

Week 1



Year 10

Relationships and Sex education

Learning objectives;

To justify my opinion on whether something is a positive or negative way early on in a relationship

To question my readiness for sex

To challenge pressure to have sex

Task

What would you tell Charlie about the pressure they feel? Do you think that sex is always part of dating someone?

Is Charlie right to be worried about the risks of having sex?

Where could CHARlie get some further support?

Charlie is 15 and is feeling overwhelmed by the whole sex and relationships thing so intends to take things slowly. But friends keep sending them photos and tips about sex. It feels like there's so much pressure from everyone to hurry up and start having sex yet all the online stuff just makes Charlie feel like they've got no chance of getting it right. And the consequences can be serious if you have sex with someone so it all feels really scary. Charlie doesn't want to tell anyone about all this so tries using a healthy relationships charity online chat service.

Year 10

Relationships and Sex education

Task

As a class discuss how far you agree and disagree with the statements and why

		Strongly Disagree				Strongly Agree			
1	Pinching a guy's backside is okay.	0	1	2	3	4	5		
2	If someone says they don't want to go out with you, you shouldn't ask them out again – otherwise it's harassment.	0	1	2	3	4	5		
3	Having sex early on in a relationship is a bad idea – you need to get to know each other really well first.	0	1	2	3	4	5		
4	Chat-up lines are corny and won't get you a date.	0	1	2	3	4	5		
5	Telling someone what you like about them is a nice way to start when asking someone out.	0	1	2	3	4	5		
6	Pinching a woman's backside is okay.	0	1	2	3	4	5		
7	Dating more than one person in the first few months of seeing someone is fine.	0	1	2	3	4	5		
8	If someone you don't like asks you out, you should be mean to make sure they get you are saying 'no' – best they get the message so they can get over their crush.	0	1	2	3	4	5		
9	It's flattering when a person keeps chatting you up, even when you've not shown them any interest in return.	0	1	2	3	4	5		
10	Wolf whistling is okay if it's a compliment from someone you know.	0	1	2	3	4	5		
11	Chatting someone up online is easier than face-to-face.	0	1	2	3	4	5		
12	If a first date doesn't go well, it's not worth trying again.	0	1	2	3	4	5		
13	Buying gifts can be a lovely way to show someone you are interested in them.	0	1	2	3	4	5		
14	Once you start sleeping with someone, you should break things off with anyone else you've been dating.	0	1	2	3	4	5		
15	People like to be complimented on their looks.	0	1	2	3	4	5		
16	It's normal to share sexy images with your partner in the first few weeks of dating them.	0	1	2	3	4	5		

Year 10 Relationships and Sex education

A person wants to have sex with someone – not just because they think they should want to/ have sex	They know their partner well and feel comfortable with them
Does having sex with this person feel morally right?	They know their partner is ready for sex as they've talked about it
They have taken into account the legal implications of a decision to have sex	They both have the capacity to consent – they are sober and well
Both people feel it would be okay if one of them backed out at the last minute	They both understand and consent to the risks of having sex
They have and know how to use contraception	They have discussed what happens next – including what happens if one of them becomes pregnant or has a sexual health issue
They can have fun together without anything sexual involved	They are not just having sex to fit in with friends or others' expectations
Nobody's forcing them, pressuring them or coercing them	They have agreed whether or not to tell friends afterwards
They have discussed using condoms and other contraceptives	They are confident in talking about sex with each other
They trust their partner	They are clear about their own sexual health and have discussed it with their partner.

Task

In your books write the statements according to the category

- Being ready as an individual
- Being ready as a couple
- Being ready in the moment

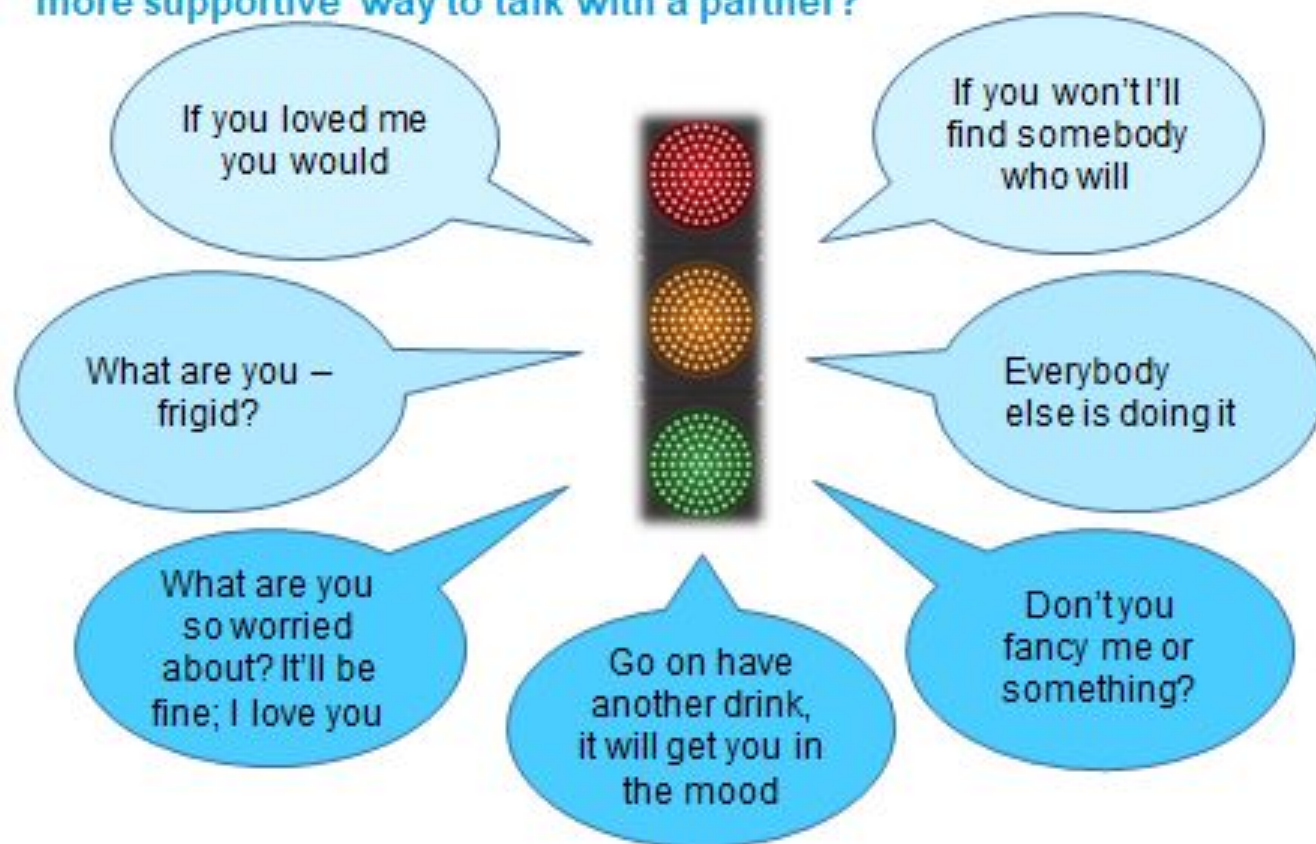
HOW TO SAY 'NO' ASSERTIVELY



- Remember you have a right to say 'no'. You are saying 'no' to that particular request, not rejecting the person.
- If the request takes you by surprise or you need more information – say so
- If you are feeling pressured, start your reply with a clear, firm 'no' or something similar e.g. 'I don't want to' or 'whoa, stop'
- Reflect the feelings of the other person if you want to (e.g. I can see you're angry/upset/surprised/...)
- Do not feel you need to justify your choice. If they argue about your reasons, just say they may disagree but it's your decision.
- Don't leave the situation open - change the subject, walk away, continue with what you are doing etc.

PRESSURE STATEMENTS

How could a person respond to these statements? What would be a more supportive way to talk with a partner?



SIGNPOSTING

If you want to talk to someone about today's lesson:



- Tutor or Head of Year
- Childline
 - 0800 1111
 - Online chat available at www.childline.org.uk
- Relate Relationships Advice
 - 0300 100 1234
 - Online chat available at www.relate.org.uk
- Brook
 - 0808 802 1234
 - Website www.askbrook.org.uk

Week 2

Year 10

Sex and Consent

Learning objectives;

To justify my opinion on whether something is a positive or negative way early on in a relationship

To question my readiness for sex

To challenge pressure to have sex

Task

Look at the statements and discuss the questions with the person next to you

How would they make you feel?

What would you say in response?

What would you do in response?

Would you tell anyone?

"If you loved me you would"

"Everybody else is doing it"

"Don't you fancy me or something?"

"What are you? Frigid?"



ALCOHOL AND THE ABILITY TO CONSENT

Imagine you overheard the following conversation:

Alex was really out of it last night!

So after you both left... did you?

Did we what?

You know... did you?

Yeah, yeah we did

I never thought Alex would do that!

That's what happens when you get drunk...

Stand up if you automatically thought Alex was female

Sit down again if you think any of the characters could be male or female

If you're still standing, can you explain reasons for your view?

- What do you think has happened?
- What do you think the characters were thinking and feeling?
- What do you think Alex is thinking and feeling?
- What are you thinking and feeling about this scenario?
- Who is responsible for what happened to Alex?

Year 10

Relationships and Sex education

Task

In groups of 3-4 you are going to be given a scenario discuss the following questions and be prepared to feedback

- *Has the person given their consent?*
- *Why / why not?*
- *What are the possible consequences for each character?*
- *What should each character do next?*



Scenario 1:

Joe invited Clara out to dinner. She agreed and ordered a really expensive meal that cost Joe all his week's wages. They had a really nice evening and seemed to be getting on well. When they got back to his place, Clara said she didn't want to have sex, but Joe said that because he took her out for a nice meal, now she owed him. So eventually Clara agreed.

Scenario 2:

Mackenzie and Ray have been a couple for two years and have been having sex for over a year. Last night, Ray was falling asleep when Mackenzie wanted to have sex. When Mackenzie asked, Ray rolled over and mumbled something about being sleepy. Mackenzie carried on anyway and Ray didn't push him off.

Scenario 3:

Jen and Amari have dated for three months, and last night they agreed to have sex for the first time. In the morning, Amari found out that Jen has secretly been in another relationship for almost a year. Jen doesn't understand why Amari is getting so upset.

Scenario 4:

Bisha and Steve have been flirting online for a while now, and have had conversations about sexual fantasies. When they met up, Bisha expected they would have sex straight away, but Steve didn't want to. Bisha said Steve had led her on, and that she would post online all their private chats if he didn't agree.

Key Message

- Responsibility for ensuring consent has been given lies with the person seeking consent, both ethically and in law.

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- It is not consent if the other person is not actively consenting, does not have the capacity to consent (e.g. not old enough, impaired judgement due to alcohol etc.) or is being manipulated, exploited or coerced.

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- Brook
 - 0808 802 1234
 - Website www.askbrook.org.uk
- Rape Crisis
 - 0800 458 28 18
 - Support for people who have been sexually assaulted
 - Website www.rapecrisis.org.uk

Week 3

Year 10

Preventing STI's

Learning objectives;

To list some of the main STI

To explain what someone should do if they are worried they have an STI

To name the contraceptive methods that provide protection against STI infections

Task

Write a list of all the different types of STI you have heard of

Next to them write the symptoms



STI	What type of infection is it?	How do you get it?	Symptoms	Treatment	Protection		
Pubic Lice	Chlamydia	Syphilis	Gonorrhea	Genital Herpes	Genital Herpes	Genital Warts	HIV

Year 10

Preventing STI's

Task

Fill in the grid as you learn about different STI's

STI	What type of infection is it?	How do you get it?	Symptoms	Treatment	Protection
HIV					
Genital Warts					
Genital Herpes					
Genital Herpes					
Gonorrhea					
Syphilis					
Chlamydia					
Public Lice					

Chlamydia

- Chlamydia is the most common STI amongst young people in this country and is a bacterial infection that is spread through sexual activity. Left untreated it can damage fertility.
- Scarily, 50% of men and 70% of women with chlamydia have no symptoms at all!
- If symptoms are present, men and women report:

Women:

- Spotting or heavy periods
- Bleeding after sex
- Pelvic pain
- Vaginal discharge
- Pain urinating

Men:

- A white, cloudy or watery discharge from the penis
- Pain urinating
- Possible testicular pain

Chlamydia is treated with antibiotics, either in a single dose or daily doses for a week. It is very important to take all doses in the course of antibiotics or the infection may return. The infection usually clears within a week.



Gonorrhoea

- Gonorrhoea is caused by bacteria and is passed on through semen and vaginal fluid.
- Typical symptoms include:

Women:

- Unusual discharge that might be yellow or green
- Pain urinating
- Spotting or heavier periods

Men:

- Unusual discharge from tip of the penis
- Pain urinating
- Pain in the testicles
- Sometimes, swelling of the foreskin

Gonorrhoea is treated with antibiotics, either in a single dose or an injection. Antibiotic resistance means that sometimes treating the infection requires more than one dose of antibiotics.



Syphilis

- Syphilis is caused by bacteria that can be passed on through semen and vaginal fluid. It can also be passed on through close contact with sores.
- **Stage 1:** sores where the bacteria entered the body, usually 2 or 3 weeks after infection. These sores are highly infectious and take 2- 6 weeks to heal.
- **Stage 2:** A painless rash, which can spread and is often seen on palms of hands and soles of feet. Flat, wart-like growths on genitals. Flu-like illness, tiredness and loss of appetite. Patchy hair loss.
- **Stage 3:** Serious damage to heart, brain, eyes, bones and nerves. At this stage syphilis can kill you.
- If caught early, syphilis is easily treated with antibiotics. In later stages, antibiotics usually work but higher doses are needed and there may be more complications.



Unless sores are present.

HIV

- **HIV** (Human Immunodeficiency Virus) is a virus which can cause an incurable and life-threatening condition called **AIDS** (Acquired Immune Deficiency Syndrome).
- HIV attacks the body's immune system, leaving it vulnerable to illness
- HIV is found in blood, semen, vaginal fluid and breast milk. Any activity that involves the sharing of these fluids could result in the transmission of HIV. It cannot be transmitted through saliva.
- People with HIV may have no symptoms for a long time, often for 10 years or more, but most (about 70-90%) will experience some flu-like symptoms soon after infection.
- It's common for people who experience cold or flu type symptoms to worry that these may be signs of HIV, when often they are just signs of a cold or flu – but experiencing these symptoms after being in a situation where a person thinks they may have been at risk should be investigated.
- Remember: not everyone will experience symptoms so it's always best to get tested and find out for sure.
- There isn't a cure for HIV but it can be managed with drugs. They work against the infection by slowing down the spread of the virus in the body.



Genital Herpes

- Herpes Simplex One = Oral (mouth) Cold Sores
- Herpes Simplex Two = Genital Sores
- Herpes Simplex One can infect the genital area through oral sex during times of outbreak but genital infections tend to be due to the Herpes Simplex Two virus.
- It's transmitted by sexual contact with the sores or blisters although the virus could be passed on when there are no obvious symptoms so it is important to talk to a sexual health practitioner about how to reduce transmission risk if a person has been diagnosed with the virus.
- **Symptoms:** Flu-like symptoms, including fever, tiredness and swollen glands. Stinging or tingling in genital or anal areas and pain when urinating. Small fluid filled blisters anywhere around the genitals, buttocks or thighs. They burst after 2- 3 days and take up to 10 days to heal.
- **Treatment:** The most common treatment is antiviral tablets and a cream or lotion to soothe the sores.



Provides limited protection if sores are not present, but there is still an infection risk.

Genital Warts

- The most common virally transmitted STI in the UK. They are caused by the human papilloma virus (HPV). There are many strains of HPV. Most are low risk, others are higher risk and increase cervical cancer risk – this is why there is an HPV vaccine given to young women.
- The genital warts virus causes the growth of warts around the genital area. The warts are highly contagious and any contact with them could result in transmission.
- **Symptoms:** During an 'outbreak', small fleshy growths or bumps on the genitals, anus & upper thighs. Growths might be small or large, pink cauliflower like lumps. Whilst the infection is dormant, there will be no symptoms.
- **Treatment:** It's the same for both sexes and it will only be offered if you have visible warts. You'll either be given an ointment or a doctor will freeze them. In extreme cases they can be surgically removed.



Provides limited protection if sores are not present, but there is still an infection risk.

Hepatitis A, B and C

- Viral hepatitis infections can affect the liver. Chronic infections can sometimes lead to liver cancer.
 - **Hepatitis A-** is transmitted where traces of faeces find a route to the mouth. Mouth to anal contact during sex could result in transmission.
 - **Hepatitis B-** is spread through the exchange of body fluids, including semen, vaginal secretions and saliva. It is 100 times more infectious than HIV.
 - **Hepatitis C-** is most commonly spread through blood. Primarily through sharing injecting equipment.
- **Symptoms:** Flu like symptoms, back pain and jaundice, which is a yellowing of the skin or eyes. It can also cause dark brown urine or pale faeces.
- **Treatment:** Once a person is diagnosed they will receive drug treatment. A doctor will also give advice about diet and alcohol consumption.



Pubic lice

- Pubic Lice can be caught through close contact and they live on coarse hair, like pubic, chest, armpit or facial hair.
- **Symptoms:** Itching in affected areas. Black powdery droppings in your underwear. Sky-blue spots or tiny specks of blood on the skin. Brown lice eggs in pubic or other body hair.
- **Treatment:** It's very easy to treat pubic lice. Apply a special shampoo or lotion every 3-7 days. It's also important to wash all clothes and bedding on a hot wash.
- Pubic lice are highly contagious. They can survive off the human body for up to 24 hours.
- Condoms will not protect against lice as they do not cover the entire body



PREVENTING STIs: KEY POINTS

- **Bacterial STIs (Chlamydia, Gonorrhoea, Syphilis)**

When treated the infection can be cured, but can be re-infected if there is continued unprotected sexual activity

- **Viral STIs (HIV, Herpes, Genital Warts, Hepatitis)**


Lives in your blood. Once you have it, you have it for life. The symptoms can be treated, but they can return at any time

- **Parasitic STIs (Public lice)**

Parasites can be transmitted via direct contact

REMEMBER!

The best way for someone to protect against STIs is to always use a condom and to get regular screening checks every time they change partners. A condom will only protect if used correctly!



NB: Condoms
don't protect
against all STIs

THE MIX



SIGNPOSTING

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- Tutor or Head of Year
- Local Pharmacist
- Relate Relationships Advice
 - 0300 100 1234
 - Online chat available at www.relate.org.uk
- Brook
 - 0808 802 1234
 - Website www.askbrook.org.uk
- Medway Contraception and Sexual Health Clinics
 - 0300 790 0245
 - Website www.cloverstreet.nhs.uk
<http://www.abettermedway.co.uk/sexualhealth/services.aspx>

Week 4

Year 10

Contraception

Learning objectives;

To list the main types of contraception

To describe when and where to access contraceptives

To assess the best contraceptive options in a range of scenarios

Task

Write a list of all the different types of contraceptive that you have heard of

Next to them write if they protect you from STDs

Circle which you believe to be the best method against pregnancy and STI's



USING CONTRACEPTION: KEY POINTS

- No method is 100% effective
- Contraceptive reliability is dependent on correct use
- Some of the most reliable forms of contraception do not protect against STI transmission. Therefore, many people use more than one method of contraception.



Year 10

Contraception

Task

1. Read through the different methods of contraception. Then complete the following
 - a. Summarise each of the methods in in 50 words or less
 - b. Include if they protect against pregnancy, STI's or both
 - c. Include if it is suitable for young people



Year 10

Contraception

***'It's always the girls responsibility to bring
contraception'***

Debate as a class how far you agree with this
statement



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Week 5

Year 10

Condoms

Learning objectives;

To describe how to use a condom safely

To know where and how to get a condom

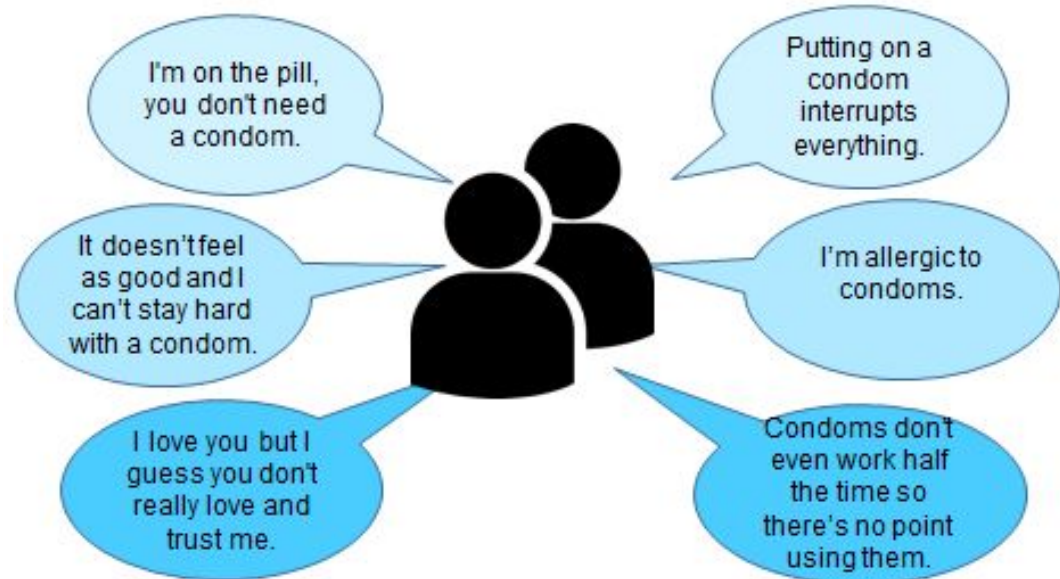
To feel confident about negotiating the use of a condom with a relationship

Task

In pairs discuss and be ready to feedback on how you would respond to each of these statements

HOW TO RESPOND ASSERTIVELY

How could a person respond to these statements?



How to put on a condom



Task

What could be some of the consequences of this couple's decision?

How could they react differently?

'I love it when you do that'

'That feels great! But we have run out of condom.... We should probably stop.'

'But it won't matter just this once, will it?'

'Well maybe not. People are always saying it takes more than once...I'm not sure thought.'

'I really don't want to stop now'

'Well... maybe it will be okay just this once...'

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Year 10

Unplanned pregnancy

Learning objectives;

To describe the different ways people can deal with an unplanned pregnancy

To explain factors which can affect decision concerning unplanned pregnancy

To know how to access sources if you have an unplanned pregnancy

Task

Discuss the following

- If someone become pregnant, what options are available to them?
- What might influence a person's decision over an unplanned pregnancy?



Year 10 Unplanned pregnancy

Task

Discuss the statements as a class and listen carefully to others opinions

(a) There is always someone to blame for an unplanned pregnancy.

(b) If a woman falls pregnant, the decisions about what happens next are down to her.

(c) A child would have a better life with an adopted family than with a teenage parent.

(d) Abortion is a woman's right.

(e) Using emergency contraception is the same as abortion.

Year 10

Unplanned pregnancy

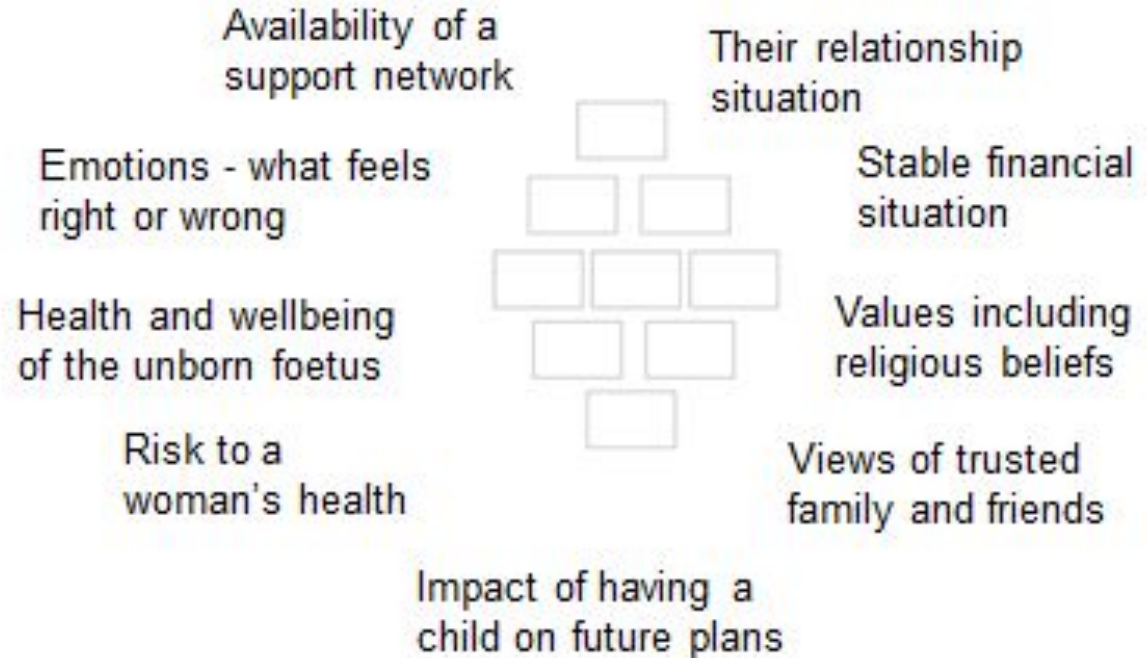


Task

Rank the factors which a person could consider when deciding what to do about an unplanned pregnancy

Explain why you have ranked them that way

Whose responsibility is it to make the final decision?



SIGNPOSTING

If you want to talk to someone about today's lesson:



- Tutor or Head of Year
- Marie Stopes
 - 10 Brewer Street, Maidstone, Kent ME14 1RU
 - 0845 300 8090 (24 hours)
 - Website [http://www.mariestopes.org.uk/Our_centres/Maidstone_Main_Centre_\(Kent\).aspx](http://www.mariestopes.org.uk/Our_centres/Maidstone_Main_Centre_(Kent).aspx)
- Brook
 - 0808 802 1234
 - Website www.askbrook.org.uk
- Medway Contraception and Sexual Health Clinics
 - 0300 790 0245
 - Website www.cloverstreet.nhs.uk

Week 6

Year 10 Assessment - Contraception



Learning objectives;

To identify methods of contraception

To advise on successful methods of contraception

To explain the consequences of unplanned pregnancies

Task

In your books write full answers to the questions. You **cannot** look back in your books

Marking Criteria

Criteria	Working towards....	Working at.....	Working above....
I can identify methods of contraception			
I can identify which methods of contraception protect against STI's			
I can identify what makes a condom less effective			
I understand how a female can get pregnant			
Peer assessment WWW - EBI - Teacher comment			