reasons for your answer.
 - How is self-confidence linked to making good decisions? Give reasons for your answer.



RESOURCES

READING 10.1.1: Factors that can affect self-confidence

Some suggestions on what affects self-confidence

Think about a time when someone (for example, a friend or romantic partner) made negative comments about your *physical appearance*. They might have said something about your height, weight, body shape, or another aspect of your body.

Or, they might have said something about your *character*, for example: "Why can't you be like so-and-so?", or "You're always so shy, it's irritating". They may keep reminding you of *something you did*, which is embarrassing for you and you would rather forget it. They may say things about your home or family that are hurtful.

If we took these types of destructive comments to heart, our self-confidence would be affected. This then affects all parts of our well-being. Self-confidence is like a shield. You can build it through loving yourself, believing you are special and unique and standing up for what you believe in.

If you are in a friendship or love relationship that is making you feel bad about yourself, it is important to rethink whether this is a healthy relationship, and whether to remain in it. It is possible that the person is trying to control you. This will affect your self-confidence. A partner in a loving relationship will not try to make you feel inferior. A loving partner in a relationship built on equality and mutual respect would want to build your self-confidence by helping you to recognise your strengths, and to feel good about yourself and your abilities.

READING 10.1.2: Core messages

Core message (7, 8 and 9)	Core messages (10, 11 and 12)
The safest choice is not to have sex.	I will choose if, and when, to have sex, and when not to.
You have the right to say “no” to sex in any situation.	I have the right to say “no” to sexual attention and sex at any time. I also have the responsibility to respect “no” for an answer.
If you choose to have sex, use a condom every time.	If we choose to have sex, my partner and I will use a condom correctly every time.
Stay faithful to one partner at a time to protect yourself, your partner and your community.	To protect myself and others, I need to be honest and communicate well in sexual relationships.
If you are having sex, get tested for HIV and other STIs regularly.	I respect my own and others wellbeing.
Both men and women are responsible for preventing pregnancy, HIV and other STIs.	I know my HIV and STI and general sexual and reproductive health status.
	My partner and I are equally responsible for preventing pregnancy, HIV and other STIs.
	I want to be part of a community that stops gender harm and violence and creates safety and peace in its place.

WORKSHEET 10.1.1: Things to help you in life

Match the term with the correct meaning

Self confidence	Self-esteem	Self-awareness	Self-development
a. When, little by little, you develop and strengthen your character, values and abilities	b. When you know and understand your own character and feelings	c. A feeling of trust in your own abilities, qualities, and judgement of people and situations	d. Confidence in your own worth or abilities; self-respect
Choose your answer			

WORKSHEET 10.1.2: Messages we get from the media: group activity

Messages we get from the media: group activity

1. What kind of message(s) does the media (for example, an advert or radio programme) send you about expectations in romantic relationships? How are these messages experienced by teenage girls and teenage boys, as well as those whose sexuality or gender may not fit with those messages? (for example, intersex, gay, lesbian, bisexual and transgender teenagers)?
2. How does the media you chose portray race, gender, sexual orientation and people with special needs? Consider these points:
 - a. Are people left out when relationship are portrayed in the media (for example gay people, people with disabilities, or particular race groups)?
 - b. Are certain groups of people shown in a stereotypical way?
 - c. What effect can the media have on one's self-confidence and self-esteem?
 - d. What should the media do differently so that it promotes respect for the uniqueness of ourselves and others?
3. **Action:** Create a message/slogan that includes *all* teenagers that will help them

WORKSHEET 10.1.3: Three important self-confidence boosters

There are many important parts to self-confidence. We're going to focus on only three. The picture shows that if one of the three falls or decides to walk away, self-confidence at the top wouldn't be able to stand up strongly anymore.



1. Develop your skills

- a. What skills do you already have that make you feel good about yourself?
- b. What skills would you like to get better at, or learn?
- c. What skills do you need for romantic relationships?
- d. What strategies can you use to develop those skills? (See glossary for a definition of strategies).

2. Feel appreciated

Would you say you feel more confident when you feel loved, accepted and when people listen to you and support you?

Being accepted as part of a group or a team or a club can give you good self-confidence. But you will know for yourself, in your heart and in your head, if that group is really good for your self-confidence.

- a. What skills do you already have that make you feel good about yourself?
- b. What skills would you like to get better at, or learn?
- c. What skills do you need for romantic relationships?
- d. What strategies can you use to develop those skills? (See glossary for a definition of strategies).

3. Take responsibility

When you make healthy decisions, and take responsibility for your actions, it can give you good self-confidence.

- a. Think of a time recently when you took responsibility for something you did.
- b. Even though it might have been difficult, especially if someone got hurt or something got broken, how did taking responsibility make you feel afterwards?
- c. If you are in a romantic relationship, or would like to be in one in the future, what would you want to take responsibility for? What responsibility would you want your partner to take responsibility for?
- d. What are the possible consequences of not taking responsibility for your actions?
- e. What strategies can you use to strengthen your bravery to take responsibility for your actions?



GLOSSARY

Appreciation: Recognising and valuing the qualities of somebody or something. When we *appreciate ourselves, we respect and trust ourselves.*

Consequences: The result of an action or of not taking an action. There are consequences for our actions and there are consequences when we could have taken an action but did not.

Respect: To admire someone for their abilities, qualities, achievements or status and position in society.

Self-awareness: When you are in touch with your strong points and your weaknesses. You know yourself well: your character and your feelings.

Self-confidence: Trusting one's own abilities, qualities, and judgement of people and situations

Self-development: When, in small or big steps, you develop and strengthen your character, values and abilities

Self-esteem: When you have an overall sense of confidence in your value as a human being.

Self-respect: To admire, appreciate, stand up for and take care of oneself.

Sexual orientation: A person's sexual identity in relation to the gender of the people the person is attracted to romantically and sexually.

Strategy: A plan of action to achieve something. For example, if you are sexually active, a strategy to avoid sexually transmitted infections (STIs), HIV and unintended pregnancy would be to use condoms correctly every time you have sex.

Uniqueness: Each person is one of a kind. We may have a lot in common with others but we each have our own lives to live. Nobody can ever be exactly like us. We are unique.

Well-being: The state of being healthy, confident and happy; when things are going well for you physically, emotionally, and spiritually, you have a sense of well-being.



Lesson 10.2

Understanding power.
Getting to share it.

Lesson 10.2

Understanding power. Getting to share it.

BRIEF LESSON SUMMARY

In this lesson, you will explore how power inequality in romantic and sexual relationships can harm people's physical and emotional well-being. The activities are designed to encourage critical thinking around power: the abuse of power and the democratic use of power. You will explore why people in unequal relationships have a higher risk of getting or passing on, STIs, including HIV; and are exposed to an increased risk of unintended pregnancy, and violence and abuse – or being a victim of it. They will see that equality in relationships is important for happy relationships.

KEY POINTS

1. We are taught gender roles. We learn them. Learning how to challenge gender norms is part of your identity formation. It is within your control, and is a necessary part of defining who you want to be.
2. We can define our own unique identities. We don't need to conform to traditional views on masculinity and femininity.
3. Stereotypes can be harmful. We can notice them and stop perpetuating them.
4. We can challenge people when they use harmful stereotypes which undermine a person's freedom to be accepted for who they are.
5. We can maintain our cultural, faith and other identities and still promote equality through our words, actions, behaviour and attitudes in everyday life.
6. Power can be used constructively and it can also be used destructively. How we use power in relationships is a choice.
7. All of us can take steps to ensure greater gender equality, which benefits everyone.



ACTIVITIES

Activity A: Gender socialisation - How we learn what society expects of us as males and females

Introduction: In the exercises that follow you will explore how we learn about gender roles and what society expects of us; why gender equality is important, and the power relations that exist between men and women.

The road of life: My personal journey

1. You are going to do a personal reflection, called **The road of life: My personal journey**. The aim of this reflection is to identify how and when we have been influenced in the way we see our role as boys and girls, and then young men and women.

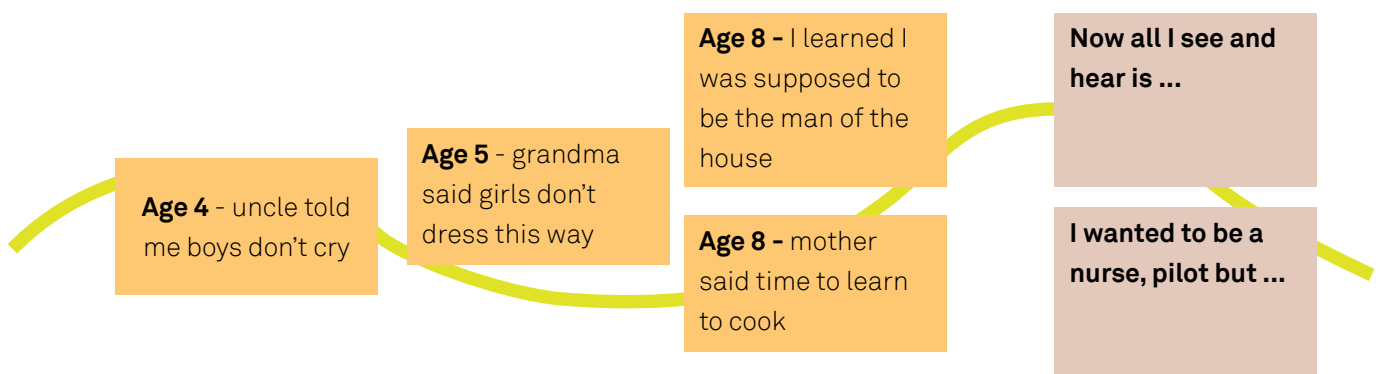
Listen and reflect on your experiences. While the educator reads a passage to you, follow the instructions.

WORKSHEET 10.2.1 The road of life: My personal journey

Listen to your educator read the following passage.

Think about your earliest memories as a child...Who lived in your home?...Which adults were most influential in your life?...How did you learn what is expected of you as a boy or as a girl?... How were you expected to dress?... To behave?...When was the first time you were told to act like a boy or man, act like a girl or woman?...What were you doing, and how did it make you feel?...What responsibilities did you have?...What did you notice about what you were expected to do, compared with what was expected from those of the opposite sex?...When did you start to understand what society expects of you as a student, as a provider, as a romantic partner?...What role did your friends have in shaping your identity as a young man or women...What role did your parents or other influential adults have?...How were you expected to behave in finding a life partner/husband/wife?...What roles are expected of you in that relationship?...Are you expected to have children?

1. Turn to **Worksheet 10.2.1: The road of life: My personal journey**. Use the space provided or extra paper and quickly write down as many things as you can remember from the exercise. Look at your list and number them in the order that they happened.
2. On your **Road of life** worksheet, write or draw the things that you feel had the most influence on your understanding and what was expected of you as a boy or girl, and later as a young man or young woman. On a timeline like the one below, note down your memories and approximately when they took place. Here are some examples:



3. When you have completed your timeline, turn to your neighbour and discuss the exercise for a few minutes. Did you note things that you have in common? What was different? Was there anything that was difficult or challenging for you when you did that reflection?
4. Think for a minute how a person who does not identify as the sex they were born with may feel. They may be a male but feel that they should have been born female, or vice versa. Or they may feel that they are both male and female. For people like this, there are likely to be conflicts between what people tell them, and how they actually feel. This will be discussed again shortly.

Stereotypes and gender equality

- Look at **Learner Reading 10.2.1: Gender Stereotypes: why they are important to understand** and the images that go with them. After you read the reading, discuss this question - how do you think gender roles and stereotypes affect equality and inequality?

Gender roles are changing. Give examples of how you have experienced changes in gender roles: Are men the only providers and protectors of families? What non-traditional roles are women playing? Both men and women face new challenges. For example, there are many different family structures in our country. How does this impact on gender norms in the home?

Sex and gender: Understanding the difference

- We use words like gender, gender power relations, gender roles and gender equality often. Many people, even experts, get the meaning of sex and gender mixed up. How do you understand the difference between sex and gender? You will see if you are on track from the information in **Reading 10.2.3: What is the difference between sex and gender?**

Recall what you were thinking after the **Road of Life** exercise – How does society impose certain norms and ways of behaving on us? Take note that people who have a different sexual or gender identity might feel especially uncomfortable with social expectations and stereotypes related to gender roles. How can we be supportive of those around us who may not fit the stereotype?

Activity B: Challenging gender stereotypes

Gender, stereotypes and power: some terms and definitions

- Get into your pairs and turn to **Worksheet 10.2.3: Gender, stereotypes and power: some terms and definitions**. Your task is to match the definitions in the right column with the correct terms in the left column.
- Review the correct answers together and ask any questions you may have.
- Note your ideas in your Learner books as you discuss the following as a class:
 - What do you think of when you hear the words *masculine* or *masculinity*?
 - What do you think of when you hear the words *feminine* or *femininity*?
 - Have you felt under pressure to behave in a particular way?

Power and gender in relationships

- Read the text in **Reading 10.2.2: What is power?** Take notes in your Learner books as discuss the following:
 - How might power in a relationship affect our ability to achieve our goals?Think of people you know, and discuss the following, without naming any names:
 - Describe a romantic or sexual relationship with unequal power.
 - Describe a romantic or sexual relationship with equal power.In what way can power relations affect our sexual and reproductive health?
- Do the exercise in **Worksheet 10.2.5: Challenging stereotypes and rigid gender norms**. Complete the personal reflection activity in the assessment section.



CONSOLIDATION

What have you learnt from the lesson? Do you feel that any of your beliefs or attitudes have been challenged? What do you view differently as a result of this lesson? Review the key points covered at the beginning of the lesson. Think about what core messages are particularly relevant for this lesson.

Core messages

- I want to be part of a community that stops gender harm and violence and creates safety and peace in its place.
- I will choose if, and when, to have sex.
- I have the right to say “no” and the responsibility to respect “no” to sexual attention and sex at any time and in any situation.
- I respect my own and others’ well-being.



HOMEWORK

Turn to **Worksheet 10.2.6 Gender roles and activities**. This exercise should be completed at home with members of your household. You could use the activity to start discussions at home about gender stereotypes, and how understanding gender stereotyping can help us to have better gender equality, and protect ourselves in our personal relationships.



ASSESSMENT

1. Make notes on the following terms discussed in **Activity A: power, power relations, masculinity, femininity and gender**.
2. In pairs follow the activity to consolidate discussion on stereotypes.

<p>Stereotype (generalising)³</p> <p>When you stereotype, you say that all people who belong to a particular group look the same or behave in the same way.</p>
<p>Give an example of stereotypes of:</p> <p>a. teenage boys</p> <p>b. teenage girls</p>
<p>What can we do to promote gender equality for teenagers?</p>
<p>If we have gender equality for teenagers, do you think it will help to reduce unintended pregnancies, sexual abuse, violence, and STIs, including HIV? Why? Why not?</p>

3 Adapted from: Carstens, M. Wolmerans, A. Verceuil, P., Zorich, C., Coetzee, T., Glover, J. (2012). Spot On Life Skills Grade 5 Learner’s Book ePub South Africa: Heinemann Publishers (Pty) Ltd.

3. Complete the following assessment task.

Question: What makes our gender identity? Complete the following table

	Biological factors (to do with the sex you are born with)	Social influences on the role you are expected to play in your family, school, community and society	The cultural or traditional beliefs and attitudes we are taught that influence our lives
Man			
Woman			
Intersex			

4. Personal reflection activity

This task asks you to reflect on what is important to you about gender equality.

Consider the discussions you have had about gender roles and norms, and the statement in the speech bubble in **Reading 10.2.1**. Quickly write down some actions you can commit to, in order to have greater gender equality in your life.



RESOURCES

WORKSHEET 10.2.1 The road of life: My personal journey

Listen to your educator read the following passage.

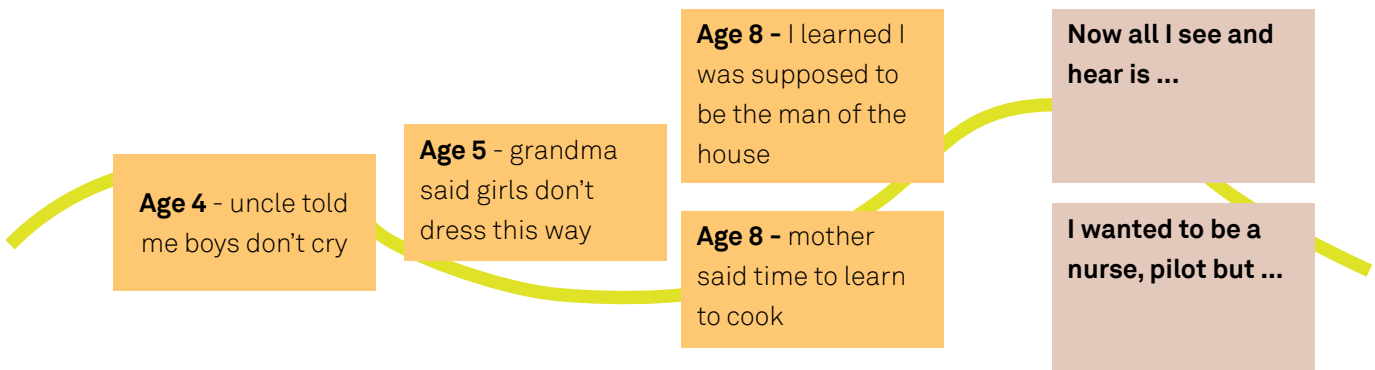
Think about your earliest memories as a child...Who lived in your home?...What adults were most influential in your life?...How did you learn what is expected of you as a boy or as a girl?..... How were you expected to dress?... To behave?...When was the first time you were told to act like a boy or man, act like a girl or woman?...What were you doing, and how did it make you feel?...What responsibilities did you have?...What did you notice about what you were expected to do, compared with what was expected from those of the opposite sex?...When did you start to understand what society expects of you as a student, as a provider, as a romantic partner? ...What role did your friends have in shaping your identity as a young man or women...What role did your parents or other influential adults have?...How were you expected to behave to find a life partner/husband/wife?...What roles are expected of you in that relationship?...Are you expected to have children?

1. After listening to the personal reflection, use the spaces provided, or extra paper, and quickly write down as many things as you can remember. Look at your list, and number them in order that they happened.

Things that have or have had an influence on me	

2. Write or draw the things that happened to you that you feel had the most influence on your understanding of what was expected of you as a boy or girl, and later as a young man or young woman.

On a timeline like the one below, list your memories and indicate approximately when they took place. Here are some examples:



READING 10.2.1: Gender stereotypes: why they are important to understand

The way in which we are taught how we should behave as a girl or as a boy usually reinforces the gender stereotypes in society and puts stress on all of us.



Unless we are able to challenge stereotypes about masculinity and femininity and assert our freedom and uniqueness, they may put a lot of unfair and unrealistic pressure on our personal and intimate relationships. In turn, this affects our sexual and reproductive well-being. For example, many adverts and music videos still show women as sex objects or trophies for men to conquer or possess.

When we consciously practise gender equality and respect in our relationships, we are doing the right thing because it means less fighting and more happiness. It also means we are building a new society that values peace.

WORKSHEET 10.2.2: Notes on masculinity and femininity

Make notes as your class discusses the following ideas:

- What do you think of when you hear the words *masculine* or *masculinity*?
- What do you think of when you hear the words *feminine* or *femininity*?
- Have you felt under pressure to behave in a particular way?

READING AND DISCUSSION 10.2.2: What is power?

Power is the ability or capacity to take an action or to act in a particular way that may influence the behaviour of others or the course of events. We can use power in a positive or a destructive way. For example, you can use social media to share motivational messages and you can also misuse it to shame someone about their body or about their choices. Each one of us has some power in every situation. We make decisions and choices as to how we use our power. We are responsible for our choices and actions.

Discuss: In what way can power relations affect our sexual and reproductive health?

Write some examples here:

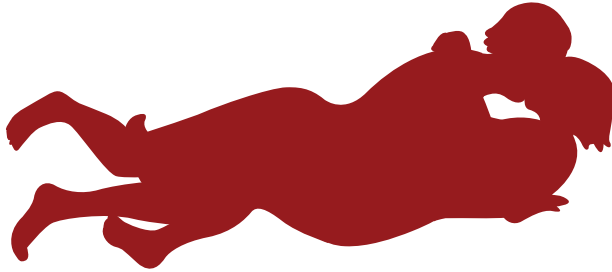
WORKSHEET 10.2.3: Gender, stereotypes and power: some terms and definitions

Match the definitions in the right column to the correct terms in the left column.

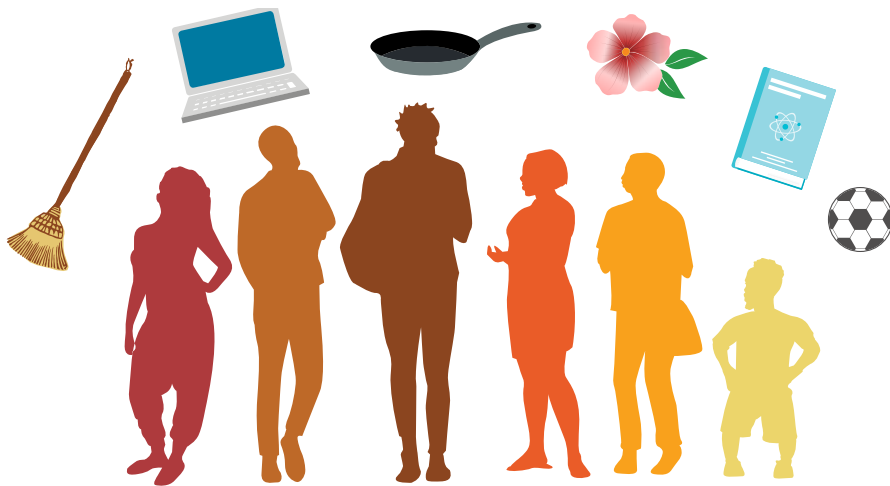
COLUMN A	Answer	COLUMN B
1. Femininity		a. Generalised statements, which can often hurt and cause harm, about a particular group of people.
2. Gender equality		b. Society teaches boys attitudes and behaviour that are considered appropriate for boys and men. These are traditional expectations of how boys and men should behave.
3. Gender norms		c. How power can be used positively or negatively between people, such as between rich and poor people, bosses and workers, educators and learners, parents/ caregivers and children, leaders and the people who voted for them.
4. Masculinity		d. A system that goes back to ancient times in most societies. It is a set of taught and learnt values in which it is accepted that boys and men can and should hold more power and control than girls and women. Power is held in different ways, including through status, ownership, financial means, traditional rights and responsibilities, decision-making and emotional control of others.
5. Patriarchy		e. Girls are taught what society expects of them. This includes the attributes, behaviour and roles that society values and expects of girls and women. This is reinforced by the media.
6. Power relations		f. Socially constructed characteristics of women and men – such as norms, roles and relationships of and between groups of women and men
7. Types of power in relationships		g. Families, schools and society- including the media -, teach us from birth to death how we are expected to behave and what we are expected to do, depending on whether we are boys or girls, or men or women. Some people, who do not meet these expectations, may identify themselves as LGBTQIA, and they are often stigmatised.
8. Sex		h. Generalised statements and ideas about roles and responsibilities for girls and boys, and women and men. Some generalisations cause hurt and harm.
9. Gender		i. Who we are emotionally, romantically and sexually attracted to.
10. Sexual orientation		j. We are born either male or female or intersex (with both male and female sex organs). This is our biology. Some of us are born male and identify as girls, and vice versa. They are transgender.
11. Stereotypes		k. The control that one person or people have over others can be physical, psychological, emotional, sexual, due to social status, financial/economic, to mention a few.
12. Stereotypical views of gender roles and responsibilities		l. When we treat people fairly and equally, regardless of whether they are a girl or a boy, or a woman or a man, or a transgender person.

READING AND DISCUSSION 10.2.3: What is the difference between sex and gender?

Sex (the verb): A physical act of sexual intimacy



Sex (the noun): Being born with male or female sexual reproductive organs. In the case of being intersex, a person is born with both male and female sexual reproductive organs.



Gender: After birth, our gender is determined by how families and society teach us to behave based on whether we are born male or female. Gender socialisation deals with expectations and roles and responsibilities we are taught. Boys and girls are usually socialised differently, which leads to expectations and pressures placed on them about their masculinity or femininity.



Sexual orientation: Who we are attracted to romantically and sexually. For example, if you are attracted to the opposite sex only, you are heterosexual. If you are only attracted to people of the same sex as you, then your sexual orientation is gay (men) and lesbian (women). Bisexual is when you are attracted to both sexes

WORKSHEET 10.2.5: Challenging stereotypes and rigid gender norms

Reflect on the discussions you have had about gender roles and norms, and the statement in the bubble. Write down steps you can commit to, in order to have greater gender equality in your life.



We don't have to follow the gender stereotypes we see around us and in the media

.....

.....

.....

.....

Steps I will take toward gender equality in my own life

.....

.....

.....

.....



HOMEWORK

WORKSHEET 10.2.6: Gender roles and activities

Complete the table below at home. You can do this with members of your family or household. Consider physical activities, responsibilities and chores, extra-curricular activities, and fill in each box. Use the assignment to start communication around gender related attitudes and expectations.

	Activities boys are expected to do	Activities girls are expected to do	Any positive or negative impact on the individual?	What can we change to promote gender equality?
Toys				
Home				
School				
Community				
Faith-based or other organisations you are involved in				



GLOSSARY

Femininity: Qualities and ways of behaving associated with being a girl or a woman. Girls are taught these qualities and ways of behaving by families, communities, religion, culture and society. From a young age, girls are told which behaviour is acceptable and which behaviour is not acceptable for girls and women.

Gender: The roles and responsibilities of men and women established by our families, our societies and our cultures. The concept of gender also includes expectations for our behaviour, our appearance and our abilities as women and men (femininity and masculinity).

Gender equality: Equal rights, responsibilities and opportunities for girls/women, boys/men, intersex and transgender people.

Gender inequality: The unfair or unequal treatment of people based on whether they are a boy or a girl, a woman or a man, intersex or transgender.

Gender norms: The ideas, values, attitudes and behaviour that we are taught from birth in our families, schools, society, including the media, based on whether we are boys or girls, or men or women. Transgender children, teenagers and adults are often stigmatised, as are people who identify as LGBTQIA, because they don't fit into traditional gender norms.

Gender socialisation: The way in which we are taught by society about what is expected of us as boys and girls, men and women. Gender socialisation begins at birth. We learn from what we observe and what we are taught. Our ideas about how to think and how to behave are influenced by our peers, families, adults, the media and the traditions we grow up in. This may include stereotypes which we can choose to reject, and norms that we do not have to follow when we do not agree with them.

LGBTQIA:

Lesbian: A homosexual girl or woman who is romantically/sexually attracted to other girls or women

Gay: A homosexual boy or man who is romantically/sexually attracted to other boys or men.

Bisexual: A person who is romantically/sexually attracted to both men and women

Transgender: Those of us whose gender identity does not match the biological sex we were born with. Transgender people may have hormonal or surgical interventions to change their bodies to gender identity with which they identify.

Queer: An umbrella term that includes all LGBTQIA people who feel they do not fit into any 'norms'

Questioning: A process in which an individual explores and tries to understand. The Q in LGBTQIA stands for Questioning and it means questioning one's gender identity and sexual orientation.

Intersex: People who are intersex are born with both male and female sexual organs. It is for them to be free to decide their own unique identity

Asexual: A person who does not have any sexual feelings or desires.

Masculinity: a set of masculine characteristics, behaviour and roles associated with being a boy or man. Boys are taught these by society, and these are reinforced by the media. Traditional expectations also influence ideas of how boys and men should behave.

Non-judgemental: Having an attitude or behaving in a way that does not judge the thoughts, actions, feelings, choices or decisions of others. Being non-judgemental means accepting that people who are different from us are equally free to be themselves.

Patriarchy: A social and political system that goes back to ancient times, which is based on the idea that boys and men should hold more power than girls and women in all aspects of life. This includes being seen as more important in society; having preferential rights in relation to property; financial transactions, and being afforded more rights and responsibilities than women in religion and culture.

Power relations: Control or influence between two or more persons. Power-sharing is the balanced use of power where individuals or groups respect one another and share power equally. Power relations that are unequal are seen in interactions between rich and poor people, bosses and workers, educators and learners, parents/caregivers and children, leaders and the people who voted for them. Power relations can be related to status, politics and material possessions, and they can also be physical, psychological, emotional, sexual, status and financial.

Sex, gender and sexual orientation:

Sex is biological. We're born either male or female or intersex (born with both male and female sex organs). Some of us are born male and identify as girls, and vice versa, which would make us transgender.

Gender is taught and learnt behaviour, usually based on our biology (whether we have male or female sexual organs).

Sexual orientation is who we are emotionally, romantically and sexually attracted to.

Stereotypes: Generalised ideas and statements about a particular group of people that can be hurtful and harmful.

Stigma: When groups of people in society condemn a person or a particular group of people and treat them in a negative way because of how they look or behave or because their life experience, they are stigmatising that individual or group. They could be people living with HIV, teenagers who get pregnant while still at school, or people who are from a particular ethnic, gender, economic class or race group.



Lesson 10.3

Gender, equality and
healthier relationships

Lesson 10.3

Gender, equality and healthier relationships

BRIEF LESSON SUMMARY

In this lesson you will explore ways to practise gender equality in relationships, starting with your family. You will discuss romantic relationships. You will then analyse how both equal and unequal gender power relations contribute to the risk of STIs, including HIV, unintended teenage pregnancy, and gender-based harm. Working in groups you will come up with ideas that promote gender equality in romantic relationships to present to the class. You will also go out and interview people at home and in their communities to get their views on gender relations

KEY POINTS

1. There are many things we can do to promote gender equality.
2. Relationships based on gender equality are often happier and healthier.
3. Gender equality requires support from both partners in a relationship, regardless of whether the partner is male, female or another gender identity.
4. When we practice gender equality, we can reduce unintended teenage pregnancies and STIs including HIV, and help to create a more peaceful society.



ACTIVITIES

Activity A: Gender equality and healthy relationships

Introduction: In this activity we will examine the effects of gender equality and inequality on our relationships, and how this influences our ability to protect ourselves.

1. Without looking at the description below, write down what the term *gender equality* means to you. Then, read this description of the United Nations (UN) Sustainable Development Goal (SDG).

“Gender equality is not only a fundamental human right, but a necessary foundation for a peaceful, prosperous and sustainable world. Providing women and girls with equal access to education, health care, decent work, and representation in political and economic decision-making processes will fuel sustainable economies and benefit societies and humanity at large.”⁴
2. Turn to the person sitting next to you and ask what she/he thinks a world with gender equality and no gender based violence would look like? Think about everyone who would benefit from living in a world like that. Complete the statement in the space provided in **Worksheet 10.3.1: Gender equality – what**

4 <http://www.un.org/sustainabledevelopment/gender-equality/>

it means to me. Read your descriptions aloud to the class. You can add to your descriptions throughout the lesson.

3. Form small groups and refer to **Worksheet 10.3.2 Thinking about gender equality in romantic relationship**. In your group you will analyse each specific protective needs. This will be done by looking at relationships where there is gender equality and relationships where there is less gender equality. Your group will be assigned two rows on the worksheet. Discuss and complete your portion of the table.

Share your group responses with the class. Complete the rest of the table as you listen to each other's ideas.

4. If we want to have healthier relationships, fewer unintended pregnancies and less HIV infection and intimate partner violence, we have to look at new ways of behaving and treating each other in our romantic and sexual relationships. Relationships with more equality, respect and sharing are happier and healthier.

Activity B: Understanding each other

Introduction: The aim of this exercise is to help one another to appreciate the challenges that others experience in relation to gender, and to find ways of being more supportive.

1. What does the English expression *to put oneself in someone else's shoes* mean? You should think about how you would feel if you are made to experience what someone else is made to experience, or how they would feel if the same thing was done to you. Empathy is to understand or appreciate what another person or group experiences or is experiencing as if it was done to you.

By putting ourselves in each other's shoes, we will explore what we need from each one another in order to have greater equality and healthier romantic relationships. Think back to your earlier discussion about equal and unequal relationships.

2. Divide into two groups of girls, and two groups of boys - or more if necessary. Look at **Worksheet 10.3.3: Whose perspective?** Each group will be assigned one question and you will have about five minutes to brainstorm your ideas.
3. After you have shared your ideas in your group, each group should be prepared to share their thinking with the rest of the class.
4. Note that we have all had the chance to consider what we need for healthier relationships, and what our partners need from each of us.



CONSOLIDATION

Reinforce your learning by going back and reading the key points of the lesson. Read the core messages for this lesson again.

Core messages:

- I want to be part of a community that stops gender harm and violence and create safety and peace in its place.
- I respect my own and others' well-being.



HOMEWORK

Assignment: Conduct a survey

The survey to be done in this **Homework assignment 1** covers topics from the three lessons that have just been completed (**SLPs 10.1, 10.2, and 10.3**). Review the survey and fill in your own views for **Person 1** on the survey form. You should have fun doing this exercise and enjoy talking to other people about your views on masculinity and femininity.



ASSESSMENT

1. The questions and group presentations in Activities A and B will be used as assessment tasks. Share your responses to the questions after your group discussions.
2. Homework Assignment 1 will be done as an individual task first, and then discussed in groups. Peer-assessment will be used to check responses on the survey.



RESOURCES

WORKSHEET 10.3.1: Gender equality – what it means to me

Gender equality is not only a fundamental human right, but a necessary foundation for a peaceful, prosperous and sustainable world. Providing women and girls with equal access to education, health care, decent work, and representation in political and economic decision-making processes will fuel sustainable economies and benefit societies and humanity at large.⁵

1. Write your own description of a relationship where there is gender equality.

In a relationship with gender equality ...

Why is this important to you?

⁵ <http://www.un.org/sustainabledevelopment/gender-equality/>

WORKSHEET 10.3.2: Thinking about gender equality in romantic relationships

In your groups, analyse each of the protective needs in the first column from the point of view of a relationship where there is gender equality, compared with one where there is gender inequality. Each group will complete at least two rows. Complete the list as other groups share their thinking.

Sexual and reproductive health action	What happens in a relationship with little or no gender equality?	What happens in a relationship with more gender equality?
1. Choose if, and when, to have sex and when not to		
2. Use my right to say “no” and the responsibility to respect other’s right to say “no” to sexual attention at any time and in any situation		
3. To protect myself and others, I need to be honest and communicate well in sexual relationships		
4. Use a condom every time my partner and I choose to have sex		
5. Use a method of contraception to prevent pregnancy		
6. Get tested for HIV and share the results with my partner		
7. Get treatment for both partners for a Sexually Transmitted Infection (STIs)		
8. Live positively with HIV		
9. Resist sexual and other intimate partner violence		

WORKSHEET 10.3.3: Whose perspective?

In groups, work to complete the question you have been assigned. Each group will have about five minutes to brainstorm ideas.

Whose needs?	Whose perspective?
What do I need from my partner to have a relationship that is more equal and safe?	
What does my partner need from me to ensure we have a relationship that is more equal and safe?	
What do I need from my partner to have a relationship that is more equal and safe?	
What does my partner need from me to ensure we have a relationship that is more equal and safe?	
(any other perspectives)	

HOMework



Homework assignment: Learning about attitudes by doing a survey

Instructions: What do you think? Fill in your own views for Person 1. Then ask two other people to answer the questions you ask and fill in for Person 2 and Person 3. When your form is complete, make notes at the end on your findings.

Survey on views about masculinity, femininity, gender roles and responsibilities									
Characteristics	Mostly men and boys			Mostly women and girls			Both		
	Person 1	Person 2	Person 3	Person 1	Person 2	Person 3	Person 1	Person 2	Person 3
1. compassionate and caring									
2. assertive									
3. protective									
4. the one to show sad feelings									
5. the one to show happy feelings									
6. nurturing									
7.the one to initiate a romantic relationship									
8. takes responsibility for using a condom for all sex									
9. able to cook meals									
10. able to change nappies									
11. able to play soccer									
12. able to play netball									
13. resolves conflict peacefully									
Write a short note about what you discovered from doing the survey:									



GLOSSARY

Femininity: A set of characteristics, ways of behaving and roles associated with being a girl or woman. Girls are taught these ways of being by society and the messages are reinforced by the media. Traditional expectations also influence ideas of how girls and women should behave.

Gender: Refers to the roles and responsibilities of men and women taught by our families, our societies and our cultures. The concept of gender also includes expectations of our behaviour, our appearance and our abilities as women and men (femininity and masculinity).

Gender equality: When we treat people respectfully, fairly and equally, regardless of whether they are a girl or a boy, a woman or a man, intersex or transgender, we are respecting gender equality.

Gender inequality: When we treat people unfairly and unequally based on whether they are a boy or a girl, a woman or a man, intersex or transgender.

Masculinity: Traditional expectations of how boys should behave, based on certain assumed characteristics, taught by society, and reinforced by the media.

Mutual respect: When two people demonstrate that they value and admire one another and respect one another's rights and points of view. Where there is mutual respect, people consider one another's feelings and rights.

Sustainable Development Goals: in September 2015, United Nations (UN) member states adopted 17 goals to end poverty, protect the planet and ensure prosperity for all. **Gender Equality is Goal #5.** More information can be found on the sustainable development website at <http://www.un.org/sustainabledevelopment/sustainable-development-goals/>.

Values: The moral principles and standards of behaviour that are important to us. Values can include things like: respecting oneself and others, taking responsibility for one's life, looking after one's emotional and physical well-being, creating a safe space for oneself and others, and choosing to be in happy relationships that enable us to be ourselves.

Well-being: a state of wellness. You have good well-being when things are good for you physically, emotionally, and spiritually.



Lesson 10.4

Social and environmental justice:
we can make a difference

Lesson 10.4

Social and environmental justice: we can make a difference

BRIEF LESSON SUMMARY

The lesson will present a young woman's true story for you to analyse in the bigger picture of HIV as a social justice and environment justice issue. The story teller has a cousin and aunt who are living with HIV. The story will help you to understand many of the challenges those of us who are living with HIV face, including stigma and self-stigma.

HIV and AIDS is a local and global issue. It is everyone's issue. It affects families, school, our economy, our leaders, our people, and our everyday lives. It is also a global issue, affecting millions of people around the world. The activities in this lesson will encourage you to think about what you can do at a personal level to stop stigma, and support friends and loved ones living with HIV.

It will also explain why it is important that we know our HIV status.

Finally, you will gain a critical thinking tool to apply to your sexual and reproductive health (SRH) in order to promote your own well-being and to be able to make good decisions around your SRH.

KEY POINTS

1. Matters of social justice are important to our health and well-being.
2. When circumstances are unfair or unjust, they increase our vulnerability and make it hard to both prevent health problems, and to get the care we need. This is especially true for SRH problems.
3. By accepting that we are all affected by HIV and AIDS in some way, we have a responsibility to understand each other's needs, support each other, and stand up against stigma, which is a social injustice.
4. It is important to know your HIV status. Starting HIV care and treatment sooner will better protect your own health and help you to prevent other infection.
5. Those of us living with HIV can have a long and healthy life as long as we stick to the medical treatment to reduce our HIV viral load.
6. Stigma and discrimination are born out of fear and ignorance. They destroy our efforts towards an HIV free world. We can learn how not to stigmatise. We can learn how not to bring ourselves down by stigmatising ourselves (self-stigma).
7. It is important to identify trusted adults and peers who you can go to for help and advice (go-to people).
8. When you are a critical thinker, you see social justice issues in a broadminded way that can motivate you to make a difference in the world around you.



ACTIVITIES

Activity A: Getting the picture about social justice and environmental justice

Introduction: This activity will define social justice and environmental justice and begin to explore the links between HIV and AIDS and social and environmental issues.



1. Turn to **Worksheet 10.4.1: What are social justice and environmental justice?** Look at the first illustration and answer questions (a – d). This will give you a definition of social justice and environmental justice. Work with the person next to you and discuss your responses in the large group.
2. Look at the definitions of social justice and environmental justice in your glossary, and think about whether you have any questions you want to ask.
3. Look at the second illustration in the worksheet and answer questions on the link between social justice and environmental justice, and SRH. Again, use the information in **Worksheet 10.4.1** to fill in any gaps. How can (a) poverty, (b) food security, (c) unequal access to basic resources, and (d) lack of basic services (like clean water and electricity), affect your SRH?
4. Finish the activity by answering the last question on the worksheet about local efforts to address social and environmental issues.
5. In the next activity, you will read a story that shows how HIV and AIDS are a social justice issue.

Activity B: Affected by HIV and AIDS – a teenager’s story

Introduction: In this activity, after reading the story of a boy who was born HIV positive, you will have a better understanding of what stigma is and the impact it has. Afterwards, you can explore ways to stop stigma.

1. Remember that in previous lessons the concepts of power, inequality and equality were explored. You learnt how important it is to treat each other with respect and as equals and not to stigmatise people for being different from us in some way.
2. Explain this statement: *Stigma is a product of fear.* You may use examples to describe what you mean. Discuss the relationship between ignorance and stigma.

3. Identify groups of people, and/or the types of problems for which people often experience stigma. What are some of the causes of stigma?
4. Look at **Reading 10.4.1: What stigma means and using our power positively to prevent it**. Read it aloud in class and discuss it.
5. Having correct information is the first step towards combating stigma, which thrives on ignorance and incorrect information. Refer to **Reading 10.4.2. HIV: Know the facts and prevent stigma**. There will not be time to discuss this information during this lesson, but read it later for yourself. It is critical that we understand this basic information so that we can support people affected by HIV and AIDS.
6. Read the story in **Reading: 10.4.3: Affected by HIV and AIDS – a teenager’s story**⁶ in your learner books. While you are following the story, make notes of anything you think has to do with (a) social or environmental justice, or (b) stigma and self-stigma, or (c) support and care.
7. Answer the following questions with your class:
 - How did the story make you feel?
 - What is *self-stigma*? Give examples.
 - Why does the cousin in the story stigmatise himself? How can he build his self-esteem?
 - Which support structure or support network assists the cousin when he feels depressed or angry? List your own **go-to** people in your notebooks.
8. Identify challenges people living with HIV and AIDS may face, based on this story, or others that you know.
9. Identify positive experiences you know of locally or globally that support people with HIV and AIDS. For example, your community may be very caring and supportive of those living with HIV. This is how it should be. Perhaps there are good medical services and organisations that work against stigma?
10. Why is it important for people to know their HIV status? What are the barriers to testing? What can help us to go for testing? Are there people or organisations that can help us decide about testing?

Remember that by accepting that we are all affected by HIV and AIDS in some way, we have a responsibility to understand each other’s needs, support each other, and stand up against stigma, which is a social injustice.

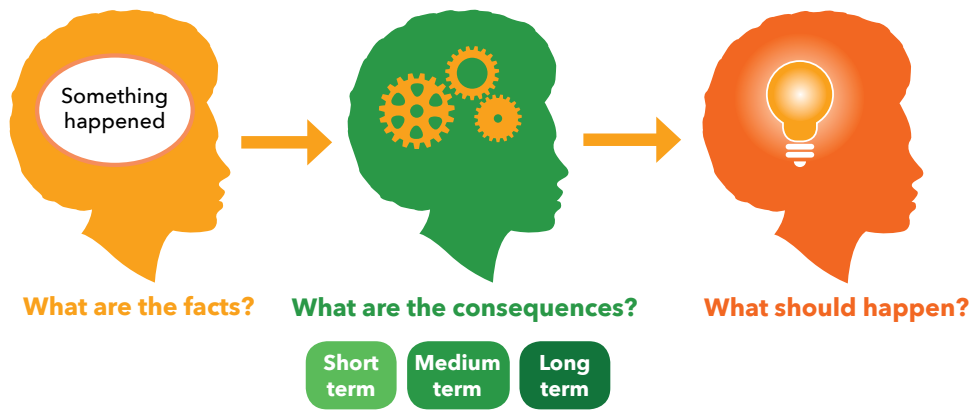
Activity C: Applying critical thinking

Introduction: In this activity critical thinking skills are used to enable you to analyse social and environmental issues and identify actions that can be taken. There are three important stages we need to follow to be critical thinkers. We need to ask: What are the facts? What are the consequences? What should happen?




1. If we follow this process, we will be able to think critically as we analyse social and environmental issues and identify actions we can take to improve the situation.

6 Soul City Institute for Social Justice. RISE issue eleven.

2. Look at **Illustration 10.4.1: Critical thinking for social and environmental justice**⁷



Use the story from the previous activity to apply the three main stages of critical thinking you see in the picture. Use the table below to help you explain each stage:

<p>Stage 1</p> 	<p>The speech bubble represents something that happened, or was said (the facts).</p> <p>What happened? For example, the cousin is born with HIV, sometimes he feels angry and does not take his medicine. He gets teased at school.</p>
<p>Stage 2</p> 	<p>The cogs represent our brain asking critical thinking questions like:</p> <p>What are the consequences? We need to look at short-, medium- and long-term consequences. Ask the main critical thinking questions: the 5 Ws and the H – Who? What? When? Why? Where? and How.?</p> <p>For example, the cousin is feeling angry and is being stigmatised. He does not always take his medicine, which will make him feel worse.</p>
<p>Stage 3</p> 	<p>These questions should lead you to a light bulb moment where you think in an enlightened way about what can, or needs to be done, about the situation</p> <p>For example, helping to educate the cousin’s classmates on HIV and AIDS could help them understand it better and stop them from stigmatising the cousin.</p>

3. What are some examples of SRH social justice issues you feel strongly about as adolescents? It could be that there is no youth friendly clinic nearby, or teenage pregnancy, or the challenge of accessing condoms without being judged. Form groups around the topics that have been identified. Follow the critical thinking process in your learner books to explore the topics.
4. Share your thoughts about the critical thinking tool with the class and discuss how you could use it in the future to think through a situation or a problem.

⁷ Adapted from http://edtechreview.in/images/what_is_critical_thinking.jpg



CONSOLIDATION

Why do you think it is important to think critically? What SRH issues do you need to think critically about for your own well-being and the well-being of your peers? What can you do to reduce stigma around sexual and reproductive health challenges? Why is it important to know our HIV status? To wrap up, consider the key points in this lesson, and the core messages below.

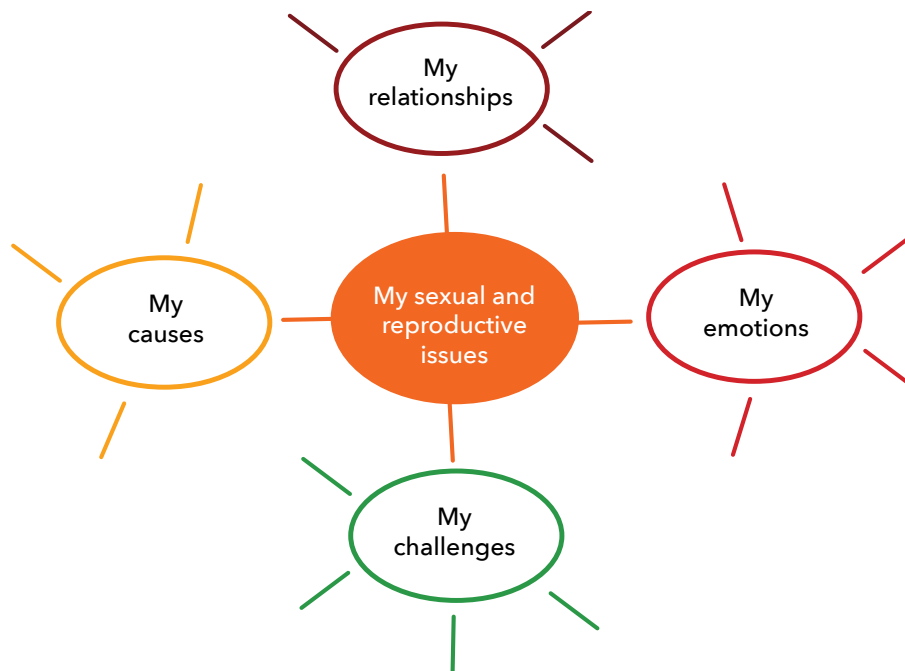
Core messages

- If we choose to have sex, my partner and I will use a condom correctly every time.
- To protect myself and others, I need to be honest and communicate well in sexual relationships.
- I respect my own and others' well-being.
- I know my HIV and STI status and the status of my general sexual and reproductive health.



HOMEWORK

1. Complete any remaining work from Activity C. Think about social justice and any social justice issues you feel passionately about. Write about them in your learner books.
2. Complete the mind map for yourselves reflecting on one example of what you have identified as a SRH issue. Get in touch with your emotions and map the issue. What causes the issue or problem? How does it affect your relationships? What are the biggest greatest challenges related to the issue or problem?





ASSESSMENT

1. Complete the individual activity at home. You may want to discuss your responses with a friend.
2. Use **Activity C: Critical thinking for social and environmental justice** and select an example of a social or environmental issue you consider important. Complete the critical thinking tool.

Do your own self-assessment of your responses. Your responses may be personal and you may not want to share them.



RESOURCES

WORKSHEET 10.4.1: What are social justice and environmental justice?



Instructions:

- What do the pictures in the illustration above represent and what are the linkages between the images in the picture?
- Using the illustration as a prompt, how would you define social and environmental justice?
- What types of social and environmental justice challenges are there in your community? What other pictures could you add to the illustration to describe these challenges?
- What are the links between social and environmental justice?



- How do social and environmental justice relate to SRH? Use the illustration above to help you come up with ideas.
- Name one organisation you know that is fighting for social justice and/or environmental justice in your community. What type of changes does the organisation want? How effective have their campaigns and other activities been in increasing awareness and taking action to combat social or environmental injustice? Have you been involved in any campaigns? If so, what role have you played? If not, how could you become involved as an active citizen?

READING 10.4.1: What stigma means and using our power positively to prevent it

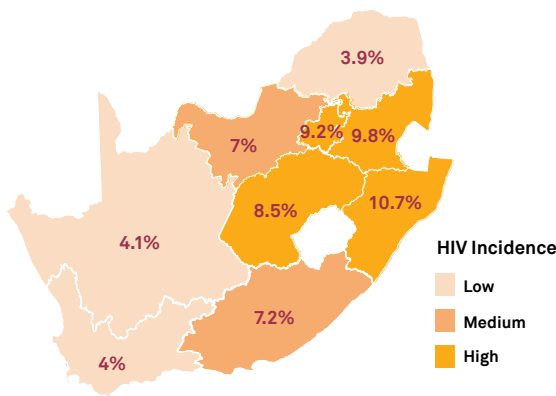
Stigma: Stigma is when society, or a large number of people, treats a particular group of people in a negative way because of how they look, a health condition, their living circumstance, an experience they have had, their religious or political beliefs, or for any number of reasons that they are found to be unacceptable. A person or a group of people experience stigma when they feel disapproved of, judged, excluded or treated differently because of who they are or their situation. There are many examples of people who experience stigma. People living with HIV, teenagers who get pregnant while still at school, or people with different gender or sexual identities are a few examples that are important to understand, in relation to SRH. Stigma is usually very hurtful and harmful, and it makes it hard for us to live in peace as a family, a community or a nation, and to get help if and when we need it.

Stigma is born out of fear and ignorance. We can choose to use our personal power to stop discrimination against individuals or groups of people. We can put an end to stigmatising ourselves (self-stigma) and others. We can stop the harmful impact of stigma by understanding, respecting and including people who are different from us. We overcome our prejudices by not being afraid of difference, and by getting informed about life circumstances, and by standing up to those who are too afraid to or refuse to understand. We can unite to make sure there is social and environmental justice for those of us living with HIV and AIDS, and for those who are affected by stigma for any other reason.

READING 10.4.2: HIV: know the facts and prevent stigma

HIV affects us all

The Human Immunodeficiency Virus (HIV) is a virus that is transmitted through unsafe sex (sex without correctly putting on a condom every time you have sex and with a partner). It can also be acquired by a baby when their mother is living with HIV and not on antiretroviral treatment. Drug users can get HIV when they share needles. Experts estimate that nearly 266,618 people were newly infected with HIV in South Africa in 2016.⁸



Source: SANAC, accessed January 18, 2019

Figure 3: HIV prevalence by province 2016

Although everyone who is having unsafe sex is at risk, girls and young women are getting infected at higher rates.⁹

Scientists have not yet found a cure or a vaccine for HIV. But the good news is that those of us living with HIV can live long and healthy lives if we follow the treatment consistently. There are many reasons why we should all know our HIV status.

8 Statistics South Africa [StatsSA], Mid-year estimates, 2016. Statistical Release P0302, Statistics, South Africa: Pretoria

9 Shisana, O., Rehle, T., Simbayi, L.C., Zuma, K., Jooste, S., Zungu, N., Labadarios, D., and Onoya, D. (2014). *South African National HIV Prevalence, Incidence and Behaviour Survey, 2012*. Cape Town, South Africa: HSRC Press.

We now know that treatment can also help to prevent the spread of the virus. When the person who is on treatment has reached viral suppression (the virus cannot be detected in their blood), HIV cannot be passed on. A person must remain on treatment to remain “virally suppressed”.

Those of us living with HIV can have safe romantic relationships as long as we use condoms every time we have sex, and adhere to our treatment. Both male condoms and female condoms, when used properly, prevent the transmission of HIV. The partner of a person living with HIV can use a treatment approach called PrEP (Pre Exposure Prophylaxis) – which is preventative medicine taken before having sex.

Safe conception (becoming pregnant) and safe pregnancy are also now possible for people living with HIV. It’s best for a couple to go together to a clinic for advice on how to protect each other and the baby.

Acquired Immune Deficiency Syndrome (AIDS) is not a virus. It is a combination of common and mostly curable illnesses your body can’t fight off if you are living with HIV and you haven’t gone onto antiretroviral treatment (ART).

READING 10.4.3: Affected by HIV and AIDS – a teenager’s story¹⁰

A teenager speaks about the sadness she feels for her cousin and her aunt who are both living with HIV and AIDS.

My aunt was infected with HIV in 1999. She did not know this, and in 2001 she had a little boy who was born with HIV. In those days, they didn’t get the proper treatment because there were no nearby clinics. They were ill all the time and used to live with us so that we could look after them. I am a year older than my cousin. Ever since I can remember, they have come to live with us during these times.



Anger

My cousin is 14 years old and he has so many questions. He feels it is unfair because his older siblings are not infected. He gets angry a lot and will then refuse to take his pills because he says it wasn’t his fault that he was infected. He also gets angry because he sometimes finds it difficult to concentrate at school when he feels tired. The people in his class then tell him he is stupid but I know he isn’t. I get worried when he gives up and doesn’t try his best.

My cousin and my aunt do not have a lot of money. My aunt sells chips and sweets next to the road to make money.

10 Soul City Institute for Social Justice. Rise magazine, issue eleven

Sometimes she forgets to go for counselling and support from organisations. When they live with us, when they are not well, my mother makes sure they go for counselling because she says it will help them to cope with their anger and to live a better life.

Love

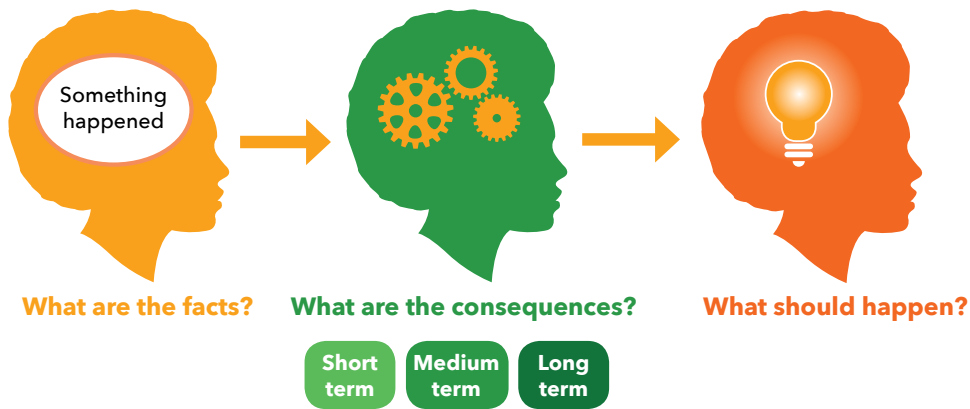
I love my cousin very much. He is like my little brother. I keep telling him that HIV is not the end of the world. I just feel so small and wish I could help my aunt and my cousin.

I often wish I had money so that I could pay for whatever it takes to treat them. That would make me happy.

Judgement

What hurts me more is when I hear people talking badly about HIV. I can see that it hurts my aunt and my cousin. My mother also gets angry because they are talking about her sister. I would like to tell the world not to speak badly about something you don't have and don't understand. Don't judge people. They did not know that they were getting infected. Treat them the way you would like to be treated. Make people feel good, do what is best for them.




ILLUSTRATION 10.4.1: Critical thinking for social and environmental justice¹¹



11 Adapted from http://edtechreview.in/images/what_is_critical_thinking.jpg

WORKSHEET 10.4.2: Critical social and environmental issues

Instructions: Think of examples of SRH that can be seen as a social justice issue. This may be the lack of a youth-friendly clinic nearby, teenage pregnancy, accessing condoms without being judged. Use the table to critically analyse the issue and identify actions to take. Write down your notes for each stage in the space in the table.

<p>Stage 1</p> 	<p>The speech bubble represents something that happened, or was said (the facts).</p> <p>What happened? For example, the cousin is born with HIV, sometimes he feels angry and does not take his medicine. He gets teased at school.</p>
<p>Stage 2</p> 	<p>The cogs represent our brain asking critical thinking questions like:</p> <p>What are the consequences? We need to look at short-, medium- and long-term consequences. Ask the main critical thinking questions: the 5 Ws and the H – Who? What? When? Why? Where? and How.?</p> <p>For example, the cousin is feeling angry and is being stigmatised. He does not always take his medicine, which will make him feel worse.</p>
<p>Stage 3</p> 	<p>These questions should lead you to a light bulb moment where you think in an enlightened way about what can, or needs to be done, about the situation</p> <p>For example, helping to educate the cousin's classmates on HIV and AIDS could help them understand it better and stop them from stigmatising the cousin.</p>



GLOSSARY

Critical thinking: The ability to think clearly and rationally about the actions you take, what you believe, and why. A person who thinks critically asks questions and develops opinions based on facts. For example: why do we have stigma and self-stigma? What happens because of it? Who does it happen to? Where does it happen? Why does it happen? When does it happen? How does it happen? Who causes it? And what can we do to change things for the better?

Empathy: The ability to understand and share the feelings of somebody else. We display empathy when we can imagine ourselves in someone else's life, dealing with their challenges as if they are our own. To be empathetic is to display empathy. For example, when a member of your friend's family is ill, you will try and understand how your friend is feeling and show that you care. Listening without judging or interrupting is important if one

Environmental justice: "All people and communities have the right to equal environmental protection under the law, and the right to live, work and play in communities that are safe, healthy and free of life-threatening conditions."¹² Examples include: clean and safe water and sanitation; air, land and waterways free of pollution and toxic materials.

Go-to people: The people we trust to help us work through plans, decisions and challenges. We trust them because we know they will say and do things that are good for our well-being.

Poverty: Economic poverty is when people do not have money to pay for basic services, decent housing medicines, playgrounds and parks, food and education.

Self-stigma: Self-stigma is when you judge yourself and hold negative feelings towards yourself. Feelings of shame, anger, hopelessness, or despair, often go with self-stigma.

Social justice: When resources and opportunities are equally distributed, regardless of a person's sex, sexual identity, race, ethnicity, religion, age, economic or health status, there is social justice. When people are able to fulfil their basic human rights as they are stated in the Bill of Rights in the Constitution, there is social justice.

Stigma: When groups of people in society condemn a person or a particular group of people and treat them in a negative way because of how they look or behave or because their life experience, they are stigmatising that individual or group. They could be people living with HIV, teenagers who get pregnant while still at school, or people who are from a particular ethnic, gender, economic class or race group.

12 <http://www.columbia.edu/cu/EJ/definitions.html>



Lesson 10.5

My changing life roles
and life goals

Lesson 10.5

My changing life roles and life goals

BRIEF LESSON SUMMARY

In this lesson you will identify the various roles that you have played from birth until now. You will reflect on how your roles and responsibilities might change in the future, and how relationships change too. You will examine how with sexual relationships you are responsible for protection, and how to prevent pregnancy and sexually transmitted infections (STIs), including HIV. You will identify different pressures in your life and come up with strategies that are conducive to your own well-being.

KEY POINTS

1. In our journey through life, we experience different roles which bring with them different responsibilities.
2. Think through what roles you may have, or may choose not to have, in the future (for example, not everyone wants to get married, and not everyone wants to have a baby). This will help you work out how you can handle each role and responsibility within the influences of your society and culture.
3. Think about and plan how to effectively handle pressures in your life: protect your happiness and well-being.



ACTIVITIES

Activity A: Reflecting on your changing roles

1. As we grow our roles in life evolve. For each new role there are different responsibilities. The first activity of the lesson will help you think about what your roles and responsibilities are now, and what they will be in the future. Get into pairs for the next exercise, and refer to **Worksheet 10.5.1: Speed interviews**.

Speed interviews

- a. Use the questions in **Worksheet 10.5.1: Speed interviews** to interview one another.
 - b. Take turns to be the interviewer or interviewee.
 - c. Add more roles and responsibilities if you wish.
2. After the speed interviews reflect on any new things you have discovered about the nature and responsibilities in each life role, now and in the future.
 3. You should have a discussion on the following questions and any other questions relevant to your life:
 - a. Are there any life roles that you have discussed that you would like for yourself?
 - b. Are there any life roles that you have discussed that you may never want for yourself?

- c. Do you feel that your parents or other adults in your life put pressure on you to take on certain life roles or responsibilities?
 - d. What other types of pressure do you experience in your life now (for example, from friends, your romantic partner, or from school)? Are these pressures positive or negative?
 - e. If you had to become a parent now, how would that change your life? What new roles and responsibilities would it mean for you? Would it be positive or negative?
 - f. How can you prevent an unintended pregnancy that may stand in the way of you achieving your full potential and your life goals and dreams?
4. It is important to always remember that you have the right to abstain from sex no matter what anyone else says, especially if you have not considered your own readiness for sex and the emotions and responsibilities that come with it. If you decide you want to enter into a romantic relationship, you should already know the responsibilities that are part of the relationship. For example, to treat each other with respect. As you begin to take on the role of partner with another person, you should prepare to make decisions about your life, including your sexual life, with your partner. It will be important for you to honour your partner's thoughts, opinions and hopes, and to expect your partner to do the same for you.

Activity B: How my changing life roles may affect my relationships

1. Refer to **Illustration 10.5.1: My changing roles mind map** in your learner books. Brainstorm some ideas about how you might write or draw your own mind map (**Illustration 10.5.1** can be used as template, or you can draw your own). You are free to include drawings and illustrations, or to decorate this page so it is unique to your life. You can use photos or other images of yourself or others for your mind map.
2. Take a few minutes to complete your mind map and then reflect together on what you have created. You can volunteer to share your mind maps with the class. Do the experiences that others share sound similar to your own? Discuss any common experiences or different experiences that you may have.
3. In this activity, you will explore how to handle such a romantic or sexual relationship effectively, taking into account society's influences, the influences of traditional gender norms, and the influences of our cultures. We are all going to face both encouragement and pressures. Some pressures are good. For example, to balance your life with sport or another type of exercise; to have a social life with friends; to spend time with family, or to focus on doing your best at school. Other pressures may be difficult to deal with or unwanted. You need to keep in touch with yourself, to be self-confident, and to do what feels right for you. This means avoiding pressures that are unhelpful or even harmful for you. We are all unique and different.
4. Look at the image below **Good Pressure, Bad Pressure**, in your learner books. Discuss these questions with the class:
 - Do you relate to any of the scenes in the drawing? If yes, which?
 - Are there scenes you would put in if you were the illustrator drawing your life's pressures, especially in romantic or sexual relationships? If yes, what scenes?



5. The lesson ends by focusing on the importance of identifying negative and positive pressures in romantic relationships. It is important to identify negative and positive pressures from partners as well as friends, and in our culture and society. Some sample questions are:
- Do you feel pressure by friends or society to play a certain role in romantic relationships? Is that positive or negative pressure?
 - Have you ever felt like someone you were in a relationship with was pressuring you to do something you did not want to do? If yes, how did that make you feel?

HOMEWORK

Refer to **Reading 10.5.1: Information on contraception** – this reading provides accurate information on different methods of contraception. If you are ready and have chosen to have a safe, protected romantic relationship, you will find this information helpful. It will also help you to plan for the future. Everyone should read it because even if the information is not what you feel you need right now, you might be able to help someone you care about.

Read the information for homework and think about how it applies to your life. Remember, to practise safer sex – safe from infection as well as pregnancy, and to consider your dual protection needs. You must use a condom correctly every time you have sex. Refer to the section that talks about both male and female condoms.



CONSOLIDATION

In consolidating the lesson, you should feel confident that you are well prepared to reflect on your roles now and in the future and to make good choices for your own and others' well-being. Go through the key points of the lesson and check the core messages.

Core messages

- I will choose if, and when, to have sex and when not to.
- If we choose to have sex, my partner and I will use a condom correctly every time.
- My partner and I are equally responsible for preventing pregnancy, HIV and other STIs.
- To protect myself and others, I need to be honest and communicate well in sexual relationships.
- I respect my own and others' well-being.



ASSESSMENT

Reading 10.5.1: Information on contraception provides important information on the choices you have to protect yourself from pregnancy as well as STIs, including HIV. Read through the information and prepare a concise leaflet with the information you think is most important to share with your peers who have not yet received information on contraception. Try the following template for your information leaflet.

Display your leaflet in a place that will remind you daily about the choices you have made about your reproductive goals.

Contraception is a choice!

<p><i>The safest way to protect yourself from pregnancy as well as from STIs like HIV is.....</i></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>	<p>I have set my life goals.</p> <p>I have set reproductive goals.</p> <p>I want a planned family</p>	<p><i>Hormonal contraception is</i></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p><i>Talk to your partner about using condoms and decide about.....</i></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>	<p><i>You can get your condoms from.....</i></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>	<p><i>BOTH boys and girls/men and women have a responsibility to prevent teenage pregnancy and the spread of HIV and other STIs.</i></p>

Test your knowledge

Write a letter to yourself about a significant relationship of any kind in your life. In your letter tell yourself about the different pressures you face. Which are good pressures? Which are bad pressures? Which are affecting your life in a positive or negative way? Tell yourself what you can do to build your self-confidence and achieve your goals.



WORKSHEET 10.5.1: Speed interviews

As we grow our roles in life evolve. For each new role there are different responsibilities. This activity will help you and your classmates think about what your roles and responsibilities are now and what they will be in the future.



Instructions: Interview a classmate about current and future responsibilities in their life roles and relationships.

1. Get into pairs with someone sitting close to you.
2. Use the questions below to do speed interviews in pairs.
3. Take turns to be the interviewer or interviewee.
4. Use the worksheet to guide you. Feel free to add in more life roles or relationships with their responsibilities.

Your life roles or relationships	Responsibilities now	Responsibilities in the future
Friend		
Learner/student		
Partner (romantic/intimate/sexual)		
Employer (for example business owner)		
Employee (for example working for a person or a company)		
Breadwinner		
Parent/caregiver/guardian		
Grandparent		
Other roles I'd like to play (e.g. leader, follower)		

ILLUSTRATION 10.5.1: My changing roles mind map

Instructions: Review the mind map below and think about how your changing roles affect your relationships. You may use the mind map as a template or start over and draw your own.



READING 10.5.1: Information on contraception

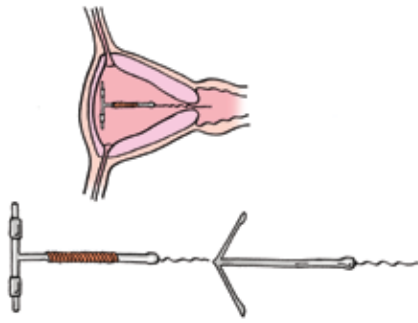


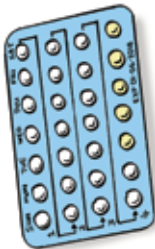


Many of you may consider having children at some point. All young people need to consider whether having children fits in with their lives. It is particularly important to consider your reproductive goals or intentions: Do I want to have children? How soon would I like to have a child? How many children do I think I want? How much time would I like and need between having children? Once you have decided to have children these are some of the questions to ask yourself.

You have a number of options for preventing pregnancy. Choosing a method should be based on your reproductive goals, as well as your needs for dual protection (protection from pregnancy as well as STIs). While condoms protect against pregnancy, many young women also want the protection of an additional method of contraception that they can control. Pre-Exposure Prophylaxis (PrEP) is a medicine which offers additional protection against HIV infection. A health worker can help you decide whether PrEP is right for you. Note that PrEP does not protect against pregnancy or other sexually transmitted infections.

Before you read further, here are a few things to keep in mind:

1. Having unprotected sex is likely to result in pregnancy: 9 out of 10 fertile adults will become pregnant as a result of unprotected sex.
2. The SAFEST choice is NOT to have sex: abstinence is the only 100% effective method for preventing pregnancy.
3. If you choose to have sex, the correct use of contraception can greatly reduce pregnancy.
4. Hormonal contraceptives (for example the pill or an injection) are a highly effective and very convenient means of preventing teenage pregnancy.
5. If you choose to have sex, USE A CONDOM EVERY TIME, for protection against HIV and STIs, EVEN if you are using another kind of contraceptive to prevent pregnancy.
6. BOTH boys and girls, men and women have a responsibility to prevent teenage pregnancy and the spread of HIV and other STIs.

ILLUSTRATIONS OF HORMONAL CONTRACEPTIVES

		
<p>THE INTRAUTERINE DEVICE</p> <p>The South African government is now making IUDs AVAILABLE at low- or no cost.</p>	<p>THE IMPLANT</p> <p>Implants are NOT commonly available for low- or no cost in public clinics in South Africa.</p>	<p>THE PATCH</p> <p>The patch is NOT available for low- or no cost in clinics in South Africa</p>
		
<p>THE PILL</p> <p>Birth control pills – generally Microval®, Triphasil® and Bafasil® – are AVAILABLE – often at no cost – in public clinics in South Africa.</p>	<p>THE INJECTION</p> <p>The injections – Nurlstrate® and Depo Provera® are AVAILABLE – often at low- or no cost in clinics in South Africa.</p>	<p>THE RING</p> <p>The ring is NOT available for low- or no cost in public clinics in South Africa.</p>

Contraceptive methods at a glance ¹³

Information for you to read and consider. Note that all of these methods are effective against pregnancy, but still require the use of a condom to protect you from infections.

What is it?	How do you use it?	More information
<p>The pill or “birth control pill” comes in a plastic or foil package of 28 pills.</p>	<p>A woman takes one pill at the same time every day. Once she has finished the entire 1st pack of pills, the woman is protected as long as she continues taking pills daily as directed.</p>	<p>The birth control pill is more than 99% effective at preventing pregnancy if taken every day and if a condom is used as well during the first month of taking the pills (before they've taken full effect). For many women the pill is convenient and allows for spontaneous sex. But to ensure you are safe from infections, always use a condom with the pill.</p> <p>While taking the pill, some women's periods are lighter, shorter and more regular with less cramping. The pill may protect a woman from other problems such as pelvic inflammatory disease and ovarian and endometrial cancer.</p> <p>Three types of birth control pills – Microval®, Triphasil® and Bafasil® – are widely available at low – or no cost in clinics and health centres in South Africa.</p>
<p>The IUD (Mirena or ParaGard): There are two types of intrauterine devices (IUDs). Both are small T-shaped devices; for example the Mirena is 32mm across and 36mm vertically.</p>	<p>An IUD is inserted into a woman's uterus by a healthcare provider. After insertion no further action is needed until the IUD expires in either five or 12 years.</p>	<p>Mirena® is a hormonal IUD which releases hormones to prevent ovulation. ParaGard® is a copper IUD. Copper produces ions which act like a spermicide, destroying, damaging or inhibiting the movement of sperm so they cannot join with – and fertilise – the egg.</p> <p>IUDs are more than 99% effective at preventing pregnancy. Mirena® (hormonal) provides protection for five years and the ParaGard® (copper) provides protection for 12 years.</p> <p>Some women prefer to use the IUD because after it is inserted they don't have to think about it for several years. It can be removed by a healthcare provider at any time and the user rapidly returns to her previous level of fertility after removal.</p> <p>The ParaGard® IUD can be used as emergency contraception if inserted by a healthcare provider within 120 hours (five days) after unprotected sex. It is 99.9 % effective, even on day five, and can be left in as ongoing birth control for as long as desired.</p> <p>The government is making copper IUDs more available at low- or no cost in clinics and public health centres. IUDs should also be used with condoms to ensure you are safe from infections.</p>

13 Department of Health, Republic of South Africa (2012). National Contraception Clinic Guidelines. Department of Health, South Africa.

What is it?	How do you use it?	More information
<p>The injection is an injectable synthetic hormone</p>	<p>Women are given their first injection during the five days of a normal menstrual period. An additional form of contraception is required for two weeks after this first injection as a precaution (a condom will serve this purpose and protect you from infections). A new injection is required every 2-3 months.</p>	<p>The injection prevents pregnancy in three ways: a) it inhibits ovulation by suppressing hormone levels, b) it inhibits the development of the endometrium, a lining of the uterus that is necessary for an egg to implant in the uterine wall, and c) it contributes to the development of a thick mucus in the cervix that makes it difficult for sperm to enter the uterus.</p> <p>The injection is extremely effective at preventing pregnancy – more than 99.9% – as long as a woman receives her injections on schedule. A woman can use the injection without the knowledge of her partner.</p> <p>Some women have reported modest weight gain, irregular or unpredictable periods, and a decrease in the amount of mineral stored in the bones (a possible risk factor for osteoporosis). A woman should check with her healthcare provider about any side effects or complications that she may experience given her personal health profile.</p> <p>Two types of injections – Nurlistrate® and Depo Provera® are available at low – or no cost in clinics in South Africa.</p>
<p>The patch is a thin plastic square that can be worn on the skin of the buttocks, stomach, upper outer arm or upper torso (but not the breasts).</p>	<p>A new patch is applied each week for three weeks. No patch is used on the fourth week.</p>	<p>The patch is more than 99% effective in preventing pregnancy when used correctly.</p> <p>A woman must remember to change the patch every week for three weeks, not to wear the patch during the fourth week, and to start the cycle again. Thus, the patch is convenient and allows for spontaneous sex, although it requires more care to use correctly than the pill for many women.</p> <p>The patch can lessen the bleeding and cramping of heavy or painful menstrual periods.</p> <p>While the patch may be available in some clinics and health centres in South Africa, it is not common and must be purchased whereas other methods of hormonal contraception can be obtained for low or no cost.</p> <p>Always use condoms with the patch to ensure you are safe from infections.</p>
<p>The ring is a soft flexible ring (about 5 centimeters in diameter) that a woman inserts into her vagina.</p>	<p>The ring stays in place for three weeks. In the fourth week, the woman takes the ring out for a week. She inserts a new ring after the end of the fourth week. The ring is not removed during sex.</p>	<p>The ring is more than 99% effective in preventing pregnancy when it is used correctly.</p> <p>A woman must remember to take the ring out after three weeks and insert new one after the fourth week.</p> <p>Although it requires more care to use correctly than the pill, for many women it is convenient and does not interfere with spontaneity in a sexual relationship.</p> <p>The ring can reduce the bleeding and cramping of heavy or painful menstrual periods.</p> <p>The ring is not yet widely available in South Africa. While the ring may be available in some clinics and health centres in South Africa, it is not common and must be purchased whereas other methods of hormonal contraception can be obtained for low or no cost.</p> <p>You will still need to use a condom with the ring to ensure you are safe from infections.</p>

More information	How do you use it?	What is it?
<p>A birth control implant like Implanon® is more than 99% effective at preventing pregnancy and provides protection for three years.</p> <p>Some women prefer to use an implant because it is always in place and they don't have to remember to take a pill each day, or to go on and off the method as with the patch and ring. An implant can be removed by a healthcare provider at any time and woman rapidly returns to her previous level of fertility after removal.</p> <p>Some women report irregular periods, spotting or no periods while using an implant such as Implanon®. A woman should check with her healthcare provider about any side effects or complications that she may experience given her personal health profile.</p> <p>While the implant may be available in some clinics and health centres in South Africa, it is not common and must be purchased whereas other methods of hormonal contraception can be obtained for low or no cost.</p> <p>Implants won't protect you from infections; you will also need to use condoms for sex to be safe.</p>	<p>An implant is a thin, flexible rod about the size of a matchstick. It is inserted inside the upper arm through a small incision after the patient is given a local anesthetic. After the implant is inserted no further action is needed to prevent pregnancy until the implant expires after three years.</p>	<p>The implant or Implanon® is a three-year method of birth control. A tiny rod of artificial hormone is put under the skin of the upper arm by a healthcare provider.</p>
<p>Emergency contraception is exactly that – something to use in an emergency. It should not be used as a regular form of birth control. The emergency contraceptive hormonal pill is 85% or more effective if taken within five days (or 120 hours) of unprotected sex. These pills are slightly more effective if taken within three days of unprotected sex. Emergency contraception is birth control - it does not cause an abortion and it is not the same as the abortion pill.</p> <p>It can take up to six days for the sperm and egg to meet after having sex, which is why pregnancy can be prevented even after unprotected sex. Emergency contraception pills keep a woman's ovary from releasing an egg for longer than usual and pregnancy cannot happen if there is no egg to join with sperm.</p> <p>It is normal for a woman's next menstruation period after taking an emergency contraceptive pill to be different from usual.</p> <p>A copper IUD can be used as emergency contraception if inserted by a healthcare provider within 120 hours (five days) after unprotected intercourse. An IUD used as emergency contraception can be left in as ongoing birth control for as long as the woman desires, up to 12 years.</p>	<p>“Two types of safe and effective emergency contraceptive methods are currently available in South Africa: hormonal, emergency contraceptive pills (ECPs) taken within 120 hours (5 days) of unprotected intercourse, the sooner the better; Cu IUD, inserted up to 120 hours (5 days) after unprotected intercourse.”¹³</p>	<p>The emergency contraceptive is used AFTER sex when other birth control methods may have failed, e.g. if a condom breaks or a woman realises she has missed pills.</p>

An 11-step learner guide to using male condoms correctly

Information for you to consider when you are making decisions about using contraception.

Step 1 Remind you of your values and goals.

Before you have sex think about your personal values related to sex, relationships, protecting your health and protecting your future. Remember that the health and future of your partner is also important! Make sure you are not feeling pressured to have sex and that the decision to have sex is really the right decision for you.

Step 2 Talk to your partner about using condoms.

- When you start having sex you have the right to expect that you and your partner use condoms. Before you have sex, discuss condom use with your partner and make an out-loud promise to protect each other by using condoms every time. This is critically important for both girls and boys.
- Do not wait to have the discussion about condoms in the middle of sexual activity. No one's judgment is clear in the "heat of the moment". Instead bring the topic up at a time when you can both have a calm and private conversation.
- Once you and your partner agree to use condoms both of you can carry out this decision together. Take turns buying them or buy them together, share the costs of paying for them, figure out together where to store them, and/or put them on together.
- If your partner will not agree to this, it should be a deal-breaker. Sex without a condom is NOT a good choice.

Step 3 Get a condom (in fact, get more than one)!

- You cannot use a condom unless you have one! Places you can get condoms include: health departments, public clinics, chemists, supermarkets, health-related NGOs and some taxis, shebeens and public toilets.
- Condoms should be made of latex or polyurethane and not of animal skin, which does not protect you from STIs. Avoid gimmicky or novelty condoms. These are usually not made for health protection.
- Some people say that they are embarrassed to go to a chemist or supermarket and buy a condom, but you are smart enough and have the assertiveness and communication skills to get past embarrassment. You know that using a condom is the right thing to do for yourself and your partner and much more important than any embarrassment you might feel.

Step 4 Store condoms in a protected place where you can easily grab one.

- You cannot use a condom if it is not within reach when you and your partner decide to start having sex. You are a lot more likely to actually use the condoms you have, if you can just reach for one rather than having to get up and go into the other room to get it.
- Some of the handiest places to keep a condom are likely to damage it, for example, in your wallet. The heat, pressure and abrasion put on a condom from you repeatedly sitting on your wallet can weaken it and increase the likelihood that the condom will break when it is used.
- Protect your condoms so they can protect you. Store your condoms in a cool, dry, protected place like a drawer in a dresser or night table, or in a box under your bed.



Step 5 Check the expiration date on condom.

- a. Do not use an expired condom. The latex of an expired condom is more likely to have broken down, making it more likely to break during use. It is also probable that an expired condom has been weakened by heat and wear-and-tear, making it more likely to break.



Step 6 Inspect and open the condom package carefully.

- a. Look over the package and make sure there are no punctures, tears, abrasions or other damage that might have affected the condom inside. When you are opening the package, be careful not to rip the condom by catching it on a fingernail or a piece of jewelry. If you think a condom might be damaged, throw it out and get another condom.
- b. If you use a lubricant, make sure it is water-based (e.g. KY Jelly, Playtex, Astroglide, etc.), NOT oil-based (e.g., cooking oil, Vaseline, baby oil, etc.).



Step 7 Pinch the tip of a male condom.

Once you have a male condom safely out of the package, pinch the tip as you position it over the top of an erect penis. By pinching the tip you are making sure that no air gets trapped inside it and you are creating an empty space for the ejaculate (semen) to go into. This will reduce the chance that the condom will break.

Step 8 Roll a male condom down to the base of erect penis.

Roll the male condom down. Do not pull on it! Roll it all the way down to the base of the penis so that it cannot slip off during sex. A condom can only roll down one way. You will know you have it on inside out because it will not unroll easily. If this happens, throw the condom out and use a new one because some pre-ejaculate will be on the side of the condom that would normally enter your partner.

Step 9 Be caring. Be safe.

Step 10 Withdraw penis immediately after ejaculation.

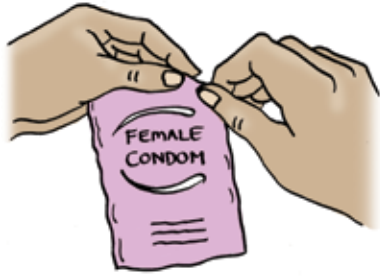
- a. Hold the condom at the base of the penis while withdrawing to make sure it does not slip off and leak semen into your partner. Do not wait to withdraw your penis from your partner. When you lose your erection and your penis gets soft again, there is a much greater chance that the condom will slip off and semen will leak into your partner.

Step 11 Dispose of the condom.

- a. Tie the end of the condom in a knot (so that semen does not leak out), wrap it in a tissue and throw it out in a private place. Do not throw condoms away in the toilet; condoms can clog toilets. Do not throw condoms away behind bushes or in the veld where young children might pick them up and play with them.



How to use a female condom



Step 1. Open the female condom package carefully; tear at the notch on the top right of the package. Do not use scissor or a knife to open.

Step 2. The outer ring of the female condom covers the area around the opening of the vagina. The inner sponge is used for insertion and to help hold the sheath in place during intercourse.

Step 3. While holding the sheath at the closed end, grasp the sponge and squeeze it with the thumb and second finger so it becomes long and narrow.

Step 4. Choose a position that is comfortable for insertion; squat, raise one leg, sit or lie down. Gently insert the inner sponge into the vagina.

Step 5. Place the index finger on the inside of the condom and push the inner sponge up as far as it will go. Be sure the sheath is not twisted. The outer ring should remain outside of the vagina.

Step 6. The female condom is now in place and ready for use with your partner.

Step 7. Be sure that your partner's penis is not entering from the sides between the sheath and vagina wall.

Step 8. To remove the female condom after use, twist the outer ring and gently pull the condom out.

Step 9. Wrap the condom in the package or in tissue and throw it in the garbage. Do not put it into the toilet.





GLOSSARY

Abstinence (from sex): to choose to not have sex. You can also abstain from other things like sweets or alcohol.

Adolescence: this is the stage of physical and emotional development that usually takes place between puberty and becoming a young adult. Although everyone is different, adolescence usually takes place between the later grades of primary school and the last grades of high school.

Negative pressures: When a person or a group of people persuade or bully somebody or a group of people into doing something that they don't want to do and is not good for them, they are using negative pressure. Negative pressures are pressures that are placed on us to make us do something that is bad for us. For example, to have sex when you don't want to or don't feel ready to have sex.)

Positive pressures: Encouragement or persuasion from an individual or a group of people to do something that is good for one. For example, you might be put under pressure to join a sports team or a choir, or to improve your marks at school, or to avoid a group of people who are engaged in risk behaviour. This is positive pressure.

Romantic/intimate relationships: Relationships that are loving and often physically close. They can involve kissing touching and hugging someone you are attracted to. A romantic/intimate relationship becomes a sexual relationship when sex is part of the relationship. It is important to be sensible, even if we are romantically involved with somebody. This means using condoms every time you have a sexual relationship, and with every partner, to prevent unintended pregnancy and STIs, including HIV.



Lesson 10.6

Understanding
sexual interest

Lesson 10.6

Understanding sexual interest

BRIEF LESSON SUMMARY

In this lesson you will review the physical, emotional and social changes that take place in puberty, and the changes most experienced in your transition through adolescence to young adulthood. You will have the opportunity to reflect on the changes you have experienced so far, and how these have made you feel, as well as the influence these changes have had on you. You will also get more information on reproductive health, including fertility awareness.

You will focus on sexual feelings, and clarify some common myths and misconceptions about sexual interest. You will get the opportunity to apply your learning to create a comic to illustrate points related to misconceptions, and to provide correct information about sexual feelings and interest.

KEY POINTS

1. Throughout adolescence we experience a range of physical, emotional and social changes as we move from puberty to adulthood.
2. Our physical changes can make us feel self-consciousness and affect our self-esteem. This does not need to be the case. When we have empathy and support each other we can make it a more positive experience for all.
3. Knowledge is power. When we have the correct information about sexual interest and feelings, we can better protect our own well-being and the well-being of people we might have romantic relationships with.
4. There are many myths and incorrect perceptions about sexual interest and sexual feelings. The media plays a big part in creating unrealistic expectations (for example through movies, music videos or pornography). When we understand this, and develop our capacity for critical thinking, we can have more self-confidence to protect our well-being. This includes protecting ourselves from negative peer pressure and unhealthy relationships.
5. If you want healthy romantic relationships, communication is important. Sharing your thoughts and feelings with a partner can be a wonderful way of building intimacy, affection, making decisions and having fun together.



ACTIVITIES

Activity A: Being me now

Introduction: This activity begins with time for reflection on the physical, emotional and social changes you have gone through during puberty, and then provides information on male and female reproduction, including menstruation and fertility awareness.

1. Read **Reading 10.6.1: Changing bodies, changing emotions** and then think back to early puberty. This might have been the time when you first started noticing changes in your body. Think about:
 - What types of changes you experienced (for example physical, emotional and social)?
 - What changes relate to a woman's or man's ability to have children (for example menstruation, sperm production, development of breasts, emotional and social readiness to have children, etc.)?
 - Can you remember things that used to make you feel self-conscious (for example when a girl has her first menstrual period, or when a boy's voice starts changing, or when you get your first pimples)?
 - How did this make you feel?
2. Turn to **Reading 10.6.2: Our changing bodies** to get more information on changes that happen during puberty.
3. The class will learn about the male and female reproductive system. Having knowledge about how our bodies develop and grow, will give us confidence to make good decisions related to SRH.
4. The educator will give you the following task:
 - a. Describe the journey of an egg once it gets released from the ovaries.
 - b. Describe the phases of the menstrual cycle. When is a woman most likely to get pregnant?
 - c. Describe the production and the journey of sperm.To do this, the class will be divided into three sections and each section will be given one of the tasks. You will be responsible for explaining the answer to your question.
5. Turn to **Reading 10.6.3: Female and Male Reproductive Organs** and read it with a partner, keeping the task in mind.
6. You will present the three tasks in the large group. To do this each group will appoint a volunteer to explain the information to the others, and anyone in your section can supplement with additional information to the class.
7. Why do you think it is important to know about reproductive systems and fertility?
8. Another change we experience as we go through puberty and become adults is sexual feelings. It is normal and natural to experience sexual feelings, and there are many ways of being intimate without having sex. Although young adults experience all kinds of emotional changes, including increasing sexual interest, sex is best delayed until you are in a mature, loving relationship.

Activity B: Understanding sexual interest

Introduction: This activity explores the normal human experience of sexual interest and feelings. You will explore many of the myths related to sexual interest, through a series of true and false statements. You will then create dialogues for some of these myths, including how to debunk them.

1. It is natural to have sexual relationships. Having incorrect information about sex can result in problems when one is in a romantic relationship. It is up to each of us to make decisions and choices for our well-being now and in the future. The class has already discussed how equality in relationships leads to respect and happier lives.
2. Refer to the **Worksheet 10.6.1: Sexual interest: get the facts** in your learner books. The educator will go through each statement and you should put up your 'true' or 'false' signs. When you have discussed each statement, write the correct answer in your book. When you have completed the activity, look at the answers and explanations in your learner books.
3. After you have gone through the table and cleared up myths and misconceptions, think about the following questions and discuss with the class:
 - a. What do you notice about society's messages regarding men's and women's sexual interest? How do they differ?
 - b. How can society's statements regarding men's and women's sexual interests affect unequal power relationships and gender based harm (including violence and emotional and physical harm)?
 - c. What can you do, as an individual and as a peer group, to challenge these harmful ideas or myths?
4. Work in pairs to make up your own words in the speech bubbles in **Worksheet 10.6.2: Bust a myth with a cartoon**. You will be allocated different myths from the activity you have just completed. Work in pairs. You are expected to make up your own dialogue to challenge the myth you have been allocated.



It is a myth that people with disabilities do not have sexual interest or enjoy intimacy.

5. Next, you will be invited to come up with ideas on how you can display your cartoons at school, so that other learners in the school can see them and discuss them.

Your educator will go through the homework with you.



CONSOLIDATION

In this lesson the class re-examined the changes that our bodies go through during puberty, and looked at information on male and female reproduction. Understanding the reproductive system will help boys and girls, men and women, make informed choices regarding their SRH. You have a right to say “no” to sex. A romantic relationship is built on trust and respect for one another’s sexual and physical well-being. You have a responsibility to respect a person’s wishes if they say “no” to you. Think through what you have done by looking at the key points, and identifying the core messages.

Core messages

- I have the right to say “no” to sexual attention and sex at any time. I also have the responsibility to respect “no” for an answer.
- If my partner and I choose to have sex, my partner and I will use a condom correctly every time.
- To protect myself and others, I need to be honest and communicate well in sexual relationships.
- My partner and I are equally responsible for preventing pregnancy, HIV, and other STIs.



HOMEWORK

Express yourself

Write a poem or a letter, or express yourself creatively in any way that you choose, responding to the questions below:

1. What range of feelings do you experience now compared to before you started puberty?
2. What have been the most significant changes you have experienced from puberty to the present – physically, emotionally and socially?
3. Is there a difference between how you feel now about sexual attraction and interest, compared to how you felt a few years ago?
4. What advice do you have for your younger self, or a younger sibling about these emotional changes?





ASSESSMENT

The cartoon speech bubbles will be used to assess what you understood about the concept of myths. Present your cartoons to the class. Discuss the cartoons and display them in the classroom.



RESOURCES

READING 10.6.1: Changing bodies, changing emotions

As our bodies go through physical changes in our journey to adulthood, our emotions are also likely to change. Sometimes we may become impulsive and act irrationally. Our body changes affect us hormonally and sometimes become too aware of these changes. This can affect our self-esteem as well. This is common if the change is something we think will attract unwanted attention, or cause embarrassment.

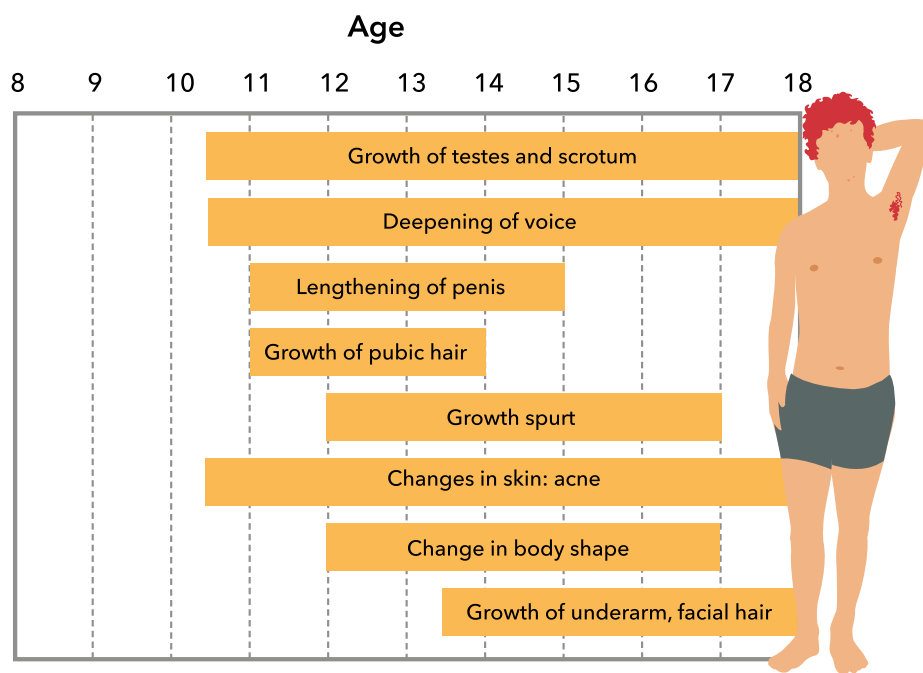
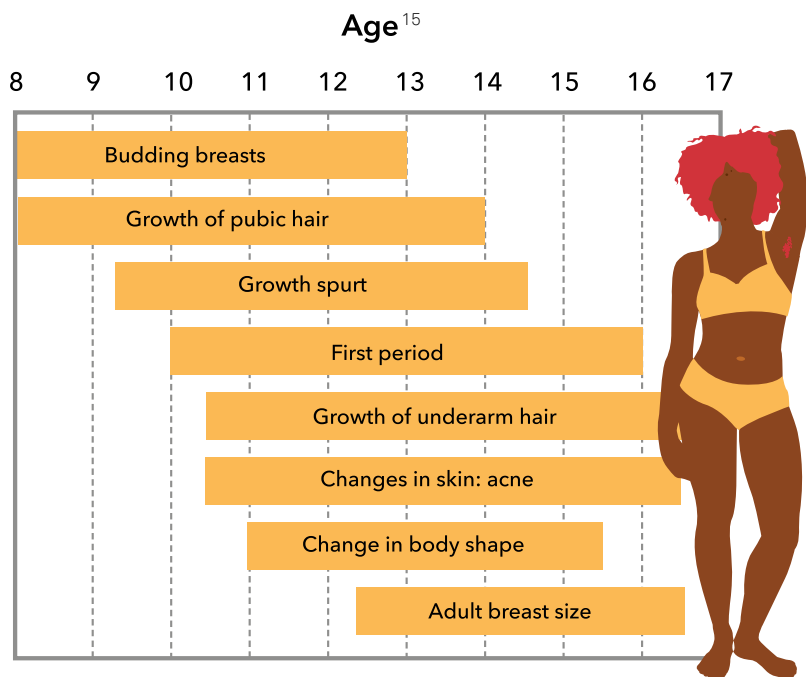
READING 10.6.2: Our changing bodies

We are all unique: our personalities, body shapes, sizes, likes and dislikes, and how and when our bodies develop are unique to us. It does not help to compare yourself with someone else, or to want to live someone else's life. You are you, and I am me. Let us respect ourselves and one another.

Is there a “right” time to develop?

The following diagrams show the average development of girls and boys through adolescence. Remember that this is merely a guide. If you develop earlier or later, it does not mean that something is wrong. We are all different, some boys or girls may suffer from acne whilst others may only have the occasional pimple. There is no ‘right’ body for a boy or girl. Each of us is unique and love starts with you loving and caring for your own well-being.¹⁴

14 Adapted from: <https://bwisehealth.com/article/bodies-are-different-whats-your-type>



15 Adapted from: <https://www.sciencenews.org/article/early-arrival> and <https://www.bwisehealth.com>

If you are female

Your body is going through many changes from the age of ten (or even earlier). You are becoming a woman. Your breasts are growing and you may have pubic hair and hair under your arms. You may have gone through a growth spurt and become taller. Your skin may also have changed and now you notice that you may get pimples. Sometimes these are noticeable when you are about to menstruate.

If you are male

Boys' bodies may develop later than girls. Your voice may “crack” or become deeper, muscles will get thicker and shoulders wider. Hair will start to appear on your face. You will get pubic hair. During puberty, your body begins to grow faster and you may feel uncomfortable growing pains in your arms and legs. How long these “growth spurts” lasts and how tall you’ll be at the end of it depends on a lot of things but mostly it has to do with how tall the other people in your family are.

Other changes you may notice

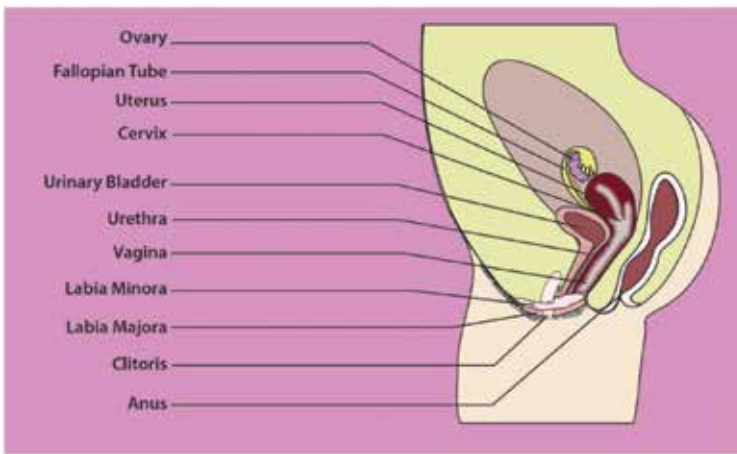
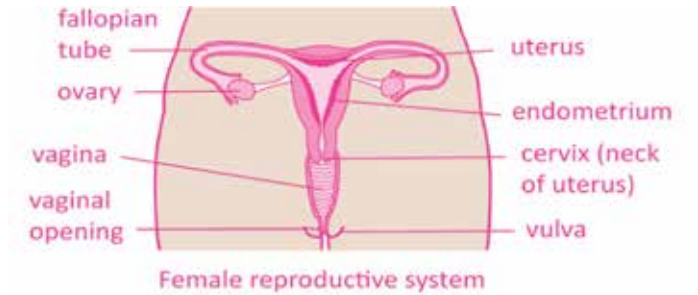
- You may start to get pimples on your skin.
- Your body smell can change and you may sweat more.
- The hair on your legs and arms may get thicker and darker.
- Boys will have more hair on their face and their body, and some girls may grow thicker hair on their arms and legs.

Gender and sex

The diagram above shows some common changes for young male and female bodies. How our bodies grow, and whether we identify as young women or young men, or are intersex (born with both male and female sexual organs), or transgender, is different for each of us. People who are transgender are born with a body that does not match how they feel about their gender. For example, a person could be born with a male body biologically but identify as a girl or a woman. Some people may choose to apply for medical counselling to find out about changing their bodies to match their sense of identity. It is important that people respect differences and honor the uniqueness in everyone.

READING 10.6.3: Female and male reproductive organs

Female reproductive organs:



Female reproduction

A girl is born with thousands of tiny **eggs** in her ovaries. When she reaches puberty, chemicals called **hormones** are produced which cause the eggs to be mature. About once a month an egg is released from the **ovaries** and travels down the **fallopian tubes** towards the **uterus**. In preparation for the egg the uterus forms a **lining of blood and tissue**. If it is fertilised by a man's sperm, this is where the baby will grow inside the woman's body. If the woman does not have sex, or uses protection such as condoms, the egg cannot be fertilised. In this case the blood lining and the egg will pass out of her body through her vagina during her **menstrual period**.

This means a girl has her period about once a month. It can take between **2 and 8 days** for all the blood to pass out. Sometimes a woman may not menstruate because of stress, or a change in diet. **If a woman is pregnant she will not bleed** because the blood remains in the body to cushion the fertilised egg.

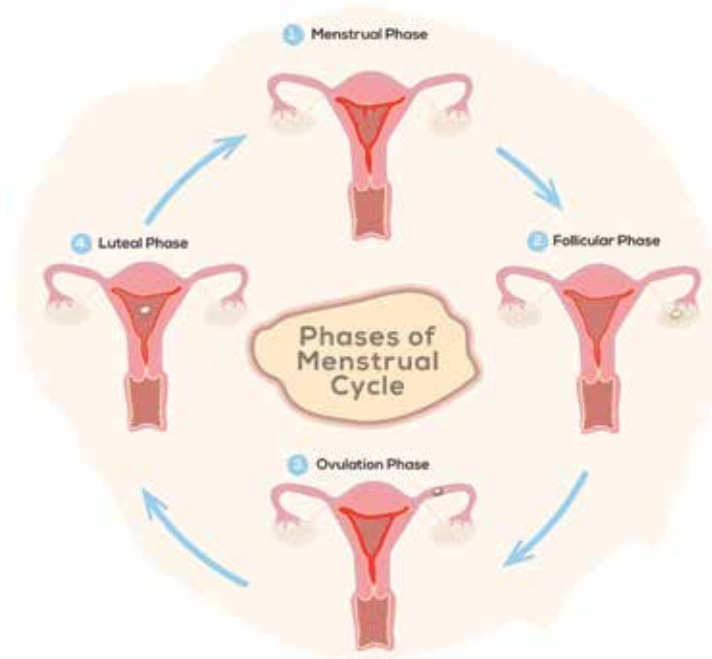
Girls develop at different times and so they start their periods at different times. Some may start at the age of nine, others not until 19. It will also take a while before the body has a regular pattern.

The menstrual cycle continues until the ovaries stop producing eggs. This is called the **menopause** and normally occurs after the age of forty-five but can be much later.

Phases of menstrual cycle:

The day count for the menstrual cycle begins on the first day of menstruation when blood starts to come out of the vagina. The average menstrual cycle for women is 28 days. The entire duration of a menstrual cycle can be divided into four main phases:

16



1. Menstrual phase (day 1-5)

Menstrual phase begins on the first day of menstruation and lasts till the 5th day of the menstrual cycle.

2. Follicular phase (day 1-13)

This phase also begins on the first day of menstruation, but it lasts till the 13th day of the menstrual cycle.

3. Ovulation phase (day 14)

On the 14th day of the cycle, the pituitary gland secretes a hormone that causes the ovary to release the matured egg cell into the fallopian tube. Assuming a 28-day cycle, the most fertile days are days 10 – 14.*

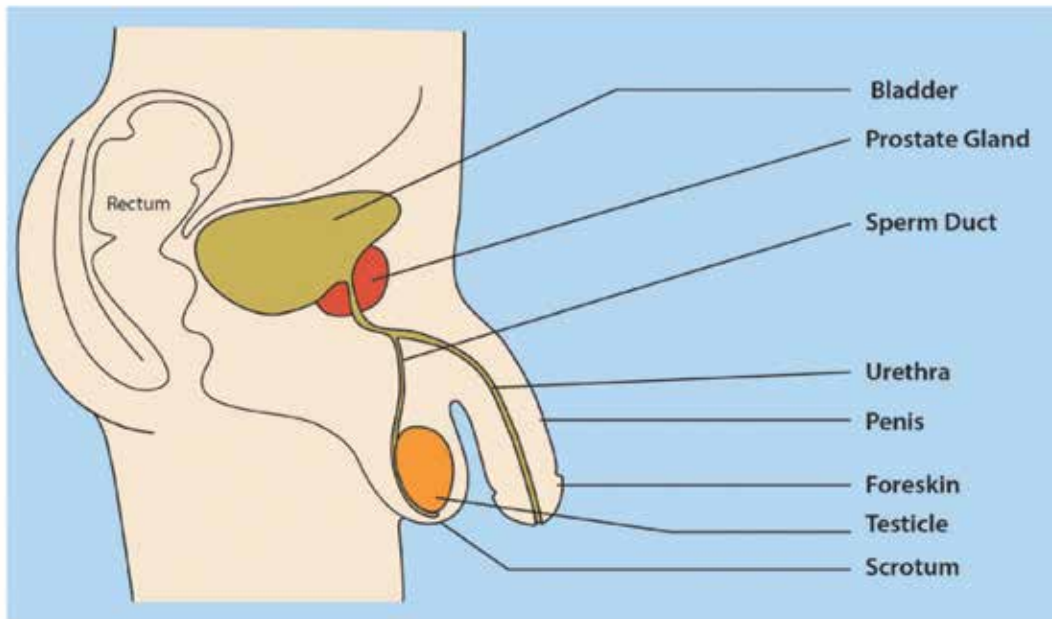
4. Luteal phase (day 15-28)

This phase begins on the 15th day and lasts till the end of the cycle.

*Many girls do not have a “regular” menstrual cycle until they are older, which means that it is not reliable to count on this alone for protection against pregnancy.

16 <https://www.menstrupedia.com/articles/physiology/cycle-phases>

Male reproductive organs:



Male Reproduction

The **penis** is normally limp and soft. However, when the male becomes sexually excited it gets stiff. This is called an **erection**.

Sperm, which fertilises a female egg, is produced in the two testicles which are inside the **scrotum** sac. Other fluids are produced in glands inside the male body. The mixture of these liquids is called **semen** and it travels through small tubes inside the body to the penis head.

The semen is released through the urethra which is also where urine is released from.

Male circumcision is when the foreskin is removed from the penis. There is evidence that male circumcision reduces the risk of heterosexually acquired HIV infection.

WORKSHEET 10.6.1: Sexual Interest – get the facts answer key

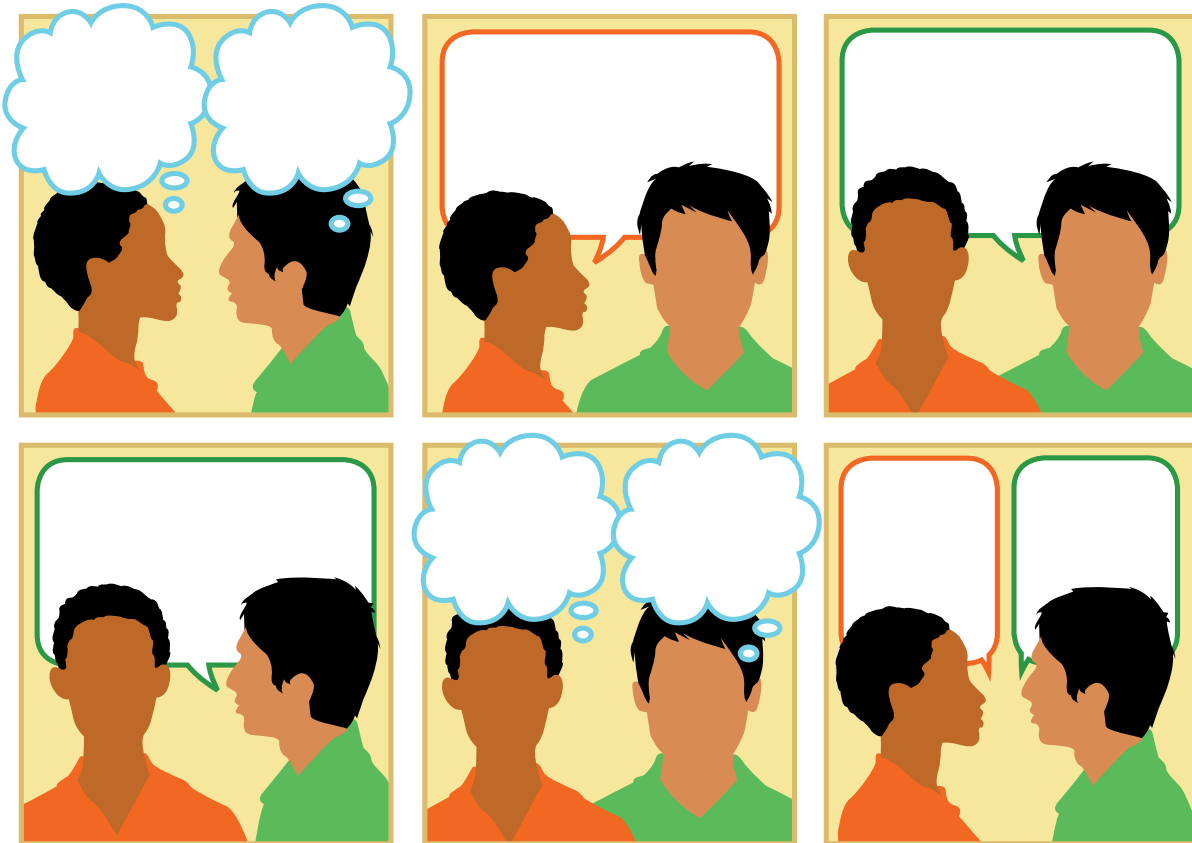
Learner worksheet: Sexual interest – get the facts¹⁷

Read each statement. Decide if it is true (T) or false (F). Mark your answer in the box on the right. T or F?		
		My answer: TRUE OR FALSE?
1	A person can feel sexual interest for someone he or she does not love.	
2	If you want sex, you have to have it immediately.	
3	Most girls and women do not really want sex.	
4	If a boy gets an erection, it means he wants to have sex. If a girl's vagina lubricates, it means she wants to have sex.	
5	Fear of becoming pregnant or getting an STI can affect sexual interest.	
6	Everyone's level of sexual interest can change over time.	
7	If you are male, you want to have sex all the time.	
8	If a man does not get an erection in a sexual situation, he does not desire the person he is with.	
9	Some medications affect sexual interest.	
10	People with disabilities do not have sexual interest or enjoy intimacy.	
11	It is normal for men not to want sex sometimes.	
12	If you have anal sex you cannot get HIV or AIDS.	
	Total correct answers out of 12	

17 Adapted from: https://www.popcouncil.org/uploads/pdfs/2011PGY_ItsAllOneActivities_en.pdf

WORKSHEET 10.6.2: Bust a myth with a cartoon

Instruction: You will be given a myth from the worksheet on sexual interest. What is the truth? Your task, with a partner, is to create a dialogue that challenges the myth you have been assigned.





Lesson 10.7

Our choices,
our decisions

Lesson 10.7

Our choices, our decisions

BRIEF LESSON SUMMARY

This lesson encourages positive decision-making strategies during the your natural time of experimentation and striving for independence. You will work with a story to help you think about your values and strategies, in order to make responsible decisions for your well-being.

The lesson focuses on responsible and protective decision-making in regard to sexuality and lifestyle choices, so that you can try their best to fulfil their personal potential. The story scenarios implicitly highlight and acknowledge how you, as adolescents, have to cope with change. It focuses on the importance of making decisions regarding sex before it happens spontaneously, and the importance of effective communication about sex. The lesson stresses the importance of having friends who share common values, rather than friends who exert negative peer pressure.

You will discuss throughout the lesson that everyone has the right to their own sexual orientation. Sexual orientation is not a decision or choice that one makes. One makes choices and decisions about sex.

KEY POINTS

1. When you pause to consider the consequences of your actions before you act, you are more likely to make choices and plans that will be good for your immediate and long-term well-being.
2. No one has the right to bully you into situations you do not want for yourself.
3. If you do find yourself in a situation you are not sure about, *freeze the moment*. This gives you space and time to think clearly and logically before making a decision.
4. Choose friends who share your values, support you in the pursuit of your goals, and help you to avoid risky social situations.
5. Support and respect your friends in the same way as you would like to be treated.



ACTIVITIES

Activity A: Swimming in the river

1. You might like to display the *myths and misconception* cartoons you completed for Lesson 10.6. Put your cartoons up on the wall, with your teacher's permission, and go over key points from the last lesson with the class. In this lesson you will apply critical thinking around possible consequences you may face, for certain actions you may take, and how you can use strategies to protect yourself from things that could harm you.
2. Grade 10 is an exciting and daunting time of life. Relationships are probably changing and it is natural to want to be independent, and to establish new relationships (possibly including romantic relationships) and to work out who you are and what you want to do with your life. It is normal for your body to be changing, and for you to feel sexually aroused. This can be exciting as well as scary at times. With each new stage of life, your roles will change, and so will your responsibilities. There are consequences for our actions. Now is the time to stop and think very carefully before doing something impulsive that could sabotage your goals and dreams for the future.
3. Refer to **Reading 10.7.1: Scene 1** in your learner books. Someone can read this aloud to the class.
4. Brainstorm together what kinds of risks you might face if you were in this scenario. Perhaps the current is too strong and you do not know how to swim well? Perhaps the water is not clean enough to swim in? Could the river be a place where friends go to do things they should not be doing, such as drinking or smoking?
5. Would you agree that **Reading 10.7.1: Scene 1** can be compared to the pressure we put on ourselves, or put on others, to have, or not to have sex? Give examples of some of the other peer pressures you could experience during this time of experimentation.
6. Look back at **Reading 10.7.1: Scene 1** and complete the endings prompted in the reading:
 - You decide that you will not jump in yet because...
 - Your response when friends pressure you is...
7. How prepared do you feel to find a balance between taking a risk and being safe? What are the most important things you need to do to keep your life on the track you have chosen for yourself and not to face negative consequences for your actions? In the next activity you will discuss strategies that you can use to make responsible decisions about sexuality and other lifestyle choices.

Activity B: Freeze the moment

1. You work in groups for this activity. You are going to focus specifically on identifying strategies to protect yourself from situations that could put you at risk of having sex when you are unprepared, or before you are ready to have sex, as part of a mature, long-term relationship. You will look at different kinds of scenarios where you could face risks and pressure. In groups, you will identify strategies to make responsible and protective decisions regarding sexuality, and lifestyle choices. These should enable you to fulfil our personal potential, and not to put our short-, medium-, and long-term goals at risk.

2. Read **Reading 10.7.1: Scene 2** in the class.
3. Refer to **Worksheet 10.7.1: Your freeze the moment strategies**. You will break up into groups and each group will be assigned one scenario to complete in the chart. You will work through the scenario described in **Reading 10.7.1: Scene 2**.
4. Work through these steps with the class:
 - a. **Freeze the moment:** What could happen? What are the risk factors, including for emotional and physical health in this setting?
 - b. **Strategy:** What can the person say or do AND what can friends say or do to protect you from risk and negative peer pressure?
 - c. **Values:** Does the strategy match with your values? Yes or no? How or how not?
 - d. **Core messages:** What Core Messages can help you in this setting?
 - e. **Peer review:** Could this strategy work in real life? Why? Why not?
5. Get into groups with the classmates around you. Your group will be allocated a scenario to work through.
6. Once you have completed it, you are welcome to come up with your own scenario.
7. Present your strategy to the class and your classmates will vote on whether it is a good strategy, or not, by giving a thumbs up or down. Evaluate the strategies presented by the different groups. Think of new strategies.
8. We need to develop strategies for dealing with various situations in our lives, including romantic relationships, it is important to incorporate our values, use our life skills such as self-control, and act on our right to protect ourselves. This means taking responsibility for our own actions, using critical thinking, and problem- solving, as well as being assertive.



CONSOLIDATION

Think over your strategies to help avoid situations where you could put yourself at risk. Risks could include being hurt emotionally, becoming a parent before one is ready, or getting HIV or other STIs. There are many risks you could face at this stage of your life. To consolidate this lesson, go through the key points at the beginning of the lesson, as well as the core messages below.

Core messages

- I will choose if, and when, to have sex, and when not to.
- If we choose to have sex, my partner and I will use a condom correctly every time.
- To protect myself and others, I need to be honest and communicate well in sexual relationships.



HOMEWORK

While this lesson will support you to develop strategies to ensure that you make responsible decisions regarding sexuality and lifestyle choices, sometimes you will need additional support. As homework, find one place within your community where you can go to get help regarding sexuality and lifestyle choices. Describe the place and the type of help you think you will receive there. You should write three to four sentences on this for homework.



ASSESSMENT

Do the written task on your own in **Worksheet 10.7.2** in **Activity B: Freeze the moment** as an assessment task. This will help you consolidate the facts dealt with in this activity.



RESOURCES

READING 10.7.1: Scene 1

Swimming in the river

The weekend has been boring and hot. You and a few friends decide to spend the day at the river. It is a long walk to the river but you are fit and healthy. Swimming sounds exciting and the cool water will refresh you. You ask if anyone has been to the river before but no one has. Before you leave for the river you and your friend make some suggestions that the group should think about before you leave.

You arrive at the river ready for a day of fun. The water looks calm and the tree is perfect for jumping into the river. You remember that your sister warned you to look before you leap. You realise that this may be good advice. You try to discuss it with your friends but some people are already jumping into the water and splashing. Some are daring you to dive in. It does look inviting but you are not sure.

- You decide that you will not jump in yet because...
- Your response when friends pressure you is...



READING 10.7.1: Scene 2

It is late in the afternoon. The grass next to the river is cool and soft. The slight breeze through the trees is soothing and life feels fun and exciting. You are lying next to someone you like. You notice that some of your friends are starting to kiss. You turn to look at the person next to you. You move closer and then you start to kiss. The kiss is warm and your body is reacting with excitement. You recognise that this may lead to the next stage. You are not sure what to do next. You did not anticipate your day at the river would lead to this situation.



WORKSHEET 10.7.1: Your freeze the moment strategies

Group work: Your freeze the moment strategies

Your group's task is to read the situation you have been allocated from the list. Use the table to take notes.

- a. Put yourselves in the situation. Consider what could happen.
- b. Come up with a good strategy for the person involved to protect themselves from risk and peer pressure by working through the questions in each column. Make sure the strategy aligns with the group's values and determine which core messages can help you in the setting.
- c. Be able to present your strategy in to the class if selected to do a presentation.

If not all the groups are able to do their presentations due to time constraints, your educator will set time aside after other lessons over the next few days. The class will vote on whether the group came up with feasible strategies by giving a 👍 or 👎.



<p>The Setting</p>	<p>Freeze the moment What could happen? What are risk factors, including emotional and physical health, in this setting?</p>	<p>Strategy What can you say or do AND what can friend(s) say or do to protect yourself from risk and negative peer pressure?</p>	<p>Values Does the strategy match with our values? Yes or no? How? How not?</p>	<p>Core Messages What core messages can help you in this setting?</p>	<p>Peer review What is your strategy going to be? Let's assess it and give it a thumbs up or thumbs down. Has it worked? Why? Why not?</p>
<p>Home alone with your 'babe' and things are starting to get hot sexually. You've not spoken to each other yet about having sex.</p>					
<p>At a party with friends. You fancy someone. Alcohol is flowing. You think having a drink or two will build your confidence to approach them.</p>					
<p>An older person starts flirting with you on your way to and from school. That person has money and promises to buy your things. You feel flattered.</p>					
<p>You have been involved with the same person for six months, and you have not had sex. Your friends keep asking whether you have done 'it' yet. You would love to. But your partner says he/she is not ready. How are you going to handle this in a responsible and respectful way?</p>					



GLOSSARY

Abstinence (from sex): To choose not to have sexual contact. Abstinence means restraining oneself from participating or indulging in something. A person may abstain from sweets or alcohol, for example.

Adolescence: This is the phase of physical and emotional development that takes place between puberty and becoming a young adult.

Celibacy: A voluntary choice not to engage in sexual activity.

Consequences: The results of an action that we take or others take or the results of not taking action.

Romantic/intimate relationships: These relationships can involve kissing touching and hugging someone you are attracted to physically and emotionally. The relationship becomes a sexual relationship when you have sex as part of the relationship. Use condoms every time, and with every partner, to prevent unintended pregnancy and STIs, including HIV.

Sexual arousal: When our bodies respond to being sexually stimulated, this is sexual arousal.

Sexual relationships: Relationships in which sex is part of the relationship. Not all sexual relationships are meaningful or long-term. The most important thing in any sexual relationship is to use condoms each and every time you have sex.

Strategy: A plan of action to achieve something. For example, a strategy to avoid STIs, HIV and unintended pregnancy if you are sexually active, would be to make sure you use them correctly every time you have sex.

Values: Ways of seeing the world and of being in the world that are important to you and make your life meaningful. Values can include things like: respect, taking responsibility, looking after your own well-being, feeling safe, and choosing to be in happy relationships.



Lesson 10.8

I know what I want

Lesson 10.8

I know what I want

BRIEF LESSON SUMMARY

In this lesson you will deepen your understanding of different styles of communication; for example passive, assertive and aggressive communication. You will examine the differences between these styles of communication. You will come to see the benefits of using assertive communication in different situations. You will be introduced to a tool to help you communicate assertively, and put it into practice by applying it to different sexual and reproductive health situations.

KEY POINTS

1. Communicate mindfully, for example:
 - a. Be aware of the difference between assertiveness and aggression when you communicate, and when you observe the way that others communicate.
 - b. Be aware of the difference between passive and active communication.
2. Knowing how to communicate assertively, and practicing it in everyday life, will help you build self-confidence and your own sense of empowerment.
3. The more we practise assertive communication tools, the better we get at communicating assertively. This will make us better able to act on our choices and decisions around our sexual and reproductive health.
4. Boys and men especially need to feel free to express their emotions so they do not bottle them up. We must all play a part in making this easier for boys and men as well as for girls and women.
5. Look after your emotional health and well-being by making sure you plan fun activities into your life.



ACTIVITIES

Activity A: Assertive communication

Introduction: In this activity learners will see passive, assertive and aggressive communication demonstrated in order to understand the difference between the different communication styles and to understand the effectiveness of assertive communication. They will identify situations in their lives with peers, friends, romantic partners, family members and at school when assertive communication is important. They will then look at a practical example and determine the type of communication being used.

1. Take note of this statement: *Your partner has been pressuring you to have sex for a while now. You are not ready but fear your partner will leave you if you do not.*
2. There are three different ways for you to respond to your partner in this activity. The task is to note the differences between the responses and determine which response will be the most effective.
3. The three demonstrations are of:
 - a. **Passive communication:** For example: “That seems like an interesting idea but I am not really sure.”
 - b. **Aggressive communication:** For example, “Would you stop harassing me about this? That is all you ever think about!”
 - c. **Assertive communication:** For example, “I understand that you really want to have sex but I am not feeling ready yet. I think we have a great relationship but let’s strengthen it even more first. We also need to talk about using condoms.”
4. What have you observed in the three responses? How would you describe the type of communication seen in each one? Which style of communication do you think is most effective?
5. The three communication styles are passive, aggressive and assertive communication. Turn to **Reading 10.8.1: Improving your communication styles** and read through it together. Ask questions and discuss anything you are unclear about.
6. Give examples of when you think assertive communication would be useful in:
 - a. peer relationships
 - b. friendships
 - c. romantic /intimate /sexual relationships
 - d. family relationships, including with siblings and cousins, and with parents and grandparents (elders)
 - e. school relationships (for example with teachers)
7. When both partners in a relationship use assertive communication on a regular basis, they will be able to maintain a healthy relationship. Assertive communication can protect you as an individual in different ways. It can help to protect you from aggressive people and sexual abuse, and it can help you to avoid STIs and unintended pregnancies. Being able to state clearly what you want and need will make you less vulnerable. Everybody benefits from assertive communication regardless of gender or sexual identity.
8. Refer to **Worksheet 10.8.1: Communication in an uncomfortable situation** and decide if the responses to the situation are passive, assertive or aggressive. Quickly review the responses with the class when you are finished working and consider the core messages in the scenario. These are given in the worksheet.

Activity B: Putting assertive communication tools into practice

Introduction: In this activity a four-step assertive communication tool is introduced and then put into practice by applying it to a variety of sexual and reproductive health scenarios.

1. Refer to **Reading 10.8.2: Four step assertive communication tool** and read through the steps to practise assertive communication. As you go through the steps, discuss examples of assertive communication.
2. Divide into groups and refer to **Worksheet 10.8.2: Handling situations using assertive communication**. Each group should take one of the sexual and reproductive health topics in the left column. The second topic on practicing safe sex is important for several groups to take. You will practise using the four steps to assertive communication for the situations provided. After you have practised in your groups, a few people should present one of the situations to the large group. You will do peer-assessments of the demonstrations. Review the criteria found in **Worksheet 10.8.3: Group presentations: assessment criteria**.
3. Each group must make sure everyone participates in creating the assertive communication, choosing how to present it to the class.
4. After your group presents everyone in the class will show their rating, (☺ = 2 ☺ = 1 ☹ = 0). You can volunteer to count and give the group a score.
5. Assertive communication takes practice, but with time, you will get better at it and find that it helps you express what is important to you, while being respectful of others. It is a skill that is necessary in all sorts of negotiations, from at home with your family, to being with a romantic partner. Assertive communication can give you more self-confidence as you find yourself speaking clearly about what you need and believe in – and obtaining – positive results.
6. Go through the homework activity.



CONSOLIDATION

The lesson started with defining passive, aggressive and assertive communication and ended with applying steps to become more assertive communicators, especially as it relates to SRH. As you become more used to using assertive communication, you will be able to respectfully state what you need and want. This will help you to protect yourself.

Look over key points and the core messages below.

Core messages

- To protect myself and others, I need to be honest and communicate well in sexual relationships.
- I have the right to say “no” to sexual attention and sex at any time. I also have the responsibility to respect “no” for an answer.
- I respect my own and others’ well-being.



HOMEWORK

1. After class, when you are in your community or at home, observe different styles of communication. Write down two examples of (a) passive communication, (b) assertive communication, and (c) aggressive communication. Make a note of how effective the particular style of communication was for the person or people using it.
2. Practise using assertive communication in different situations. Think about how effective it is compared to being passive or aggressive. Be prepared to share examples with the class.



ASSESSMENT

After the discussion in **Activity A: Assertive communication**, brainstorm ideas you have on assertive communication with your class. Your educator will put a clean sheet of flipchart paper on the wall in the classroom with the label: **Assertive communication**. Each learner can write up one point on the chart. You can do this when you feel ready and comfortable doing it. At the end of the activity there should be a comprehensive picture of what learners have understood from the content of this activity.



RESOURCES

Reading 10.8.1: Improving your communication style¹⁸

Assertive communication

Being assertive means that you express yourself effectively and stand up for your point of view, while at the same time respecting the rights and beliefs of others. Being assertive is an important communication skill.

Being assertive can also help boost your self-esteem and earn the respect of others. It is especially helpful for situations where you have a hard time saying no. Because assertiveness is based on mutual respect, it is an effective and diplomatic communication style. Being assertive shows that you respect yourself because you are willing to stand up for your interests and express your thoughts and feelings. It also demonstrates that you are aware of the rights of others and are willing to work on resolving conflicts.

Passive communication

If your communication style is passive, you may seem to be shy or too easy going. You may often say things such as: "I will just go with whatever the group decides". You tend to avoid conflict. Why is that a problem? The message you are sending is that other people's thoughts and feelings are more important than yours. When you are too passive, you give others the license to disregard your wants and needs.

18 Mayo Clinic (2017). Retrieved: <https://www.mayoclinic.org/healthy-lifestyle/stress-management/in-depth/assertive/art-20044644?pg=2>

Aggressive communication

If your communication style is aggressive, you may come across as a bully who disregards the needs, feelings and opinions of others. You may appear self-righteous or superior. Very aggressive people humiliate and intimidate others and may even be physically threatening.

You may think that being aggressive gets you what you want. However, it comes at a cost to you and to others. Aggression undercuts trust and mutual respect. Others may come to resent you, leading them to avoid or oppose you.

Learning to be more assertive

Behaving assertively can help you build your self-confidence and self-esteem. Practicing assertive communication can help you to understand your own feelings and reactions. It will improve your communication with others and earn their respect. It may even help you to have more open and honest relationships.

Learning to be more assertive can help you effectively express your feelings when communicating with others.

People develop different styles of communication based on their life experiences. People tend to stick to the same communication style over time and are often unaware of their own style. But you can change your communication style by being aware and learning to communicate in healthier and more effective ways.

Here are some tips to help you become more assertive:

- **Assess your style.** Do you voice your opinions or remain silent? Do you say yes to things even when you feel you should be saying no? Are you quick to judge or blame? Do people seem to dread or fear talking to you? Understand your style before you begin making changes.
- **Use “I” statements.** Using “I” statements lets others know what you are thinking or feeling without sounding accusatory. For instance, say, “I disagree,” rather than, “You are wrong.” If you have a request, say “I would like you to help with this” rather than “You need to do this.” Keep your requests simple and specific.
- **Practise saying no.** If you have a hard time turning down requests, try saying, “No, I cannot do that now. Do not hesitate — be direct. If an explanation is appropriate, keep it brief.
- **Rehearse what you want to say.** If it is challenging to say what you want or think, practise for the typical situations you encounter. Say what you want to say out loud. It may help to write it out first, too, so you can practise from a script. Consider role-playing with a friend or colleague and ask for honest feedback.
- **Use assertive body language.** Communication is not just verbal. Act confident even if you are not feeling it. Keep an upright posture, but lean forward a bit. Make regular eye contact. Maintain a neutral or positive facial expression. Do not cross your arms or legs. Practise assertive body language in front of a mirror or with a friend or colleague.
- **Keep your emotions in check.** Conflict is hard for most people. Maybe you get angry or frustrated, or maybe you feel like crying. Although these feelings are normal, they can get in the way of resolving conflict. If you feel too emotional going into a situation, wait a bit if possible. Then work on remaining calm. Breathe slowly. Keep your voice even and firm.

- **Start small.** At first, practise your new skills in situations that are low risk. For instance, try out your assertiveness on a partner or friend before tackling a more difficult situation. Pay attention to what works and adjust your approach as needed.

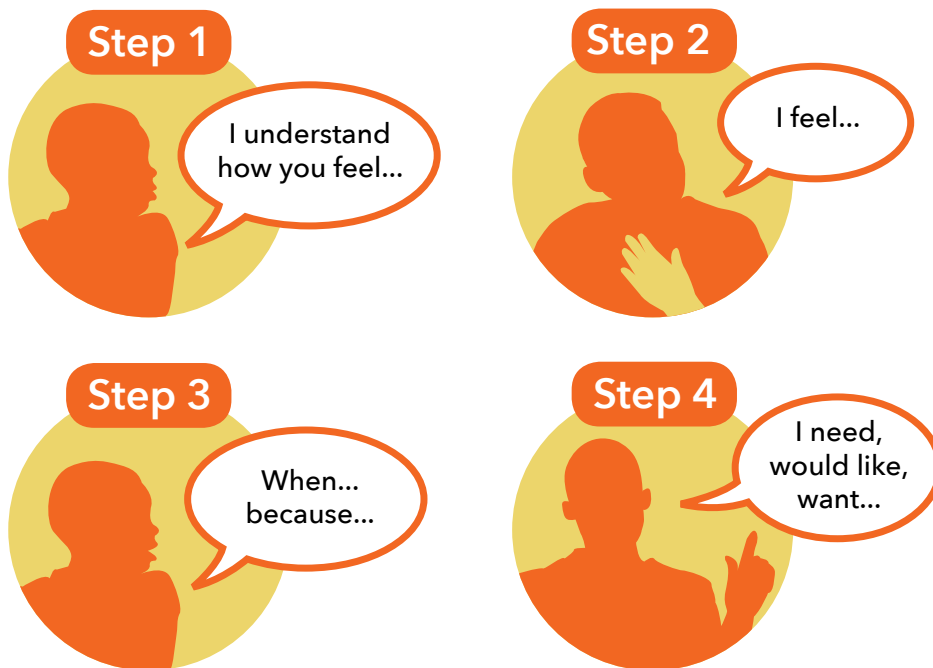
WORKSHEET 10.8.1: Communication in an uncomfortable situation

Instructions: Put a tick beneath the appropriate style of communication that describes the type of response given in this situation. Then answer the questions that follow the table.

Uncomfortable situation ¹⁹	Response	Aggressive	Passive	Assertive
A teenage boy and teenage girl are going to have sex for the first time. They do not have condoms. One of them says...	For all I know you have an STI!			
	I also want to have sex, but only if we use condoms. I know where we can get them.			
	Well, whatever...			

1. Which style of communication is most appropriate for the situation? Why?
2. Develop another possible response that would be effective in this situation.
3. Identify the core messages that relate to this scenario.

READING 10.8.2: Four step assertive communication tool



19 Adapted from: International Sexuality and HIV Curriculum Working Group (2009). *It's all one curriculum Volume 2: Activities For a unified approach to sexuality, gender, HIV and human rights education*. New York: Population Council.



Step 1: Make a statement of empathy. *Example of statement of empathy:* ‘I know you are really hoping that we have both reached the point where we feel ready for sex, but I’m not ready.’



Step 2: I feel ... Explain how you feel. *Example of how you feel:* ‘I feel frustrated when you ask me about when we will have sex, both when we’re together and when we’re texting.’



Step 3: When (or because)... *Example of when ... because:* ‘When you ask me about having sex I feel that you have not taken me seriously. I feel that we should wait before we have sex because I feel that we are not emotionally ready.’



Step 4: I need/would like/want *Example of I need/would like/want:* ‘I want you to stop making me feel guilty because I don’t want to have sex.’

Assertive communication tools

We are using a communication tool that will help us make ourselves clearly understood and respected. This is called being assertive. You are being assertive when you clearly state what you want or need. Being assertive is different to being aggressive which often leads to anger and verbal or physical violence.

More about the tool

You can use these four steps to try to get someone to listen, understand and respect where you stand on something. Using a respectful tone and staying calm will help you be more successful in expressing yourself and reaching a positive outcome. These steps will not necessarily work every time, but with practice you will become better at it. Using this tool will help you understand and achieve what you want in a relationship.

Do you ever feel guilty or embarrassed when you say “no”?

When one person in the relationship has more power, the other person often believes their needs are less important, and that their job is to please the other. This is particularly true because of gender inequality, but it occurs for other reasons as well. Boys and men, as well as girls and women experience this. Regardless of the reason, this is not healthy for either partner.

It is important to acknowledge that adolescent boys and men also experience feelings of guilt or may be embarrassed. Society often stresses that men need to be brave and not show emotions. That is not true. There is often pressure for peers to have sex in order to be a man. You have to figure out for yourself who, and how, you want to be.

The four assertive steps should be used when we feel uncomfortable or when we do not want to be pressurised into doing something we do not want to do. Once we begin practicing this skill, our self-confidence will increase and so will our self-development.

WORKSHEET 10.8.2: Handling situations using assertive communication

Instructions: Let us practise using the four steps to assertive communication for the situations provided below. Work together in your groups. Then choose two people to demonstrate what you have discussed.

Topic/Situation	Examples of situations
<p>1. Readiness for sex/abstinence</p>	<p>a. Your partner wants to have sex as part of your relationship. You do not. You want to delay sex until you are older. You both respect and care about each other and want to keep the relationship. Chat with your partner about ways you can both show affection towards each other without having sex.</p> <p>b. Many of your friends are sexually active but you are not. They tell you to “be a man” and joke that maybe you do not like girls. Tell your friends about the romantic relationship you have with your partner and why abstinence is the best choice for you right now.</p>
<p>2. Practicing safe sex</p>	<p>a. Tell your sexual partner you will only have sex if you use condoms every time, and why.</p> <p>b. Your partner tells you, “It is against my beliefs to use condoms”. How do you respond?</p> <p>c. Your partner tells you, “I am clean. I do not have any diseases”, when you say you want to use condoms every time you have sex. How do you respond?</p> <p>d. Tell your sexual partner you believe contraception is both of your responsibility and you want to go to the clinic together to find out different options.</p> <p>e. Tell your partner you want to go for an HIV test together. Your partner does not want to do the test.</p> <p>f. Your partner says that condoms reduce sexual pleasure and insists you only need birth control, like the injection. Tell your partner why you refuse to have sex without both types of protection every time.</p>
<p>3. Communicating about sex to parents or to other people</p>	<p>a. Tell your parent/guardian you want to go on a date (they do not believe you should date until you have finished school).</p> <p>b. Your parent does not believe sex education should be taught at school. You do. Tell them why.</p> <p>c. Your friends say they have all had sex and you are just a small girl/boy until you have done it. You want your friends to understand why you do not believe having sex defines your adulthood.</p>
<p>4. Issues about sexuality and preference</p>	<p>a. Tell a trusted family member that you are romantically and sexually attracted to people of the same sex and you want to be out of the closet about it (openly gay).</p> <p>b. You are attracted to a person of the same sex but you are not sure about the person’s sexuality. You decide to approach them.</p>

WORKSHEET 10.8.3: Group presentations: assessment criteria

Group peer assessment: assertive communication				
Points				
☺ = 2				
☹ = 1				
☹ = 0				
	Assessment criteria	☺ = 2	☹ = 1	☹ = 0
a.	Use of assertive communication steps	Group used all four steps in correct order	Group used four steps but not in correct order	Group didn't follow steps
Points				
b.	Overall strategy	Very good assertive communication	Good assertive communication	This communication will not work
c.	How realistic?	Very realistic	Fairly realistic	Unrealistic
d.	Shows self-confidence (skill, appreciation and responsibility)	Shows all three parts to self confidence	Shows one or two parts of self confidence	Does not show any parts of self-confidence
e.	How creative	Very creative	Creative	Not very creative
Points				
Total points				



GLOSSARY

Aggressive communication: style of communication in which a person expresses their opinions and ideas and advocates for their needs in a way that violates the rights of others. An aggressive communicator might try to dominate others, attack others, not listen and be overbearing.

Assertive communication: The ability to express positive and negative ideas and feelings openly, honestly and directly while respecting the rights of others.

Negotiation: A discussion with one or more other people, sometimes with different aims or intentions, aimed at reaching an agreement.

Passive communication: Being silent or not expressing one's feelings, opinions or ideas. Passive communicators are vulnerable to having somebody else deliberately or unintentionally impose their opinions or ideas on them.



Lesson 10.9

Consent, rape
and taking action

Lesson 10.9

Consent, rape and taking action

BRIEF SUMMARY OF LESSON

Building upon the previous lesson on assertive communication, you will learn the definition of rape and explore aspects of consent from several perspectives (your own perspective, the perspective of the opposite sex, and what the law says about young people and consent). The lesson also looks at victim blaming, and challenges the attitudes that enable this. The lesson also looks at victim blaming and challenges the attitudes that enable this to occur. The lesson offers you an opportunity to change your attitudes and behaviour and to appreciate that everyone can play a part in reducing the harmful impact of rape. Finally, the lesson offers practical information, such as what to do if someone is raped.

KEY POINTS

1. Rape is an act of power. It is violent. It is wrong.
2. Rape is against the law. A perpetrator (rapist) should be charged as a criminal.
3. Consent is always required by both partners during any sexual activity.
4. Always respect when someone says “no” whether they say it verbally or in any other way, including using body language.
5. Understand that a person has the right to change their mind and to refuse sex, even if they consented before.
6. If you bully a person into having sex, it is rape.
7. No one EVER deserves to be raped, or ‘asks for it’. Nothing they do can be said to be the reason for rape.
8. Victim blaming is harmful; we all need to play a role in stopping it, so that more people who are raped will seek the help they need.



ACTIVITIES

Activity A: Assertive communication and consent

Introduction: In this activity you will examine the concept of consent, and the need for using clear and assertive communication around consent in sexual relationships. In Lesson 10.8, different communication skills were discussed and practised. In this lesson communicating effectively is considered as part of giving or denying consent, and feeling confident about communicating effectively.

1. Share the examples you found for homework of the different styles of communication that are passive, assertive and aggressive. Discuss which style of communication you found the most successful for the situations you observed. Demonstrate the difference between the three styles.
2. What are the benefits of using assertive communication in one's daily life? Think of romantic/sexual relationships (for example builds self-esteem and self-confidence/helps you to express your views and feelings more clearly to others/helps you to strengthen your relationship with other people).
3. Turn to the person next to you and quickly:
 - a. Share what they know about consent.
 - b. Discuss the link between assertive communication and consent.
4. Share what you think consent is and how it is linked to assertive communication.
5. Read the information in **Illustration 10.9.1: What is consent?** with your class.

This information uses the humorous metaphor of a cup of tea to introduce some important ideas around consent. If you can access the internet on a smartphone, computer or tablet then first watch (or listen to) the 2 minute video at this YouTube address: <https://www.youtube.com/watch?v=fGoWLWS4-kU>

6. Now, read the same information but substitute the word “tea” with “sex.”

Discuss with your class and teacher any questions you have about the different situations highlighted:

- When the person says NO.
- When a person is not sure they want it.
- When the person says YES but changes their mind.
- When the person is asleep or unable to communicate or make good decisions.

Give examples of a time when a person cannot make a good decision or communicate consent. For example, situations where someone may have had a lot to drink or taken drugs.

Try this exercise together with family members or friends you trust. Have a conversation around issues of consent.

7. Read the story in **Illustration 10.9.2: Saying no, accepting no**. Describe the communication between the man and the woman. Were they being respectful of one another? What did each of them do that was right? Did both the man and woman show self-control, assertive communication, and did they listen to each other?
8. Consent must be given by both partners before having sex. Without consent, it is forced sex. Sex without consent is considered to be rape. It is important to know what the law says about the age at which people can and cannot give consent.

Activity B: Rape - an act of violence, an abuse of power

Introduction: The next activities will help you understand more about what rape is and how to protect yourself, as well as the effects of rape, and accessing care and treatment.

1. People often think of rape as something that happens mainly to women and girls. But rape is a crime that can be committed against a person of any age, gender or sexual identity. While it is true that rape and sexual violence is most often perpetrated against girls and women, it can, and does, happen to boys or men. There is also a culture of targeting people in the LGBTQIA community, because of their sexual orientation. There will be a reading on the definition of rape in this lesson.

Look at **Reading 10.9.1: This is what rape is** in your Learner Book. Are the definitions clear? Do you understand that anyone can be raped? And that anyone can rape? Understanding what consent is, and what consent is not, is crucial for preventing rape and sexual violence.

The important point is that you should never blame the victim. Refer to **Reading 10.9.2: Your body belongs to you**. Read and discuss the information under the heading, **Do not blame the victim**, in the class.

2. Form small groups, and:
 - Discuss how victim blaming happens and **share examples that are familiar to you**.
 - Brainstorm practical ways that you could help create awareness to prevent blaming the victim. Make presentations to the large group.
3. The class will continue to explore how to stop rape, as well as the care, support, and treatment needed after a rape has taken place.

Activity C: Getting care, support and treatment after rape

1. Look at the picture **Illustration 10.9.3: Rape support and help**. Put yourself into the shoes of someone who has been raped and consider:
 - a. What actions will they need to take?
 - b. What care and support will they need?
2. Discuss the following:
 - a. Are they safe from further harm? What options do they have?
 - b. Have they told someone? Who would they turn to first?
 - c. What physical care do they need? Where should they turn first?
3. Turn to **Reading 10.9.3: What to do if you or someone you know is raped?** Discuss the information regarding the steps to take, with the class.
4. You will be doing a personal reflection for just ten seconds. Sit in silence and think of one positive, practical thing you can say or do, to begin to put an end to victim blaming. Write this in your Learner Book.



CONSOLIDATION

Consolidate the lesson with the key points and the quiz below. Assess your understanding of “consent”.

Test your understanding about consent:

Read about the following situations, write in the answers and discuss as a group.

Situation	Answer
Is it consensual sex (consenting sex) if a 17 year old has sex with a 14 year old?	
You are at a party and see your friend who is very drunk go off with someone who wants to have sex with her – is she able to consent?	
If a 15 year old has consented to sex with a young man or woman who is 19, is it considered statutory rape?	
A 16 and a 17 year old have been together for a while, and each feels they are ready for sex. They talk about it, and agree they will use a condom for protection. Is this consensual?	

There are contact details in **Places that help - a directory on services that can be approached for support** at the end of this lesson in your learner books. This is information about places that help victims of sexual abuse and rape.

Consider whether the following core messages have been covered in the lesson.

Core messages

- I will choose if, and when, to have sex, and when not to.
- I have the right to say “no” to sexual attention and sex at any time. I also have the responsibility to respect “no” for an answer.
- I respect my own and others’ wellbeing.
- I want to be part of a community that stops gender harm and violence and creates safety and peace in its place.



HOMEWORK

Share the activity worksheet on **What is consent?** at home. You can get your family to answer the quiz questions.



ASSESSMENT


1. Look at **Test your understanding about consent** to assess your understanding of concepts included in this activity.

RESOURCES






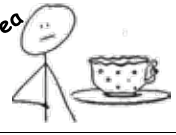





ILLUSTRATION 10.9.1: What is consent?²⁰

What is consent?

Consent is when you agree to something. If you do not agree to have sex with someone, that person must respect your wishes. If they force you to have sex without your concern, it is rape.



Saying **yes** or **no** to sex is like saying **yes** or **no** to having a cup of tea.

<p>Would you like a cup of tea?</p> 	<p>→</p>	<p>YES</p> 	<p>=</p>	<p>Consent</p>
<p>Would you like a cup of tea?</p> 	<p>→</p>	<p>hmmm... Tea I am not sure</p> 	<p>=</p>	<p>Stop. Think and talk. Do not force them to drink tea</p>
<p>Would you like a cup of tea?</p> 	<p>→</p>	<p>Actually no tea</p> 	<p>=</p>	<p>Stop. Do not make them drink tea.</p>
<p>Would you like a cup of tea?</p> 	<p>→</p>	<p>YES</p> 	<p>→</p>	<p>Actually no tea</p>  <p>People change their minds</p> <p>Stop. Think and talk. Do not force them to drink tea</p>
<p>But you wanted a cup of tea last week</p> 	<p>→</p>	<p>Remember last week?</p> 	<p>=</p>	<p>STOP</p> <p>Even if they had the tea before, do not force them to drink it again. Especially if they are unconscious. Unconscious people do not want to drink tea.</p>



Read the page.

Replace words a cup of tea with "Sex"

Replace the words drink tea with having "Sex"

Read the page again. What is the message now?

Does this help you to understand "consent"?

20 Adapted from: <https://www.soulcity.org.za/media/materials/violence/we-want-to-be-free/view> and originally adapted from: <http://www.consentiseverything.com>

ILLUSTRATION 10.9.2: Saying no, accepting no



Read through this story.

1. Discuss what is happening here?
2. Is this an example of respectful communication? Why or why not?
3. What did each of them do that was right? What could have gone wrong with this story?
4. Is there a risk when one partner does not initially speak his or her mind about having sex and then, when feeling confused, afraid or unsafe, reports rape? What is the risk?

READING 10.9.1: This is what rape is

Nobody has the right to force another person into a sexual act without their consent. The law says it is rape when someone forces their penis, fingers or object into someone's vagina, anus, mouth or any other part of their body against their will. It does not matter if you are the person's friend, boyfriend, fiancé or husband, or a stranger. Rape is an act of violence. It is a crime.

Anyone can be raped, regardless of age, gender or sexual identity. Rape can be a hate crime, or an abuse of power. It is always an act of violence, and should not be thought of as sex. Rape often results in extreme emotional trauma.



What the law says about age and consent²⁰

In South Africa, there are laws protecting young people under the Children's Act (2005) and a later amendment (2007). These laws specifically aim to protect young people from sexual relationships with older people.

Under these laws:

- A young person under the age of 16 can consent to sex, but it is considered 'statutory rape' if the person they have sex with is over 18 (statutory rape refers to sex with someone who is a minor or under age).
- It is considered statutory rape if a person who is 16 or 17 has consensual sex (sex with consent) with a younger person under the age of 16, when there is more than two years' difference between their ages.
- It is not statutory rape if both young people are between 12 and 15 and consent.
- A child under 12 cannot consent to sex, even if they say they want to.

21 Basic Education Rights Handbook – Education Rights in South Africa – Chapter 18: Sexual violence in schools. <http://www.polity.org.za/article/basic-education-rights-handbook-2017-09-07>

READING 10.9.2: Your body belongs to you

Consider the core messages below this reading, and then do the reading. The core messages are behind all the material in grades 10-12. As you do the reading tick the messages you see, and make notes for ideas you would like to remember.



Your body belongs to you

We have to make sure we treat people with dignity and respect and never force someone to do something against their will. We must not use emotional, financial or any other kind of manipulation to make someone do something they clearly indicate – either through body language or spoken word – that they do not want to do.

Your body belongs to you. Their body belongs to them. Nobody owns anybody else's body. Being a boyfriend, a girlfriend, a husband or a wife does not entitle you to demand sex when you want it, or to have sex against your will. Forced sex is rape. What brings pleasure for one person should not harm another person.

Rape is a crime no matter who the rapist or the victim is. You can be reported, get convicted and go to jail for rape. The South African justice system is clear on this. Civil society in South Africa is mobilising against the killing of women intimate partners (called femicide), sexual harassment and rape. We can join this movement and support it in different ways.

If we realise we have been responsible for forcing someone to have sex (rape) and we feel guilty about it, we need to find ways to take responsibility for the harm we have caused.

Both perpetrators and victim/survivors can get counseling to deal with what they did or for what happened to them.

Being raped is NEVER your fault.

We do not blame people for getting robbed. We blame the person who committed the crime: the thief. We must NEVER blame the victim for being raped. NOBODY ever asks to be raped, deserves to be raped or should blame themselves and feel guilty for the rape. There is only one person to blame: the person who forces themselves on someone else. The person to blame is the person who chooses to rape.

Core messages

Core messages (10, 11 and 12)	✓ if relevant	Notes
I will choose if, and when, to have sex and when not to.		
I have the right to say “no” and the responsibility to respect “no” to sexual attention and sex at any time and in any situation.		
If my partner and I choose to have sex, my partner and I will use a condom correctly every time.		
To protect myself and others, I need to be honest and communicate well in sexual relationships.		
I respect my own and others’ wellbeing.		
I know my HIV and STI and general sexual and reproductive health status.		
My partner and I are equally responsible for preventing pregnancy, HIV and other STIs.		
I want to be part of a community that stops gender harm and violence and creates safety and peace in its place.		

Illustration 10.9.3: Rape support and help



READING 10.9.3: What to do if you or someone you know is raped?

Know Your Rights²²

If you or someone you know has been raped, you have the right:

- to be treated with fairness and with respect for your dignity and privacy
- to offer information
- to protection
- to assistance
- to compensation
- to restitution
- to legal advice

1. Tell someone you trust.
2. Seek help immediately.

3. Physical care:

- a. If you or the person is injured, go straight to a hospital or health centre.
- b. The doctor will do a forensic exam which is an exam to collect physical evidence. Do not wash your body. Hair, blood and semen can all be used as evidence.
- c. Seek medical care immediately and no later than 72 hours, in order to get tested and to get treatment for protection from HIV, STIs and pregnancy (morning after pill or emergency contraception).

4. **Police:** If the person who has been raped wants to report the rape, she/he should go to the police station closest to where the attack took place. Offer to go with the person who has been raped, but also encourage them to take an adult they are close to with them.

5. **Emotional support:** What is the first thing you should say? Everyone who has been raped needs emotional support. If it just happened, they may be in shock. The first thing you should say is, "Nothing you said or did was the reason this happen to you. You are not to blame."

22 <https://rapecrisis.org.za/get-help/>

Here is a directory of services that you could consult should you need to call for support. The numbers are for the national call centres. Call and ask for the number for your local services. They will refer you to the appropriate centre in your province or region.

PLACES THAT HELP

A directory on services that can be approached for support

Department of Social Development

Gender-based Violence Call Centre: 0800 428 428 Dial *120*7867# (free from any cell phone). All child/gender-related violence and abuse questions and help for victims. Social workers available to assist.

Stop Gender Violence Helpline: 0800 150 150

Childline: 0800 055 555

Lifeline South Africa: Free confidential telephone counselling services. 0861 322 322 www.lifeline.org.za

Thuthuzela Care Centres: Find out if there is a Thuthuzela care centre in your area. For a list of TCCs visit the website <http://isssasa.org.za/care-centres>



GLOSSARY

Age of consent: the age at which the law says you are old enough to agree to something. This can include agreeing to a health service, other services, or to sexual activity.

Consent: To consent means to agree. When someone says no to something, they do not consent. If they are not sure, this is also not consent. If they say yes but then change their minds this is no longer consent. South Africa has laws about the age of consent to sexual activity.

Mutual respect: When two people demonstrate that they value and admire one another and accept one another's rights and points of view.

Perpetrate: To commit or carry out a harmful, illegal or criminal act against a person or group.

Rape: When someone forces their penis, fingers or an object into someone's vagina, anus, mouth or any other part of their body against their will. It does not matter if you are the person's friend, partner, fiancé or spouse – or a stranger. Rape is an act of violence and it is a crime.

Self-respect: We respect ourselves when we trust, value, protect and care for ourselves.

Statutory rape: This is the legal term used to refer to sexual relations involving someone below the 'age of consent'. In South Africa, the age of consent is 16 years of age. People below the age of consent cannot legally consent to having sex. A person who has sex with someone below the age of consent is acting against the law.

Victim blaming: When somebody who has been the victim of a crime is blamed for the crime instead of the person who perpetrated the crime, this is victim-blaming. This often happens to rape victims. For example, a girl or woman who goes out alone after dark is blamed for being raped. Victim-blaming is unfair, harmful and can cause stigma and self-stigma. No one EVER deserves to be raped.

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*Mrs Angie Motshekga,
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These workbooks have been developed for the children of South Africa under the leadership of the Minister of Basic Education, Mrs Angie Motshekga, and the Deputy Minister of Basic Education, Mr Enver Surty.

The Sexuality Education in Life Orientation Scripted Lesson Plans form part of the Department of Basic Education's range of interventions aimed at improving the performance of South African learners in Grade 10. As one of the priorities of the Government's Plan of Action, this project has been made possible by the generous funding of the United States Agency for International Development (USAID). This has enabled the Department to make these workbooks, in English, available at no cost.

We hope that teachers will find these workbooks useful in their everyday teaching and in ensuring that their learners cover the curriculum. We have taken care to guide the teacher through each of the activities by the inclusion of icons that indicate what it is that the learner should do.

We sincerely hope that children will enjoy working through the book as they grow and learn, and that you, the teacher, will share their pleasure.

We wish you and your learners every success in using these workbooks.

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