

# Keeping It Safe



A Sex and Relationships Course

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# **Introduction**

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# Introduction

## Rationale

The majority of young people first have sex during the late teenage years (16 – 19) (Wellings and others 2001); therefore Colleges of Further Education have provided an ideal site for Young People's Outreach Contraception and Sexual Health (CASH) services, both in terms of delivering contraceptive provision on site and the delivery of Sex and Relationship Education to students in order to raise their awareness.

The transition from child to adulthood however is not an easy one and may be especially hard for young people with a learning disability or difficulty. People with communication disabilities are more likely to be sexually abused and exploited than people from within the 'ordinary' population. Consequently, they may be over protected by parents combined with a general denial regarding their emerging sexuality. Many have had a lack of Sex and Relationship Education (SRE) within their schools, whilst a third of young people (within the general youth population) have said that their school SRE was inadequate (Sex Education Forum 2008). Research studies however, have concluded that individuals with a learning disability have lower levels of knowledge in most areas of sexual knowledge and experience. From our own experience, most young women could not name any part of their genitals and young men were unclear about menstruation and reproduction. Griffiths, (1999) notes that most learners with a developmental disability receive sexuality education only after having engaged in sexual behaviour that is considered inappropriate, offensive or potentially dangerous. Many young people with communication difficulties, autism or learning difficulties who get into trouble do so because of impulsive behaviour, often described as boundary violations. If these are of a sexual nature they may be labelled for life or even receive a custodial sentence. Some young people, for example those with Attention Deficit Hyperactivity Disorder (ADHD) have missed significant parts of their schooling due to suspensions and exclusions as have young people with additional physical disabilities. Many have been bullied at school and missed significant parts of their education. The predominant social attitude is that people with a learning disability or difficulty do not have sexual feelings and desires nor indeed should.

Some groups of young people are also potentially more vulnerable and more at risk from using ICT. The technological revolution enables young people to communicate in ways unknown to previous generations and whilst technological advances provide a host of creative opportunities for users, they can also create a host of potential risks including contact by adults with a sexual interest in children as well as the misuse of personal information.

Young people with a learning disability or difficulty, presenting emotional and behavioural difficulties and/or complex needs may be particularly attracted to the internet as a form of communication with others, particularly if in reality they are socially isolated as a result of social deficits complicated by language and communication problems, lack of confidence and low self esteem. While sexual feelings may be high, a primary source of information available to the majority of teenagers, i.e. their peers is generally not as readily available to young people with a learning disability or difficulty. The internet therefore becomes increasingly attractive to them but unfortunately they may be more vulnerable to e-safety risks than most. Children and young people with Autistic Spectrum Disorder for example, may make literal interpretations of content, which will affect how they respond. Some young people may not understand all of the terminology due to language delays or disorders. Students with complex needs may not understand the concept of friendship, and will therefore trust everyone implicitly. They may not know how to make judgments about what is safe information to share nor with whom.

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Some young people may not appreciate how their own online behaviour may be regarded as inappropriate, are unaware of the law and may get into trouble themselves and be deemed perpetrators.

These are challenging and complex issues and it is important that Colleges of Further Education include internet and phone safety as part of a comprehensive sex and relationships programme, establishing links across the curriculum, with different types of relationships and friendships, for example, appropriate and inappropriate language, sex and the law and public and private behaviour. This resource therefore offers examples of activities in relation to internet safety, in particular the use of social networking sites and mobile phone use.

Individual interest in sex or forming sexual relationships varies widely across ability levels at different stages. It is essential that students with a learning disability or a learning difficulty are supported with accurate advice and information about how their bodies work, the mechanics of sex and to understand new 'sexy' feelings they may be having. They need to understand different types of relationships and how sexual relationships might develop, contraception and how to take care of themselves and to avoid sexually transmitted infections. They need to know how to behave properly and safely in public and in private, where to access contraception and sexual health services, and importantly how to keep themselves safe in order to enjoy their lives safely and happily. There is no guarantee that appropriate sex and relationship education will reduce the level of sexual abuse within this population but a failure to provide such training would certainly appear to increase the risk. (Moxton, L. 2011). An effective and comprehensive sex and relationship education programme should increase understanding so that capacity to consent to a specific sexual relationship when a young person feels they are ready for such a relationship is not queried.

## Aim

The overall aim of this resource is to provide workers with a practical toolkit offering accurate information about sex and relationships for young people with a learning disability or difficulty and for students with low educational attainment (aged 16 – 19). It offers session plans and photo-copiable exercises covering key subject areas. The resource aims to increase young people's awareness of sexual health, promoting healthy and positive relationships, enabling them to make informed decisions and increase their awareness of service provision.

The resources will also be available to download via the website [www.emfec.co.uk](http://www.emfec.co.uk)

In addition, relevant staff in FE Colleges will be offered training to deliver the pack confidently and to provide a source of support if necessary by working in partnership with health agencies.

# Introduction

## Background

Outreach Contraception and Sexual Health (CASH) services for young people offer free and confidential services to young people aged under 25, based across a range of settings in Nottingham City. We currently offer 7 nurse led drop in sessions providing a full range of contraception (including implant and coil fits) with on site issuing, STI screening, pregnancy testing and condom distribution in Colleges of Further Education.

Whilst all sites have been extremely busy and successful, it became clear however that the most vulnerable young people with learning disabilities and learning difficulties were not accessing the clinics.

Following a successful bid to the Strategic Health Authority, ncn Clarendon College approached the Outreach Information Worker to deliver a series of workshops to students with learning disabilities and learning difficulties in order to raise their awareness and understanding of sexual health related issues and to ensure they were aware of and felt confident enough to access the on site service if need be.

From our own experience there is a range of useful resources available to support work with young people with learning disabilities and difficulties (see useful resource list) but it can be time consuming to pull all of these together into lesson plans and many staff simply do not have the time to do this. Some of the exercises have therefore been drawn from existing toolkits and others adapted from sources such as Brook, Family Planning Association (FPA), Child Exploitation Online Protection Centre (CEOP) and Image in Action. Others have been devised from scratch to meet the specific needs of the client group.

## Professional partnerships

For the past two years, Outreach CASH services for young people have delivered the Sex and Relationship course to Further Education students with Learning Disabilities and Difficulties in partnership with New College Nottingham, Clarendon site, working with the LLDD tutor for entry and foundation support. Course participants were selected by College staff and were identified in relation to how relevant the course would be to their particular circumstances, relationships and cognitive ability. For example, several young women were sexually active and using the internet to meet men, some students were referred because of inappropriate behaviour and/or their use of sexual language, for example 'sexting', whilst not really comprehending what they had done/said. Others were in sexual relationships deemed exploitative by others but unaware of this themselves.

The course was delivered in partnership with teaching and support staff who took responsibility for the young people's behaviour and who supported the delivery throughout the duration. This was important, as teaching staff already have established relationships with students and develop clear behavioural boundaries. In addition, they are often aware of the young people's family situations and home lives, any safeguarding issues etc and are able to share important concerns with outside agencies if necessary.

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## Safeguarding

Exercises within this publication deal with a range of sensitive issues including; sexuality and sexual orientation, sexual activities and explicit sexual behaviour, as well as encouraging young people to share their understanding of sexual language. It is therefore important that ground-rules are established, agreed and owned by the group from the onset. These are referred to throughout the course in order to maintain student confidentiality and to ensure that all students feel comfortable enough to participate. Facilitators should clarify from the outset what can be kept confidential and what information may need to be shared with others in their best interests.

Other resources for young people with learning disabilities and difficulties discuss the importance of distancing techniques used to ensure a safe environment in which sensitive issues of a sexual nature can be discussed. For example using exercises, case studies and examples referring to others rather than referring to the individual and personal experiences. The cut out characters available in the pack are an example of this. This is less threatening for participants and ensures they feel safe to join in and share their opinions. Finding out what television programmes young people watch can be a useful tool to discuss Sex and Relationships. For example, *Waterloo Road* covered a teacher/pupil relationship, offering opportunities to discuss professional boundaries and sex and the law, *East Enders* provides a good opportunity to discuss same sex relationships as well as a whole host of other complex relationships! Nevertheless, as previously stated young people with a learning disability or difficulty are vulnerable to sexual abuse and sexual exploitation and may have had negative and unwanted sexual experiences, some may be perpetrators themselves. It is therefore important to clarify issues such as information sharing, accountability and referral mechanisms across partner agencies and with tutors prior to commencing this work. Learning providers have a duty to safeguard and promote the welfare of all learners and have a particular responsibility for young people and vulnerable adults. To fulfil this duty, providers need to make young people and staff aware of their responsibilities relating to sexual conduct. Young people may be unsure of the law relating to sexual consent, may have previously been abused and may be unsure whom to trust for help (Sex Education Forum. Practice briefing 2010).

## Evaluation

Following an evaluation of the first 8 week course delivered to students with moderate learning disabilities, materials were adapted and a 6 week course was subsequently delivered to students with mild learning disabilities and difficulties which also evaluated very well with positive outcomes in 2011. The initial course emphasised personal boundaries and public and private sexual behaviour whilst the second emphasised staying safe and internet usage. There are two sample outline programmes available within the pack.

The materials included in this resource have subsequently been used with entry level students at levels 1 and 2, some of whom have a learning difficulty and others who have left school with no formal qualifications. These groups also have a wide range of cognitive abilities and the resource can easily be used and adapted to meet individual group needs. All of the exercises have therefore been tried and tested to suit the needs of 16 – 19 year olds with learning disabilities or difficulties and/or low educational attainment within a Further Education setting.

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## Partnership with parents and carers

College staff informed parents of students participating on the course that they would be undertaking the module and outlined the subject matter covered. We recommend this as good practice so that parents can express any concerns, meet staff to discuss any issues arising and to ensure parents are aware that their children might want to discuss these issues outside of the classroom. For students with learning disabilities and difficulties, a good partnership with parents provides them with the opportunity to discuss sexual health concerns at home. Leaflets and resources that can be taken home can support curriculum learning within the classroom, assisting parents to initiate related discussions with their children and young people.

Whilst some parents may struggle discussing sex and relationships with their young people, research indicates that most parents turn to educational establishments to teach their children about sex and welcome this level of support.

*Please note the College did not require parental consent, rather informed parents that the work would be taking place and regarded the programme as an entitlement for their students.*

## Acknowledgements

The authors would like to thank ncn Clarendon College and the Strategic Health Authority who provided initial funding in order to enable staff from CASH Outreach to deliver the workshops. Ncn paid for the delivery of subsequent courses but thanks in particular go to Tutors Emma Bailey and Katie Smithurst for their ongoing support, partnership working, commitment and dedication in ensuring that the students have access to accurate sex and relationship education to ensure they are able to lead happy, safe and fulfilled lives. To Rebecca Parker, Contraception and Sexual Health Outreach Information worker for collating all of the materials, testing and amending them, EMFEC for providing funding to produce the materials into a resource format and most importantly all of the students from Clarendon College who participated on the courses for their input, feedback and who were great fun to work with.

Information and materials have been collated and adapted from a number of organisations but in particular thanks go to the FPA, Brook, Image in Action and CEOP who all provide fantastic resources to use with this target group.

# Introduction

## How to use this pack

It is acknowledged that all staff will not have the privilege of working with groups for a six week time period. The materials therefore are not necessarily in chronological order. It is recommended however, that any sex education programme builds on previous work undertaken by college staff within the curriculum covering hygiene, puberty etc. In addition, it is necessary to cover basic biology, e.g. male and female body parts and reproduction before going on to explaining contraception. Likewise the internet safety exercises are best delivered after the relationship activities, so there is some order needed in terms of building upon understanding week by week as well as repeating learning in order to embed it.

The Toolkit section of the pack provides examples of tools to support sessions, for example ground-rule sheets, a variety of evaluation forms, although many workers may already have their own 'toolkit' and favourites. In addition, supporting resources, games and quizzes are offered that may be used to support a number of activities (e.g. the character cut outs) and recap on learning.

Two sample programmes are offered based on working with students with moderate learning disabilities (Programme A) and students with mild learning disabilities and learning difficulties (Programme B), based on a two to three hour session (including a break) for six to eight weeks. These have been tried and tested and adapted on an ongoing basis.

For those Colleges offering accredited courses the materials would appear to fit into a number of learning outcomes for a variety of accredited programmes.

The materials are also available to download on the website [www.emfec.co.uk](http://www.emfec.co.uk)



# **Example Programme A**

For students with moderate learning disabilities

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# Example Programme A

## Example Programme A

This programme was used with students with **moderate** learning disabilities over six sessions, comprising of approximately two to three hours (including a short break). It differs slightly from programme B, aimed at students with **mild** learning disabilities. It excludes some sessions and includes others but you can adapt activities from the pack to meet the specific needs of the group you are working with, therefore use the programme as a guide and adapt to your groups' specific needs and abilities. This programme does not use all of the components of the pack but may be a useful guide to build on.

Start each session with an ice breaker in order to ensure the group feel relaxed and are able to communicate with each other. Each week, re-cap on learning from the previous session and repeat anything if necessary. Aspects of the programme interrelate and are repeated in different ways, therefore there are opportunities to keep checking what students can remember and go over information if necessary. After each session, evaluate learning. There are feedback sheets included in the toolkit to help with this or record their verbal feedback yourself. There are lots of worksheets in the pack that students may wish to collate in their individual folders and which may be useful if your course is accredited, however it is acknowledged that some students may struggle with literacy and you may choose to undertake the work verbally and keep recordings yourself. Tutors and support staff assisted students to complete their worksheets within our programme as well as ourselves, as and when required.

# Example Programme A - Session 1

## Session 1 - Bodies and Language

### Aim

This session aims to encourage students to establish ground rules for the subsequent workshops and explores; language in relation to male and female genitals; the concept of public and private body parts and to agree acceptable words when talking about sex.

### Learning outcomes

Students will be able to name body parts using correct terminology therefore gaining an increased understanding of appropriate sexual language as well as an understanding of public or private body parts.

### What you will need

- Flipchart and pens
- **T1, B1, B2, A1**

### Steps

- **Introductions**

Introduce yourself to the group and explain that you will all be discussing sex and relationships over the following weeks and that it might be embarrassing but it will be fun!!

- **Name related Ice breaker**

- **T1 - Ground Rules**

Ask the group to think about what needs to be put in place to ensure they feel comfortable talking about sex and relationships within the group workshops. Explain that you are going to devise a group agreement together. Give them some examples, then ask for their ideas and record. Discuss the meaning of confidentiality and reasons why you may need to share information with others at times. Inform the group that if someone has something they don't want to share in front of everyone that they can talk to a member of staff after the session is over. Keep your recording and refer back to it each week. Students can complete their own worksheet with the final group agreement (T1).

- **B1 and B2 - Bodies**

Pass copies of B1 and B2 to the group one at a time. Ask each person to draw or write the name of a body part in the appropriate place as it is passed around. This can include visible parts, e.g. nose or private parts, e.g. penis or breasts. Continue until this comes to a natural end and then ask students to clarify what they have listed or drawn.

Ask the group which body parts they believe are public, i.e. can be shown in public and which are private. Reiterate that no one has the right to touch anyone without their permission.

- **A1 - Sexual language**

Explain that the next activity explores words used for private parts and that they can use words they have heard around college, on television or words they use to describe genitals. Reiterate ground rules and emphasise that these words will not be used after the activity outside of the session. Write 'Female' on a sheet of flip chart paper and ask the group to state all the words they have heard to describe female genitals or private parts such as

# Example Programme A - Session 1<sub>(continued)</sub>

breasts. Record and discuss as needed. When the activity is exhausted ask the group to discuss what each word refers to and to agree which words they are comfortable with and they feel are acceptable to use throughout subsequent workshops. Any words deemed offensive by students can be discarded. Try and agree on several words that the group find acceptable for each body part. Discuss how people might use different language in different contexts, e.g. they might need to know the proper word for vagina if they were visiting a sexual health clinic but they might use a different word when chatting with mates. Repeat for 'Male' - Ask the students to complete the Sex Words Worksheet (A1), recording only words the whole group have agreed to use in the future. Remind students not to repeat any words that are deemed offensive after the session.

- **S4 - Sex (What is it?)**

Ask the group if they know what sexual intercourse is and how babies are made. Explain intercourse, clarifying what students already know and understand. Make it clear that no one has to have sex until they really feel ready and are happy to begin a sexual relationship with someone they trust and like who also wants to have sex with them. Reiterate issues of consent.

- **Types of Sex**

Ask the group what people do when they have sex. Is there only one way to have sex? Discuss sexuality and different ways people can have sexual pleasure. Ask the group to shout out the names of sexual activities they have heard of or seen on TV, even if they don't understand the meaning and record. This is important so that students have a clear understanding of activities and their meanings which may help safeguard them and clarify what they are being asked to do if they enter into a sexual relationship. Ensure that the group have an understanding of different types of sexual activity including for example, vaginal, oral, anal and masturbation. Ask the group to agree upon appropriate words to describe these sexual activities (following on from the previous session about bodies). Again, reinforce that no one has to do anything sexually they do not feel happy or comfortable with and explain that different people like doing different things. Reiterate issues about consent.

- **Evaluation and close**

# Example Programme A - Session 2

## Session 2 - Male and Female Genitals/Language

### Aim

This session aims to explore; how the male and female reproductive systems work; different words and their meanings in relation to sex and relationships and sexual language.

### Learning outcomes

Students will gain a basic understanding of the reproductive system, male and female genitals and will have an increased understanding of sexual language.

Students will have increased their confidence and ability to discuss sex and relationships.

### What you will need

- Flip chart and pens
- Assorted post its
- **S1, B1 - B7**

### Steps

- **Ice breaker**
- **B3 and B5 - Male and Female Genitals**  
Handout B3 or B5, repeating the same process for both. Ask the students to name the body parts and functions, explaining that the correct words are quite hard to remember and reassure them if they don't know. Try to ensure they remember main parts as these will be used in subsequent activities, e.g. contraception. When completed, handout B4, B6 and B7. You can use B7 as a simplistic way to describe body parts and their approximate scale. Briefly discuss periods and how an egg would be fertilised during sex. Use handout P2 to outline how a baby is made.
- **S1 - Sex and Language Word Game**  
Undertake activity S1.
- **Evaluation and close**  
Ask how the group is feeling about the workshops having now completed 2 sessions. Give each student a post-it and ask them to write down one thing they have learnt. Now pass them another and ask them to write down one word to sum up how they felt during the session.

## Session 3 – Public and Private Relationships

### Aim

The aim of this session is to enable students to gain a clearer understanding of the difference between a public and a private space, to explore a range of activities and decide whether it would be appropriate to do them in public or in private. Students will also explore a range of relationships and differences between liking and loving someone.

### Learning outcomes

Students will have an increased awareness of different types of relationships, what constitutes appropriate and inappropriate behaviours and how feelings associated with relationships might make them feel.

### What you will need

- Flipchart and pens
- Assorted post its
- **A2, A3, A4**
- **R1, R2, R3, T2**

### Steps

- **Ice breaker**
- **A2 and A3 - Public and Private.**

Ask the group what their understanding of public and private is and discuss together.

Part 1. Handout A2 worksheets and ask the group to discuss if each space is either public or private. Reiterate the different actions you may or may not do in each named place, i.e. the bathroom is a private space as you get naked to wash, whilst the park is public as other people are around walking their dogs or pushing their baby in a pram. You might want to refer to sex and the law in this exercise, for example if someone flashed in the park they would get into trouble because it is a public place and against the law. Discuss each place and discuss any misunderstandings that may arise. Individuals may want to complete their worksheets for their folders.

Part 2. Handout A3 worksheets. Ask students to discuss whether the action is ok to do in a public or private space. Reiterate that any actions involving another person always requires their consent or permission first. Relate to the previous activity.

- **R1 - Relationship circles**

Explain that you will be exploring relationships and how people have lots of different types of relationships with lots of different people throughout their daily lives. Explain that you will be looking at two characters who are both at College (Jack and Chantelle, T5 and T6) and the relationships they have with different people.

Draw a large circle on flip chart paper and place the Jack or Chantelle character cut out in the middle. Using character cards R1, ask the group what type of relationship the person on their card might have with Jack or Chantelle. Ask them to place the character card within the circle. The closer in proximity the card is placed to Jack/Chantelle, the closer the relationship

# Example Programme A - Session 3 (continued)

is represented - the further away, the more distant the relationship etc. Discuss how Jack/Chantelle may feel about each particular character, depending upon how close they are, e.g. Chantelle may love her grandad because he is family but not have many feelings about the bus driver, even though she sees him every day going to college. Begin to discuss appropriate and inappropriate behaviour. For example, Chantelle may hug her grandad because she loves him and because he is a member of her family but it would not be appropriate to hug the bus driver or Liz, her College tutor, even though she may like her. Introduce discussion about how some relationships may change over time.

- **R2 - Liking and Loving**

Discuss how everyone has different feelings for different people and begin to explore the differences between liking and loving someone. Undertake activity R2.

- **R3 - Who Fancies Who?**

Undertake activity R3.

- **A4 - Appropriate/Inappropriate Statements**

To recap on activities undertake activity A4 and use the traffic light cards (T2).

- **Evaluation**

## Session 4 – Sex and Relationships

### Aim

This session aims to enable students to explore; sex; different reasons why people have sex; how relationships develop emotionally as well as physically; differences between a sexual and non sexual relationship.

### Learning outcomes

Students will gain a clearer understanding of sexual and non sexual relationships, how relationships can develop from a friendship into a sexual relationship and good and bad reasons for having sex.

### What you will need

- Flipchart and pens
- **R4, R5, S2, T3-T6**

### Steps

- **Ice breaker**
- **R4 - Friend or Boyfriend/Girlfriend?**

Undertake activity R4.

Following on, discuss issues of consent and what it means to consent to something.

For example, freely given consent is where both persons needs, wants and desires are an integral part of the interaction between two people.

Discuss sexual consent and reinforce that no one should have sex until they are ready and if two people do feel ready to have a sexual relationship then they should discuss and agree this with each other.

- **S2 - Sex is about.**
- Undertake Activity S2.

- **R5 - Lift Activity (Use T3-T6)**

Introduce Jack and Chantelle. Explain that they met at College and have been dating.

Explain to the group that they will be discussing their relationship and how it might progress emotionally and physically over the next six months.

Hand out R5 worksheet. Each floor represents a month of their relationship. Jack and Chantelle have just met and are going on a date. The group will decide what they would do and how they might feel. Students can use R5 activity cards to support this activity. Reiterate appropriate and inappropriate behavior and issues in relation to consenting to sexual activity.

- **T13 - Midway Evaluation**

# Example Programme A - Session 5

## Session 5 - Sex and Condom Use

### Aim

The aim of this session is to enable students to begin to explore their own attitudes and values in relation to acceptable and unacceptable behaviours; good and bad reasons for having sex, what sexual intercourse is; to introduce the meaning of contraception to the group and how to begin to discuss using contraception within the context of a relationship and how to use condoms correctly and effectively.

### Learning outcomes

By the end of the session students will have gained a clearer understanding of sexual intercourse, an overview of the meaning and purpose of contraception and developed basic communication skills in relation to negotiating contraception/condom use within a sexual relationship. Students will have gained a broader view of their own and group members attitudes and values in relation to different types of behaviour and will have a better understanding of the negative and positive reasons in relation to why people have sex.

### What you will need

- What you will need
- Flipchart and pens
- **S3, S4, T2-T6, A5**
- Condom demonstrators and condoms

### Steps

- **Ice breaker**
- **A5 - Acceptable/Unacceptable**

This activity enables young people to explore their own attitudes and those of their peers in relation to acceptable and unacceptable behavior within relationships. Hand out each student a set of traffic light cards (T2). Red is disagree, Yellow is not sure and Green is agree. Explain that you will read out a statement and students have to raise a card according to whether they agree/disagree or are not sure about the statement, and discuss.
- **S3 - Sex Yes or No.**

Explain that you are going to look at different reasons that people decide to have sex. Use character T3 – T6. Read a card (S3) out to the group and ask them to discuss whether it represents a good or bad reason to have sex and why. Continue until all the statements have been discussed.

Reiterate issues of sexual consent, the law and confidentiality.
- **S4 - Sex (What is it?)**

Handout S4 worksheet and use as a guide to explain sexual intercourse.

- **Condoms and Contraception**

On flipchart write 3 separate headings for discussion.

- What is contraception?
- What are condoms?
- Where can you get condoms from?

Ask the group to share everything they know or have heard in relation to the above.

- **Condom negotiation**

Using Jack and Chantelle (T5 and T6) explain that they are going to have sex for the first time. Ask members of the group to role play questions the characters might need to ask each other in relation to having sex together, using condoms, contraception and including issues of consent.

- **C4 - Condoms**

Explain that you will be looking at condoms. Pass each student a condom and ask them to open the packet and handle them. Show students how to put a condom on correctly using a demonstrator. Hand out the condom sequence cards (C4, 1 and 2) and ask the group to put the cards in the correct order. Answer any misunderstandings or concerns that arise until the group are happy with the order. Handout out C1 which students may want to keep if they are compiling folders. Now ask group members to re-cap on their learning by putting a condom on a demonstrator and explain the stages to the group.

- **Evaluation**

## Session 6 - Safer Sex

### Aim

To increase students' knowledge and understanding of different types of contraceptives, how they are used and how contraception can prevent an unplanned pregnancy and to clarify understanding in relation to safer sex and the prevention of sexually transmitted infections.

### Learning outcomes

Students will have an increased understanding of the range of contraceptives available and a basic understanding of how they are used, how contraception helps to prevent unplanned pregnancies, an increased understanding of sexually transmitted infections and how they can be transmitted and prevented.

### What you will need

- Flip chart and pens
- Enlarged female body outline
- Contraceptive display kit
- STI photographs (download from: [www.emfec.co.uk](http://www.emfec.co.uk))
- Assorted post its
- **C3**

### Steps

- **Ice breaker**
- **Contraception**  
Ask the group to discuss what contraception is, different types of contraceptives they have heard of and where someone could get contraception from.
- **C2 - What goes where?**  
Use a large female outline and put in the middle of the table. Lay out contraceptives from the kit and ask students to match them one by one to parts of the female outlines body, e.g. implant - arm. As each one is placed, explain what it is called and briefly how it works, i.e. the pill is taken by mouth, and works by hormones. Keep the descriptions very brief and simple.
- **C3 - Contraception case studies**  
Using the case studies (C3) read each one out one by one and ask the group to consider what each person would need to talk to their partner about, when would be a good time to discuss it and what might be a suitable method of contraception for each person in the case study and why.  
  
Students can complete the case study worksheets for their folders.
- **What is an STI?**  
Wordstorm what students already know about sexually transmitted infections and discuss together as a group. Show the photographs which can be downloaded from the web site and discuss the most commonly heard of STIs using C5 sheets as a guide.
- **Evaluation**

## Session 7 – Recap on learning

### Aim

This session aims to recap on subjects covered within the sessions, to increase students understanding in relation to sex and the law and to enable students to ask questions about any subjects not already covered.

### Learning Outcomes

Students will gain a better understanding in relation to sex and the law with an emphasis on sexual consent. Students will also have an increased knowledge of where to go for help in relation to contraception and sexual health and of local sexual health providers.

### What you will need

- Flip Chart and pens
- Small quiz prizes
- Large female/male body shapes
- **SS1, A6, A7, C4, C6, T7-9, T10-T15**
- Information packs
- Selection of musical instruments

### Steps

- **Ice breaker**
- **SS1 - Sex and the Law**

Split the group into 2 teams and give each team a name (e.g. sperm or egg). Explain there will be a prize for the winning team! Each team should nominate a captain. Now read a question from the Sex and the Law Quiz. Each team should confer and make a noise with their musical instrument when they are ready to answer. As each answer is given, offer further information and ensure students are clear about legislation in relation to sex and relationships, reiterating issues about permission and consent in relation to sexual activity. Keep a score card. The winning team gets a prize (although we shared the prize across both teams).
- **C4 - How to use a condom**

Hand out C4 sequence cards and ask the group to put them in the correct order. Use this activity to ensure previous learning and answer any questions arising.
- **A6 + A7 - Where would I like to KISS?**

Undertake activity A6.
- **C6 - Contraceptive quiz**

Undertake the quiz as a whole group or split into smaller groups. Then come back for feedback and discussion.
- **T7 - Where can I get help?**

Following group discussion support students to complete worksheet T7. It might be helpful to bring leaflets advertising local sexual health service providers.

# Example Programme A - Session 7 (continued)

- **T8 + T9 - Who wants to be a Sexual Health Millionaire?**

Explain that you will be playing the game like the TV show and they are the contestants. They can enter individually, work in pairs or two teams. They are given three life lines (phone a friend = tutor or facilitator, ask the audience = rest of the group, 50/50 = take away two answers). They will be asked a question and have four options to answer correctly. Play as the TV show, however if limited time, each group member gets one question each in order to win.

- **T14 and T15 - Final Evaluation**

Explain to the group that it is important to highlight students learning as well as for them to let you know anything that could have been better. Ask them to complete the Mind Map and the final evaluation form. They will need help with this and remembering what was covered at each session

- **Close**

Finally finish on a high by handing out certificates (at back of kit) and service information packs to the group.



# **Example Programme B**

For students with mild learning disabilities

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# Example Programme B

## Example Programme B

This programme was used with students with **mild** learning disabilities over six sessions, comprising of approximately two to three hours (including a short break). Use the programme as a guide and adapt to your specific students needs and abilities. This programme does not use all components of the pack but may be a useful guide to build on.

Start each session with an ice breaker in order to ensure the group feel relaxed and are able to communicate with each other. Each week, re-cap on learning from the previous session and repeat anything if necessary. Aspects of the programme interrelate and are repeated in different ways, therefore there are opportunities to keep checking what students can remember and go over information if necessary. After each session, evaluate learning. There are feedback sheets included in the toolkit to help with this or record their verbal feedback yourself. There are lots of worksheets in the pack that students may wish to collate in their individual folders and which may be useful if your course is accredited, however it is acknowledged that many students will struggle with literacy and you may choose to undertake the work verbally and make recordings yourself. Tutors and support staff assisted students to complete their worksheets within our programme as well as ourselves.

# Example Programme B - Session 1

## Session 1 - Relationships

### Aim

This session aims to encourage students to establish ground rules for the subsequent workshops, to explore differences between a range of relationships and friendships and to help them to identify important qualities within a range of different types of relationships.

### Learning outcomes

Students will have an increased awareness of different types of relationships, what constitutes appropriate and inappropriate behaviour and how feelings associated with relationships might make them feel.

### What you will need

- Flipchart and pens
- Post it notes
- **T1, R6, R1, T5 and T6**

### Steps

- **Introductions**

Introduce yourself to the group and explain that you will all be discussing sex and relationships over the following weeks and that it might be embarrassing but it will be fun!!

- **Name related Ice breaker**

- **Hopes and fears**

Pass each student a post it note and ask them to write down at least one hope or fear, i.e. what do they hope to learn and what are they worried about? Alternatively do verbally as a round (after they have had time to think about it). Gather feedback from the whole group and record. Use this information to allay their fears and adapt the programme accordingly if need be.

- **T1 - Ground Rules**

Ask the group to think about what needs to be put in place to ensure they feel comfortable talking about sex and relationships within the group workshops. Explain that you are going to devise a group agreement together. Give them some examples then ask for their ideas and record. Discuss the meaning of confidentiality and reasons why you may need to share information with others at times. Inform the group that if someone has something they don't want to share in front of everyone that they can talk to a member of staff after the session is over. Keep your recording and refer back to it each week. Students can complete their own worksheet with the final group agreement (T1).

- **Relationships and Friendships**

Write 'Friendship' on a piece of flipchart paper and 'Relationship' on another. Ask the group to word-storm what friendship means and what makes a good friend and record. Now ask students to consider what relationship means and define the qualities of a good relationship. Record feedback.

Ask the group to consider the differences between a friendship and another type of relationship and record.

# Example Programme B - Session 1 (continued)

- **R1 - Relationship circles.**

Explain that you will be exploring relationships and how people have lots of different types of relationships with lots of different people throughout their daily lives. Explain that you will be looking at two characters who are both at College (Jack and Chantelle, T5 and T6) and the relationships they have with different people.

Draw a large circle on flip chart paper and place the Jack or Chantelle character cut out in the middle. Using character cards R1, ask the group what type of relationship the person on their card might have with Jack or Chantelle. Ask them to place the character card within the circle. The closer in proximity the card is placed to Jack/Chantelle, the closer the relationship is represented - the further away, the more distant the relationship etc. Discuss how Jack/Chantelle may feel about each particular character, depending upon how close they are, e.g. Chantelle may love her grandad because he is family but not have many feelings about the bus driver, even though she sees him every day going to college. Begin to discuss appropriate and inappropriate behaviour. For example, Chantelle may hug her grandad because she loves him and because he is a member of her family but it would not be appropriate to hug the bus driver or Liz, her College tutor, even though she may like her. Introduce discussion about how some relationships may change over time.

- **R6 - Relationships and me**

Give each person worksheet R6 - (stick person) and ask them to label it 'me'. Now ask them to list all of the people they have a relationship with, e.g. parents, friends, college tutor, aerobics instructor etc. Now ask them to write down one word to describe how they feel about that person, e.g. love, like, dislike, fancy etc.

Now ask the group to list different types of relationships, referring to their completed worksheet, for example, family, professionals, mates etc. If they struggle with this ask them to think about celebrity couples or relationships they have seen on television and describe that type of relationship.

- **Close**

Close with a general discussion about relationships. How do people feel when a friend falls out with them or a relationship breaks up? Is it different for young men and young women? What is the difference between liking, loving and fancying someone?

- **Evaluation**

## Session 2 - Sexual Relationships and Language

### Aim

This session aims to enable students to begin to explore sexual feelings and the impact such feelings have upon relationships, different types of sexual relationships, (including different sexualities) and how sexual relationships can develop from initial attraction. This session also begins to explore appropriate language.

### Learning outcomes

Students will have an increased awareness of different relationships, what feelings are associated with sexual attraction, different aspects of sexuality, an increased understanding of body parts and which are public or private and an increased understanding of appropriate sexual language.

### What you will need

- Flip chart and pens
- **A1, B1, B2, R3, R4, R7, R8, R9, T10**

### Steps

- **Introductions**

Recap on previous session and discuss any outstanding issues. Explain that in this session you are continuing with the theme of relationships but exploring sexual relationships and how these may develop. Explain that you will also be looking at sexual language and refer back to the ground rules.

- **Ice breaker**

- **R4 - Friend or Boy/Girlfriend?**

Do activity R4 as described in the resource.

- **R7 - Celebrity Couples Game**

Do activity R7 as described. Use R8 and R9 to record 'good' and 'bad' relationships.

- **Genitals, sex and language.**

Pass copies of B1 and B2 to the group one at a time. Ask each person to draw or write the name of a body part in the appropriate place as it is passed around. This can include visible parts, e.g. nose or private parts, e.g. penis or breasts. Continue until this comes to a natural end and then ask students to clarify what they have listed or drawn.

Ask the group which body parts they believe are public, i.e. can be shown in public and which are private. Reiterate that no one has the right to touch anyone without their permission. It is useful to do an assertiveness exercise here and ask the group to think about ways they can say NO if they are not happy about someone touching them and how they would feel. Going around the group, individually ask them what is their favourite possession and ask them if you can have it, i.e. can I have your Blackberry Curve? Repeat until everyone can say no assertively!!

## Example Programme B - Session 2 (continued)

Explain that the next activity explores words used for private parts and that they can use words they have heard around college, on television or words they use to describe genitals. Reiterate ground rules and emphasise that these words will not be used after the activity outside of the session. Write 'Female' on a sheet of flip chart paper and ask the group to state all the words they have heard to describe female genitals or private parts such as breasts. Record and discuss as needed. When the activity is exhausted ask the group to discuss what each word refers to and to agree which words they are comfortable with and they feel are acceptable to use throughout subsequent workshops. Any words deemed offensive by students can be discarded. Try and agree on several words that the group find acceptable for each body part. Discuss how people might use different language in different contexts, e.g. they might need to know the proper word for vagina if they were visiting a sexual health clinic but they might use a different word when chatting with mates. Repeat for 'Male' - ask the students to complete the Sex Words Worksheet (A1), recording only words the whole group have agreed to use in the future. Remind students not to repeat any words that are deemed offensive after the session.

- **Evaluation**

# Example Programme B - Session 3

## Session 3 - The Body

### Aim

This session aims to explore; how the male and female reproductive systems work; different words and their meanings in relation to sex and relationships, language in relation to male and female genitals and what constitutes a sexual relationship.

### Learning outcomes

Students will have a basic understanding of the reproductive system and male and female genitals, be able to name body parts using correct terminology and have a basic overview of sexual intercourse.

### What you will need

- Flipchart and pens
- **B3, B4, B5, B6, B7. S1, S4, P2**

### Steps

- **Introductions**

Recap on previous session and discuss any outstanding issues. Explain that you are going to look at sex and the body.

- **Ice breaker**

- **S4 - Sex (What is it?)**

Ask the group if they know what sexual intercourse is and how babies are made. Handout S4 and use as a guide to explain intercourse, clarifying what students already know and understand. Make it clear that no one has to have sex until they really feel ready and are happy to begin a sexual relationship with someone they trust and like who also wants to have sex with them. Reiterate issues of consent.

- **B3 and B5 - Male and Female Genitals**

Handout B3 or B5, repeating the same process for both. Ask the students to name the body parts and functions, explaining that the correct words are quite hard to remember and reassure them if they don't know. Try to ensure they remember main parts as these will be used in subsequent activities, e.g. contraception. When completed, handout B4, B6 and B7. You can use B7 as a simplistic way to describe body parts and their approximate scale. Briefly discuss periods and how an egg would be fertilised during sex. Use handout P2 to outline how a baby is made.

- **Types of Sex**

Ask the group what people do when they have sex. Is there only one way to have sex? Discuss sexuality and different ways people can have sexual pleasure. Ask the group to shout out the names of sexual activities they have heard of or seen on TV, even if they don't understand the meaning and record. This is important so that students have a clear understanding of activities and their meanings which may help safeguard them and clarify what they are being asked to do if they enter into a sexual relationship. Ensure the group understand different types of sexual activity including for example, vaginal, oral, anal and masturbation. Ask the group to agree upon appropriate words to describe these sexual

# Example Programme B - Session 3 (continued)

activities (following on from the previous session about bodies). Again, reinforce that no one has to do anything sexually they do not feel happy or comfortable with and explain that different people like doing different things. Reiterate issues about consent. Discuss whether these activities can be done in public or private places.

- **S1 - Sex and Language Word Game**

Undertake activity S1.

- **Evaluation**

## Session 4 – Sex and Keeping Safe

### Aim

This session aims to enable students to explore; different reasons why people have sex; how relationships develop emotionally as well as physically; their own attitudes and values about sex and relationships; internet safety and mobile phone use and to gain an understanding about sex and the law.

### Learning outcomes

Students will have an increased understanding of different aspects of a range of sexual relationships and positive and negative reasons why people have sex. Students will increase their understanding in relation to sexual legislation.

### What you will need

- Flipchart and pens
- Musical instruments, small prizes
- **A4, A5, R5, S2, S3, SS1, T2, T10**

### Steps

- **Ice breaker**  
Recap on previous session and discuss any outstanding issues and outline today's session.
- **S2 - Sex is about**
- **S3 - Yes or No?**
- **SS1 - Sex and the Law**  
Split the group into 2 teams and give each team a name (e.g. sperm or egg). Explain there will be a prize for the winning team! Each team should nominate a captain. Now read a question from the Sex and the Law Quiz. Each team should confer and make a noise with their musical instrument when they are ready to answer. As each answer is given, offer further information and ensure students are clear about legislation in relation to sex and relationships, reiterating issues about permission and consent in relation to sexual activity. Keep a score card. The winning team gets a prize (although we shared the prize across both teams).
- **Social networking and the internet.**  
Briefly discuss what social networking is and ask students if they use any sites. Ask them to look at what information they put on their own sites in preparation for the next session.
- **Evaluation**

## Session 5 - Staying Safe (1)

### Aim

This session provides students with the opportunity to explore internet safety on social networking sites, mobile phone use and increase their understanding of related legislation. This session also aims to raise students awareness of contraception and safer sex with a particular emphasis on condom use.

### Learning outcomes

As a result of their participation in the session, students will have an increased understanding of the potential risks associated with social networking and an awareness of appropriate behaviour in relation to using the internet and relevant legislation. They will gain a basic understanding of contraception, condoms, how to use them correctly and safer sex.

### What you will need

- Flipchart and pens
- CEOP DVD - "Mat thought he knew".
- **T3. SS2 (profiles, blank profile page) and Top Tips handout**
- **SS3 - profile activity sheet**
- Contraceptive Display Kit or a collection of contraceptives
- Condoms and condom demonstrators
- **C1,C4**

### Steps

- **Introduction**  
Recap on previous session and discuss any outstanding issues. Outline today's session, explaining that you will be covering different aspects of staying safe.
- **Ice breaker**
- **SS2 - Social Networking and "Sexting" (part 1 and 2)**  
Deliver SS2 Part 1 and 2 (you may want to deliver part 3 "Sexting" within this session and cover condoms and safer sex within a separate session but it is unlikely there will be adequate time to cover everything).
- **Contraception**  
Ask the group to discuss their understanding of contraception, what contraceptives are, what types they have heard of and where they can get them from and explain you will be exploring contraception in more depth.
- **Condoms**  
Explain that you will be looking at condoms. Pass each student a condom and ask them to open the packet and handle them. Hand out the condom sequence cards (C4, 1 and 2) and ask the group to put the cards in the correct order. Answer any misunderstandings or concerns that arise until the group are happy with the order. Handout C1 which students may want to keep if they are compiling folders. Now ask group members to re-cap on their learning by putting a condom on a demonstrator and explain the stages to the group.

# Example Programme B - Session 5 (continued)

- **What goes where?**

Use a large female outline and put in the middle of the table. Lay out contraceptives from the kit and ask students to match them one by one to parts of the female outline's body, e.g. implant - arm. As each one is placed, explain what it is called and briefly how it works, i.e. the pill is taken by mouth, and works by hormones. Keep the descriptions very brief and simple.

- **Evaluation**

## Session 6 - Staying Safe (2)

### Aim

The aim of this session is to increase students knowledge and understanding about contraception and safer sex; STIs and where to go for help and advice.

### Learning outcomes

Young people will have a basic knowledge of contraception and a range of different types of contraceptives available, an increased awareness of STIs including signs, symptoms, transmission routes and prevention and what contraception and sexual health services are available locally.

### What you will need

- Flipchart and pens
- Contraceptive display kit
- **C3, C5, T7, T9, T14 and T15**
- STI photographs (download from: [www.emfec.co.uk](http://www.emfec.co.uk))
- Local service information

### Steps

- **Ice breaker**  
Recap on previous session and discuss any outstanding issues and outline today's final session, covering contraception and sexually transmitted infections. Continue with 'What goes Where' if there are still contraceptives to discuss.
- **C3 - Contraception case studies**  
Read out each case study and consider the individual characters circumstances. Ask the group to think about what the character might need to talk to their partner about, when would be the best time to discuss these issues and what method of contraception might best suit the characters life style. Remind the group that a nurse or Dr. will ask lots of questions before prescribing a contraceptive to make sure it is the best one for that particular person.
- **What is an STI?**  
Word storm what students already know about STIs and discuss. Using C5, discuss the most common STIs, how they are transmitted from one person to another, what signs or symptoms there may be and how or if they can be cured or treated. There are a number of photographs of STIs which can be downloaded from the web site to illustrate symptoms. Many young people, and not just those with a learning disability do not like looking at these photographs and they should be used sensitively as there may be students within the group who have had an STI. They do however provide a visual illustration to the descriptions which may better suit some students needs.
- **T7 - Where can I get help?**  
Bring in leaflets from local service providers for students to look at and ask them to complete Handout T7 for their folders.

# Example Programme B - Session 6 (continued)

- **T9 - Who wants to be a Sexual Health Millionaire?**

Explain that you will be playing the game like the TV show and they are the contestants. They can enter individually, work in pairs or two teams. They are given three life lines (phone a friend = tutor or facilitator, ask the audience = rest of the group, 50/50 = take away two answers). They will be asked a question and have four options to answer correctly. Play as the TV show, however if limited time, each group member gets one question each in order to win.

- **T14 and T15 - Final Evaluation**

Explain to the group that it is important to highlight students learning as well as for them to let you know anything that could have been better. Ask them to complete the Mind Map and the final evaluation form. They will need help with this and remembering what was covered at each session.

- **Close**

Finish on a high by congratulating the group and handing out certificates (at back of kit) and service information packs.



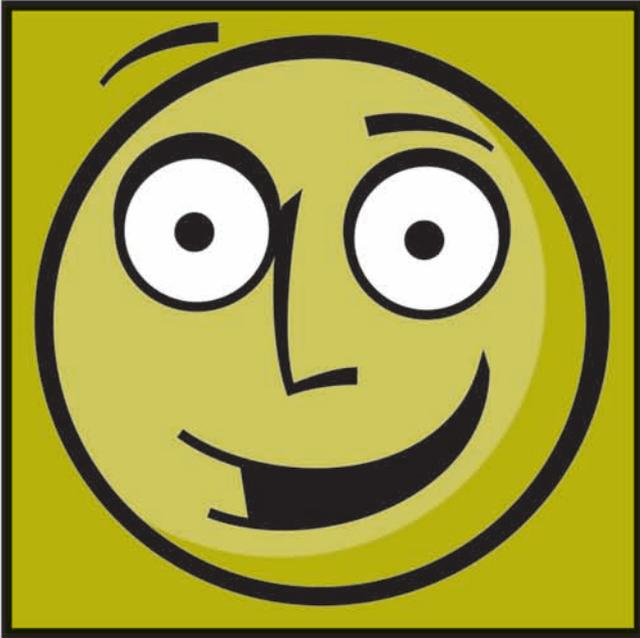
# **Toolkit**

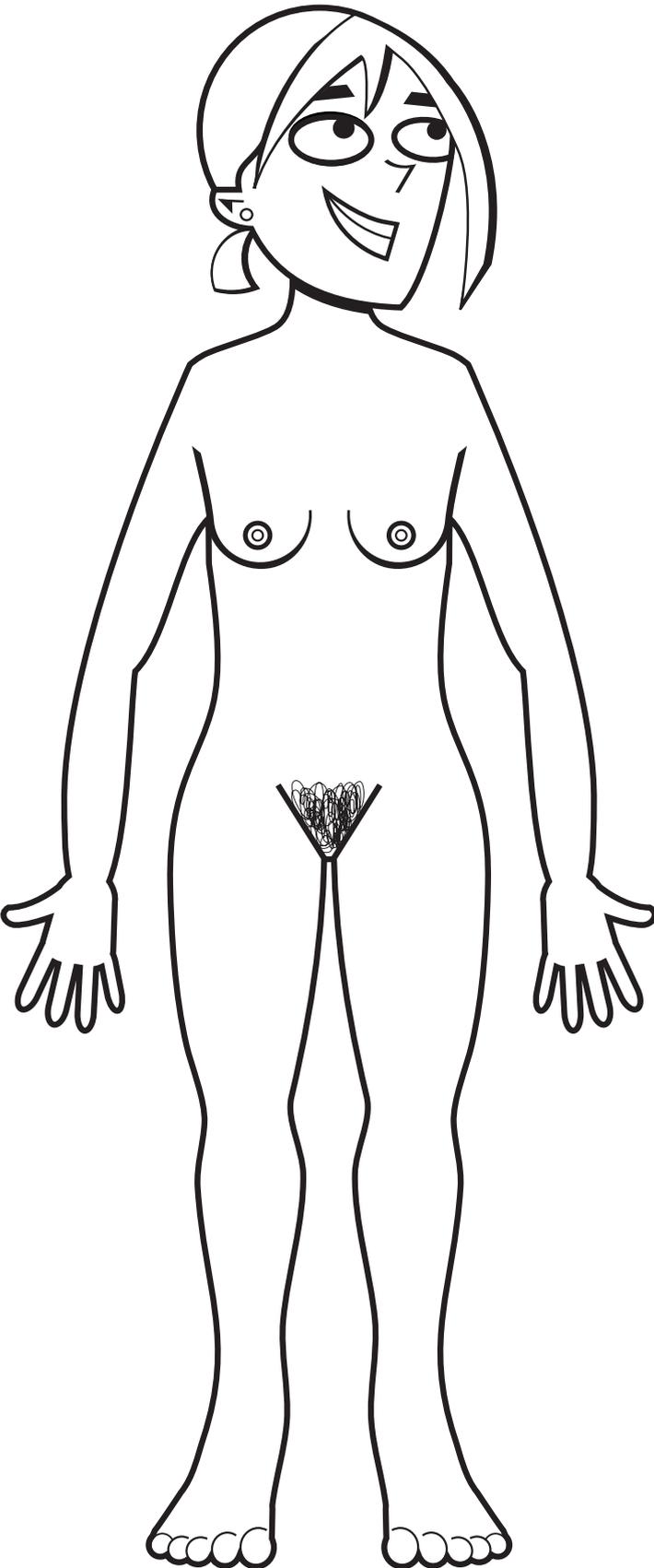
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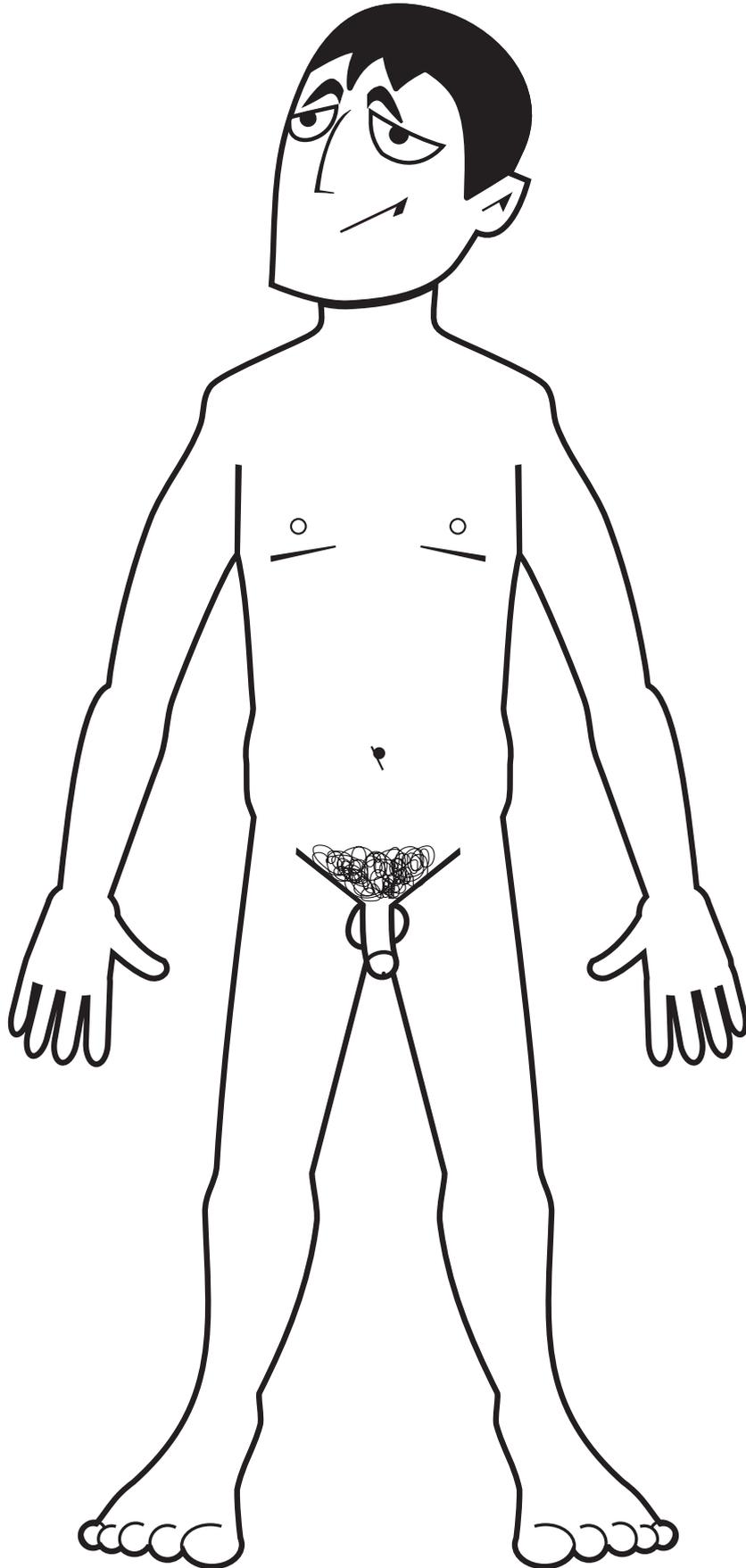
# Group Contract

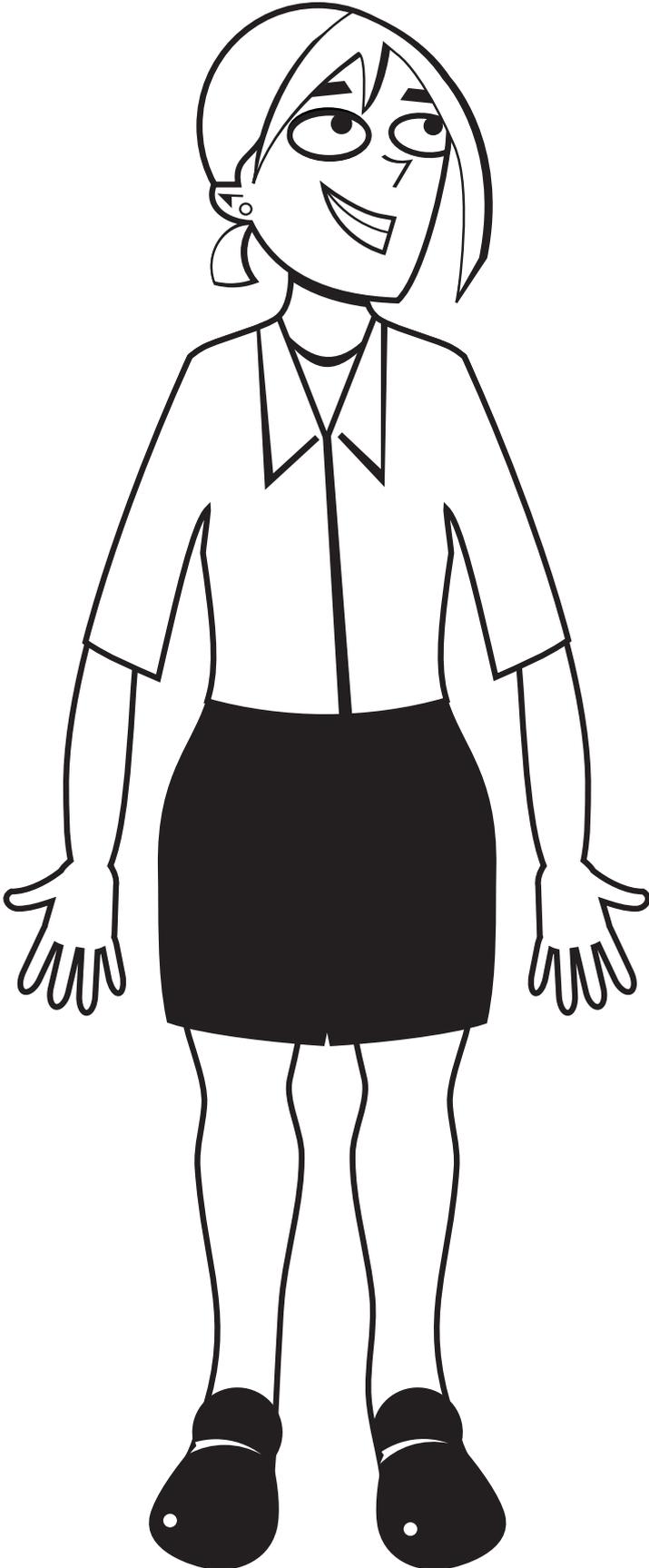
# Traffic Light Cards



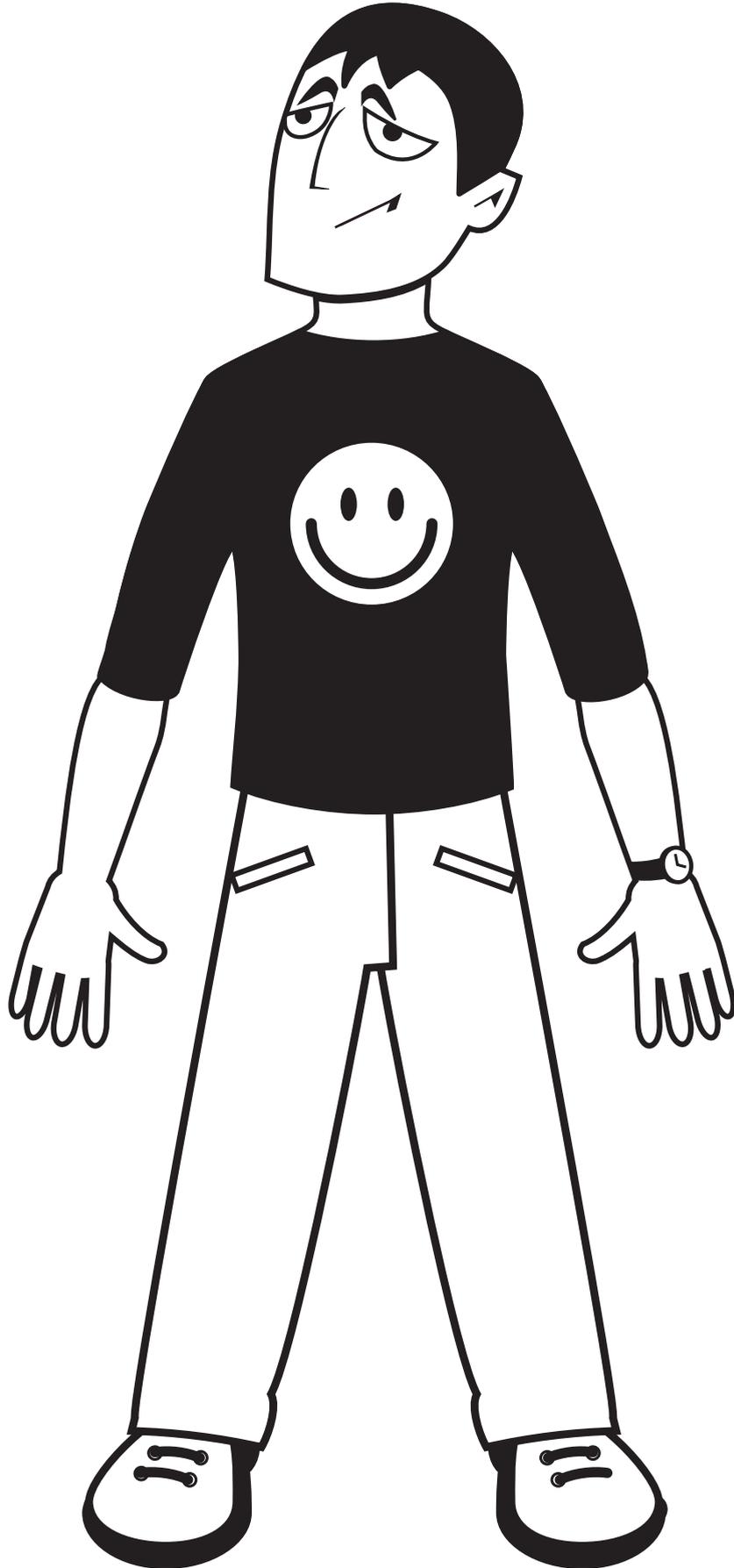


# Character Cut Out - Jack (naked)





## Character Cut Out - Jack (clothed)



# Where can I get help?

Where can I go to talk to somebody about sex and relationships?

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---

Where can I go for Contraception?

---



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I think I've got a sexually transmitted infection (STI), where can I go?

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I think I'm pregnant, where can I go?

---



---

Where can I go to get condoms?

---



---

Where is my nearest clinic?

---



---

What days and times are they open?

---



---

Can I take someone with me?

---



---

Will the clinic tell my parents/carer?

---



---

## Clinics that can help me:

Address: \_\_\_\_\_

---

Address: \_\_\_\_\_

---

Tel: \_\_\_\_\_

---

Tel: \_\_\_\_\_

---

Bus: \_\_\_\_\_

---

Bus: \_\_\_\_\_

---

Clinic Times: \_\_\_\_\_

---

Clinic Times: \_\_\_\_\_

---



## Question cards 1

**If you are under 16 you need your parents permission to**

- A** Get advice on contraception      **B** Get contraception  
**C** Get information on contraceptive and sexual health issues      **D** None of the above
- 

**If a condom split or a contraceptive failed, what are the options?**

- A** Panic and cry      **B** Go get a pregnancy test  
**C** Go for emergency contraception      **D** Nothing
- 

**How long can sperm live inside a woman's body?**

- A** 24 hours      **B** 2 days  
**C** 5 days      **D** Up to 7 days
- 

**The 'Morning After Pill' has to be taken...after unprotected sex?**

- A** Up to 24 hours      **B** Up to 36 hours  
**C** Up to 48 hours      **D** Up to 72 hours
- 

**Which type of contraception does not contain hormones?**

- A** Implant      **B** Female condom  
**C** Pill      **D** Injection



## Question cards 2

**Which type of contraception can protect you against STIs?**

- A** IUD  
**B** Vaginal Ring  
**C** Condom  
**D** IUS
- 

**What do you check for on a condom packet?**

- A** Kitemarks  
**B** Pretty Pictures  
**C** Date  
**D** Kitemarks and Date
- 

**What type of lubricants can you use with a condom?**

- A** Water based  
**B** Anything  
**C** Things like Vaseline, Cocoa Butter or massage oil  
**D** Soap and water
- 

**What is the most common STI amongst 16-24 year olds?**

- A** Pubic lice  
**B** Herpes  
**C** Chlamydia  
**D** HIV
- 

**Which STI is also passed through blood as well as sexual intercourse?**

- A** Gonorrhoea  
**B** HIV  
**C** Genital warts  
**D** Herpes





## Question cards 4

**Which of these is a name for the male genitals (private parts)?**

- A** Cervix **B** Penis  
**C** Vagina **D** Clitoris
- 

**What is the name of the soft bag the male's testicles hang in?**

- A** Scrotum **B** Penis  
**C** Testes **D** Bottom
- 

**Which of these is a private space?**

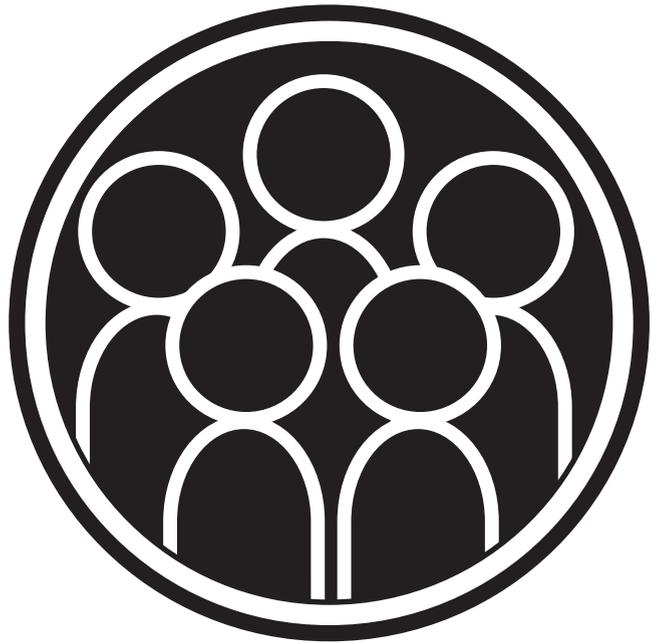
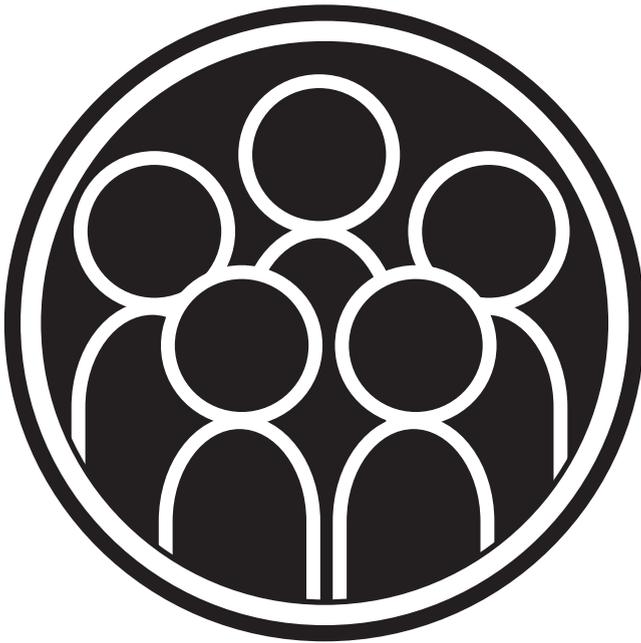
- A** Café **B** Bathroom  
**C** Shared Bedroom **D** Lounge
- 

**Which of these is something you can do in public?**

- A** Kiss on the cheek **B** Masturbate  
**C** Kiss a private part of the body **D** Walk around naked
- 

**Which of these are different types of sex?**

- A** Anal **B** Vaginal  
**C** Oral **D** All of these



The following are samples of different evaluation forms that can be used to evaluate young people's learning about each session. There is also a final evaluation form for the entire project.

Other methods of evaluation might include asking students to write what they have learnt and how they felt about the session on post-it notes, at the end of each session, or to go round and verbalise their learning.

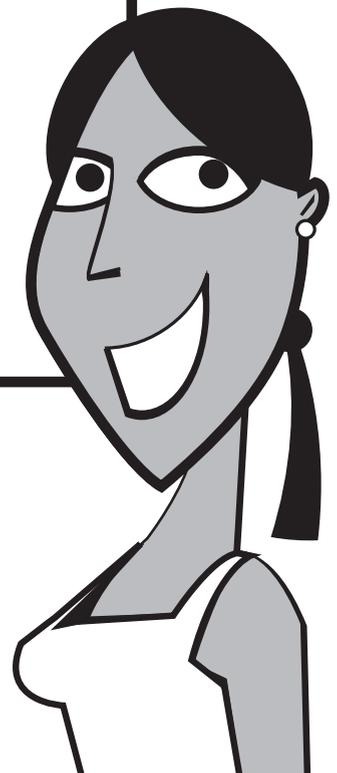
# Evaluation Form 1

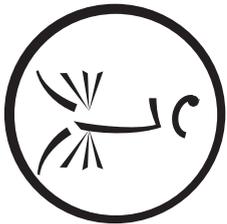
I think the session was...



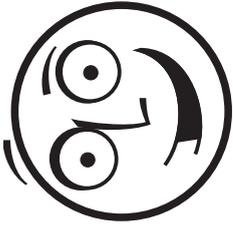
I learnt...

I still want to know....





**Rate this session between 1-10**  
(10 = excellent, 1 = rubbish)



- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

**I enjoyed...** Write down 2 things you enjoyed about this session

1

2

**I learnt...** Write down 2 things you learnt in this session

1

2

## Mid Way Evaluation

I think the sessions have been....

Please circle **3**

<b>Good</b>	<b>Interesting</b>	<b>Bad</b>	<b>Awful</b>
<b>Boring</b>	<b>Terrible</b>	<b>Cool</b>	<b>Wicked</b>
<b>Brilliant</b>	<b>Exciting</b>	<b>OK</b>	<b>Annoying</b>
<b>Helpful</b>	<b>Super</b>	<b>Stupid</b>	<b>Great</b>
<b>Poor</b>	<b>Informative</b>	<b>Waste of Time</b>	

List **2** things you have learnt over the last 4 sessions:

**1** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**2** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# Mind Map

4 things I have learnt from this sex and relationships course

The diagram features a central cartoon character of a boy with short black hair and glasses, smiling. Four rectangular boxes with rounded corners are arranged around him, connected by lines. Each box contains a number in a black circle: '1' in the top-left, '2' in the top-right, '3' in the bottom-left, and '4' in the bottom-right. The boxes are currently empty, intended for the user to write their answers.

## Sex and Relationships Final Evaluation

Tick the face that best describes how you felt about each session.

(Facilitators may need to remind students of the contents of each session)

Session 1			
Session 2			
Session 3			
Session 4			
Session 5			
Session 6			
Session 7			



**Which was your favourite session and why?**



**Which was your least favourite session and why?**

## Decide which type is right for you

There are 15 methods of contraception available. Listed are the 10 most commonly used by young people. This guide gives a brief overview of the different types.

If you are thinking about having sexual intercourse, the best thing to do is speak to a nurse or doctor about which method best suits you.



## Male Condom

Thin rubber which fits over the penis when erect and stops sperm entering the vagina.

### Use / How often?

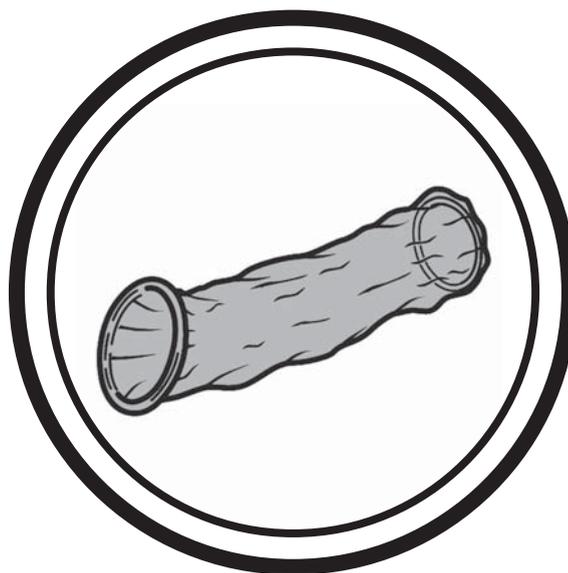
Every time you have intercourse.

### Effectiveness

95% effective if used according to instructions.

### Additional Information

- Non hormonal method.
- Best form of protection against STIs such as chlamydia and gonorrhoea but will not protect against all STIs.
- Free from contraceptive clinics and C Card scheme.
- Can interrupt sex.
- May slip off or split if not used correctly.



## Female Condom

Soft, thin Polyurethane sheath which is fitted inside the vagina. Works by stopping sperm entering the vagina.

### Use / How often?

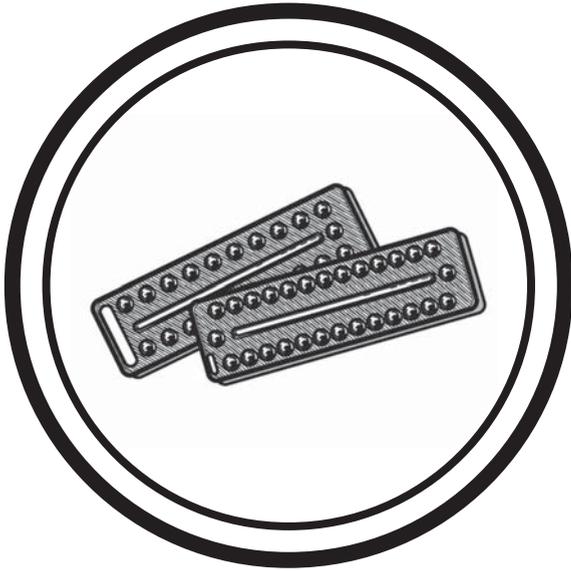
Every time you have intercourse.

### Effectiveness

95% effective if used according to instructions.

### Additional Information

- Protects against STIs such as chlamydia and gonorrhoea but will not protect against all STIs.
- Non hormonal method.
- Can interrupt sex
- Need to make sure the man's penis enters the female condom and not between the female condom and vagina.



## Combined Pill

Pill containing oestrogen and progestogen.

### Use / How often?

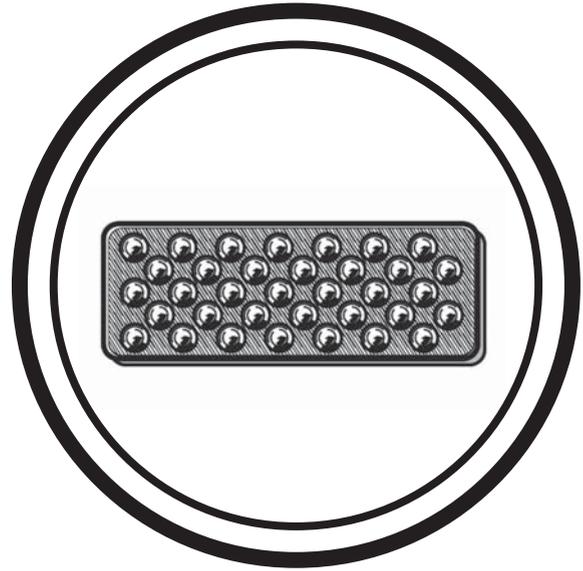
Daily

### Effectiveness

99% or more when used correctly.

### Additional Information

- Often reduces bleeding and period pain.
- Useful for young healthy women who can reliably take the pill.



## Progestogen Pill

Pill containing progestogen only.

### Use / How often?

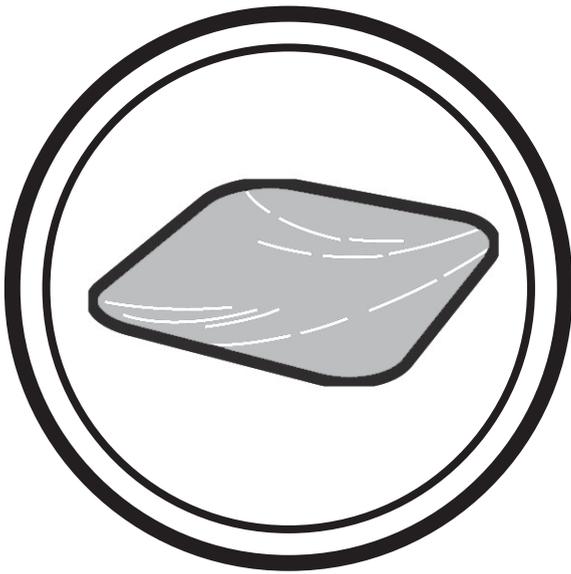
Daily

### Effectiveness

99% or more when used correctly. Suitable for women who cannot take oestrogen.

### Additional Information

- Suitable for women who cannot take oestrogen.
- Can alter bleeding patterns.
- Some women will not have a period.



### Contraceptive Patch

A small patch (looks like a plaster) stuck to the skin releasing oestrogen and progesterone.

#### Use / How often?

Use daily. Replace weekly. Applied only once a week for 3 weeks out of 4.

#### Effectiveness

99% or more when used correctly.

#### Additional Information

- May be seen on the skin.
- New patch has to be used each week for 3 weeks out of 4.



### Vaginal Ring

Small, flexible ring put into the vagina which releases oestrogen and progesterone.

#### Use / How often?

Use daily. Only needs to be replaced once a month, not affected by sickness or diarrhoea.

#### Effectiveness

99% or more when used correctly.

#### Additional Information

- Need to learn how to insert the ring.
- Ring must be used for 3 weeks out of 4.



## Contraceptive Injection

Progestogen based injection.

### Use / How often?

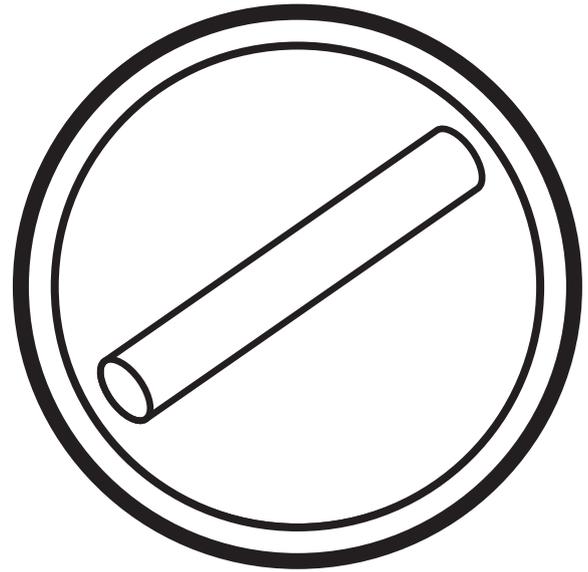
Every 3 months

### Effectiveness

Over 99%.

### Additional Information

- Useful for women who cannot regularly remember to take their contraception.
- Cannot be immediately reversed in event of side effects.
- Many women have changes in their periods.
- Can take some time for fertility to return to normal.
- Not affected by other medicines.



## Implant

Small rod containing progestogen inserted into the arm.

### Use / How often?

Every 3 years

### Effectiveness

Over 99%. Effective and rapidly reversible method.

### Additional Information

- Useful for women who cannot regularly remember to take their contraception.
- Many women have changes in their periods.
- Insertion and removal must be performed by trained healthcare staff.
- 20% of women have no periods with this method.
- Not affected by other medicines.

**IUS**

Tiny plastic T-shaped progestogen releasing device inserted into the womb.

### **Use / How often?**

Once fitted, lasts for up to 5 years

### **Effectiveness**

Over 99%. Effective and rapidly reversible method.

### **Additional Information**

- Useful for women who cannot regularly remember to take their contraception and would like long lasting contraception.
- Many women have changes in their periods.
- Insertion and removal must be performed by trained healthcare staff.
- 70% of women have no periods with this method.
- Not affected by other medicines.

**IUD**

Small plastic and copper device. When fitted in the womb prevents the sperm meeting the egg or may stop an egg settling in the womb.

### **Use / How often?**

Once fitted, lasts for 5-10 years

### **Effectiveness**

Over 99%. Effective and rapidly reversible method.

### **Additional Information**

- Useful for women who cannot regularly remember to take their contraception and would like long lasting contraception.
- Good for women who don't like taking hormones.
- Insertion and removal must be performed by trained healthcare staff.

# Ice breakers

Icebreakers are a useful tool for helping young people to communicate with one another in small groups, enabling a good atmosphere for learning and participation. They can be particularly useful in relation to sex and relationship education, especially at the beginning of the course when participants might be feeling nervous and embarrassed about the content of the workshops. They are also useful to get everyone at ease and feeling more comfortable to work together at the beginning of each session, hopefully resulting in active participation throughout the more serious content of subsequent workshops.

Everyone has their own favourite ice breakers and there are lots of them, so we have just selected a few to get you started. Most resources offer a range of ice breakers and there are plenty on the internet if you Google them. You might need to adapt them depending upon the cognitive abilities of students, any impairments or physical disabilities which may impact upon their involvement.

## Check List

- It may be useful to discuss individuals with their tutor and how the students work together as a group before your first session if you haven't worked with them before.
- Choose ice breakers appropriate for the group's cognitive and physical abilities and how they interact with each other. No group is the same.
- Some students, for example those with autism, may not want to be singled out within a group, so ask people if you want a volunteer rather than selecting someone unless you know for sure they would be happy in that role.
- If something is not working move on to another exercise and keep activities short to assist concentration.
- Finish each ice breaker while young people are still enjoying it. If they get fed up this mood may carry on to your workshop.
- It might be useful to introduce something to do with sexual health into your ice breakers to get people laughing and feeling comfortable at the start.
- **Most importantly, be enthusiastic and have fun** - if you appear bored, they probably will be too!

## Ice breakers – examples

### “Line Up”

Ask the group to line up. Works best with 8-10 in a line. If you’ve got a bigger group split them up and make it into a competition to see who finishes first. Ask the group to form a new line in order of one of the following

- Height, from smallest to tallest
- Birthdays, from January through to December
- Shoe size, smallest to largest
- Alphabetical first names, A through to Z

This is a good energiser and gets the group talking to one another.

### “Supermarket”

A first player says “I went to the supermarket to buy an apple (or any other object you can buy in a supermarket that begins with an “A”). the next player repeats the sentence, including the “A” word and adds a “B” word. The next player might buy a “Condom”. Each successive player recites the sentence with all the alphabetical terms, including one of his or her own. For example; “I went to the supermarket and bought an apple, banana, condoms, dog food, envelopes, Femidom”.

### “Human Bingo”

This is a good activity for groups who don’t know each other well. Photocopy the Human Bingo Sheet (T15), or make your own. Supply pens and pencils. Each box contains a statement such as someone who has blue eyes, someone who has slept in a tent, someone who has a dog, someone who likes maths etc. Encourage the group to mix, talk to everyone to try to complete their card. If one of the items on the bingo card relates to the person they are talking with, have them sign their name in the box. End the activity after 10 minutes and review some of the interesting facts the group has discovered about each other. You can add your own statements, appropriate for your group.

### “Would you Rather”

Questions may be trivial or more serious. Place a line of tape down the centre of the room. Ask the group to straddle the tape. When asked “would you rather?” they have to jump to the left or the right as indicated by the leader. Prepare a list of approximately 20 questions such as; ‘be bald or completely hairy’; ‘...have an ice cold bath or a bath full of baked beans’; ‘...walk in a forest at night or walk in a desert in the blazing hot sun’; ‘...drink Coca-Cola or Pepsi’; ‘...ensure world peace or find a cure for cancer’; ‘...swim in a tank of sharks or hold a tarantula in your hand’.

Someone who has blue eyes  <input type="text"/>	Someone who wears glasses  <input type="text"/>	Someone who likes X-Factor  <input type="text"/>	Someone who likes coffee  <input type="text"/>
Someone who has slept in a tent  <input type="text"/>	Someone who likes dancing  <input type="text"/>	Someone who watches Eastenders  <input type="text"/>	Someone who has brown eyes  <input type="text"/>
Someone who has a dog  <input type="text"/>	Someone who likes football  <input type="text"/>	Someone who has a sister  <input type="text"/>	Someone who has a birthday in Summer  <input type="text"/>
Someone who likes maths  <input type="text"/>	Someone who likes swimming  <input type="text"/>	Someone who can ride a horse  <input type="text"/>	Someone who likes cats  <input type="text"/>
Someone who is good at spelling  <input type="text"/>	Someone who likes using Facebook  <input type="text"/>	Someone who likes watching Waterloo Road  <input type="text"/>	Someone who likes coming to college  <input type="text"/>

1 **Q Parents still have the legal right to withdraw their children from sex education classes.**

**A TRUE:**

Parents still have the right to withdraw young people from sex education in schools (PHSE). Parents cannot withdraw young people from lessons which cover reproduction and sexual health as part of the National Curriculum.

2 **Q Under the Sexual Offences Act 2003 young people under 13 can no longer expect to get confidential advice and treatment.**

**A FALSE:**

Under the Sexual Offences Act 2003, young people under 13 can still get confidential advice, treatment or information.

**HOWEVER:**

Under Nottingham City Safeguarding Board guidelines, all under 13's must be referred to Social Care or a Child Protection Lead. If a referral is not made then records should be kept outlining the reasons for not referring the young person.

The law sets the national precedent for each local authority. Authorities can then either be in line with the law or stricter than the law. Whatever position the authority has taken, you **MUST** follow the local guidelines first. To not do so could professionally place you in a very vulnerable position.

3 **Q Sexual contact between professionals and consenting 16 and 17 year olds that they work with is a sexual offence.**

**A TRUE:**

Although the age of consent remains at 16, protection of care has been extended to under 18s in situations where there can be said to be an 'Abuse of a Position of Trust'.

The only exemption is if a relationship existed prior to the working relationship or the two individuals involved are married. However, professional guidelines should dissuade working relationships between those with a personal vested interest in another person.

4 **Q Grooming a child or young person under 16 with the intention of meeting for sex, even if a meeting never takes place is a sexual offence.**

**A TRUE:**

Under the Sexual Offences Act 2003, the 'intent to commit' is as serious as actually committing an offence. The aim is to be more proactive in preventing sexual offences rather than reacting to a situation after an incident.

- 5 **Q Under the Sexual Offences Act 2003 the act of 'incest' has been extended to include non-blood relatives in 'familial' child sexual activity.**

**A TRUE:**

Incest as an offence has historically been drawn from the Biblical book of Leviticus. However under the new legislation the act of incest has been extended to 3 groups:

- 1 Blood relatives
- 2 Step/foster/adoptive siblings
- 3 Anyone who has had a 'familial' relationship (i.e. a close relationship similar to that of a family member) with that young person.

- 6 **Q Rape can only be committed by a man and involves vaginal, anal or oral penetration without consent.**

**A TRUE:**

Rape can only be committed by a man because it has to involve 'penile penetration'. Women who are present at the scene of a rape, encourage or participate in the behavior can be prosecuted for 'assisting' rape but not for committing rape.

A new offence of assault by penetration is defined as penetration with any object to the anus or vagina.

- 7 **Q Under the Sexual Offences Act 2003 women can now commit a penetrative sexual assault that is considered as serious as rape.**

**A TRUE:**

Women can be charged for committing a sexual assault by penetration. This involves objects (e.g. bottles, vibrators) and fingers being used to penetrate another person anally and vaginally without consent.

Men can also be charged with this offence, but if penile penetration has occurred then they would be charged with rape.

Non-consensual sexual contact which does not involve any kind of penetration of the vagina or anus, such as inappropriate touching and forced kissing would constitute sexual assault.

- 8 **Q If two people get severely drunk and have sex, a sexual offence could be committed if one party later decides it was a mistake.**

**A MAYBE:**

The key test for this clause is whether consent has been given by either party to the sex. For example, If person A has taken active steps to ensure that person B couldn't give consent (through use of date rape drugs for example) then – Yes a sexual offence has been committed. But intent must be proven.

Cases which have involved voluntary excessive alcohol consumption have so far proved to be inconclusive. This is probably because it is much harder to illustrate intent.

9 **Q** The law concerning consent is the same for people with learning disabilities.

**A TRUE:**

The age of consent is the same for all groups regardless of learning disability or sexuality.

However, the law takes into consideration the assessed age of a person with learning disabilities if a sexual incident occurs.

10 **Q** A young person aged 16-18 having sex with someone aged 13-15 will be automatically committing a sexual offence under the new legislation.

**A TRUE:**

This is an automatic sexual offence, HOWEVER, only the Crown Prosecution Service can decide whether a case goes to court and they will only do so if a) there is a public interest and b) there is evidence to prove an offence has been committed.

This means that consensual sexual relationships between those under the age of consent, whether one or both of them are over the age of consent, will not be prosecuted.

**CONSENT is key.** Automatic referrals of under 16s without any child protection concerns, based solely on the age of the child, are inappropriate. There must be a valid child protection concern.

11 **Q** If a person is over 16 they are free to pose for commercial pornographic images.

**A FALSE:**

An individual would need to be aged 18 years or over in order to pose for commercial pornographic pictures. Any images of under 18s would constitute 'Indecent Photographs of Children.' This is because a young person is still considered a child until they reach 18 years in matters relating to sexual health.

12 **Q** It is legal to buy the sexual services of anyone over the age of 16.

**A FALSE:**

An individual selling sex for money would have to be over 18. If under 18 then they would be considered 'a child who is being abused.'

Prostitution is not illegal in the UK, but some of the practices associated with it are: such as kerb-crawling, soliciting and running a brothel.

Generally speaking, the offence is committed by the person who benefits from the sexual services of a prostitute (client, pimp, madam etc). Prostitutes can be prosecuted for soliciting because of the annoyance that it can cause.

13 **Q** If a person commits a sex crime involving children abroad they will be forced onto the Sex Offenders Register in the UK.

**A** **MAYBE:**

This is potentially true but on two conditions:

- 1 The principle of double criminality – the offence committed must be an offence in both countries. For example, in Cambodia the age of consent is 15. Therefore a 45 year old man having sex with a 15 year old girl is not committing an illegal act in Cambodia although they would be in the UK. Therefore the principle of double criminality doesn't apply.
- 2 The British Authorities are informed that an offence has been committed by a British national overseas. This can lead to the person being placed on the Sex Offenders Register too.

14 **Q** A parent of two consenting under 16s can take civil action against the other child under the 2003 Sexual Offences Act.

**A** **TRUE:**

They can take civil action but not criminal action (which only the Crown Prosecution Service can do). Criminal law is seen as an act against society, whereas civil law is where an individual feels aggrieved that some injury has been done to them. So, in respect of civil action, parents could potentially prosecute the other child.

15 **Q** Children or Young People who commit sexual offences face the same sentencing and notification guidelines as adult offenders (over 18s).

**A** **FALSE:**

Children and young people will mainly be charged a maximum penalty of 5 years sentencing. This is usually accompanied with rehabilitation programmes to try and correct any sexually inappropriate behavior.

However, if a serious sexual offence has been committed then the sentencing may be more severe.

16 **Q** A trafficking offence has been committed if a UK National child or young person is moved within the UK for sexual exploitation.

**A** **TRUE:**

There are two types of trafficking:

- 1 External trafficking (where individuals are deliberately brought into the UK for exploitative purposes).
- 2 Internal trafficking (where individuals, whether foreign nationals or British nationals are moved within the UK for sexual exploitation).

17 **Q** If two young people (under 18) record a live sex act on a phone, camera or digital recorder and that image is then shown to other persons, then a sexual offence has been committed.

**A TRUE:**

It is not the recording of the image that is illegal but the distribution of that image. Essentially, it would be considered 'indecent photographs of children', i.e. child pornography.

Many young people commit this offence without even knowing that it is a problem. Young people should be educated on these clauses and not instantly criminalized.

18 **Q** Only gay men can be prosecuted for a sexual offence if they have sex in a public toilet.

**A FALSE:**

NO-ONE is allowed to have sex in public toilets.

This used to be true pre-2003. It was basically an anti-cottaging (having sex in public toilets) measure. Individuals who have a conviction under the old offence can now apply to have it removed from their records.

19 **Q** It is a sexual offence to pass an STI to another person.

**A TRUE:**

It is a sexual offence to pass on any STI if it is done 'deliberately' or 'recklessly.' Whilst an individual may know they have an STI, the test would be whether they took sufficient precautions or were 'deliberate or reckless' in their actions.

20 **Q** A young person (A) is walking down the road. Another young person (B) is trying to catch their attention. When (A) passes (B), (B) touches his/her back pocket. Has a sexual offence been committed?

**A MAYBE:**

This would be an offence if the person receiving the touch felt it to be:

- 1 sexual
- 2 unwanted

If this could be proven, then yes a sexual offence has been committed. But the touch would need to be one which a 'reasonable person' would believe to be sexual.



# **Relationships**

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## Relationship Circles

This activity explores the many different relationships young people have in their lives and the different types of relationships and feelings they have with individuals.

- Ask the students to think about the different people in their lives they have relationships with, including people they come into contact with daily. List on a flip chart.
- Explain to young people that you are going to look at two characters named Jack and Chantelle and the relationships they have in their lives.
- Explain to the group that you are going to hand each of them a character from Jack/Chantelle's life. Some will be named characters such as "Bus Driver", "Teacher", "Mum", "Dad" etc. but some are just names. Young people may choose what relationships the latter have with Jack/Chantelle.
- Draw a small circle containing Jack/Chantelle's picture in the middle of a large sheet of paper. Ask the group to place each of the characters around Jack/Chantelle to show how close a relationship they would have with them. The closer to Jack/Chantelle the closer the relationship etc.
- Discuss how Jack/Chantelle would feel about different people in their lives.

# Relationship Circles

Jack



Chantelle



Jack's  
Mum



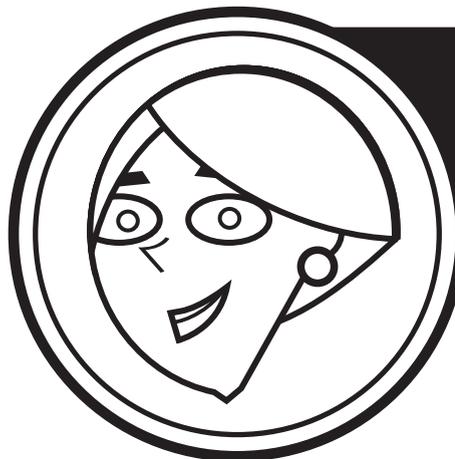
Jack's  
Dad



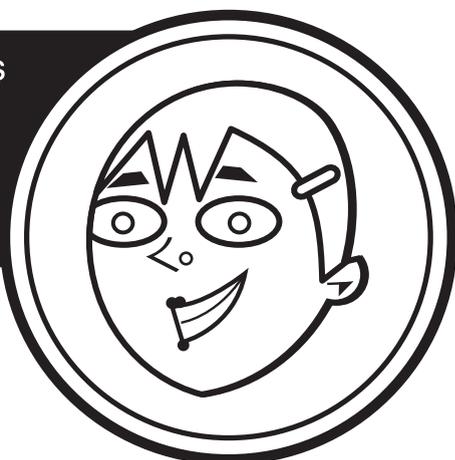
Jack's  
Nan



Chantelle's  
Mum



Chantelle's  
Sister



Chantelle's  
Grandad



Tom



Connor



Sophie



Paige



Aadi



Raj



Tristan



Simone



# Relationship Circles

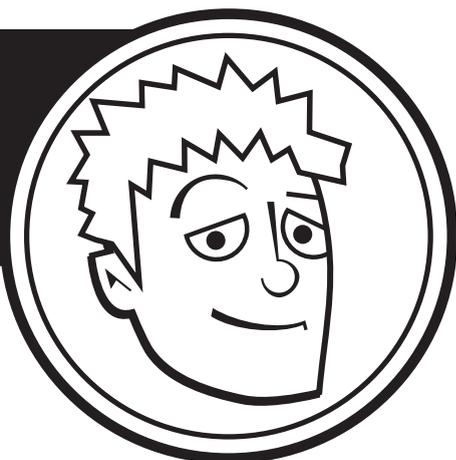
Doctor



Bus Driver



Cousin George



Liz Green,  
College  
Tutor



Post Office  
Counter  
Worker



Canteen  
Staff



College  
Security



Next Door  
Neighbour



## Liking and Loving

This activity explores young people's understanding of the differences of liking someone and loving them and gives them the chance to discuss the differences in feelings we have for different people in our lives.

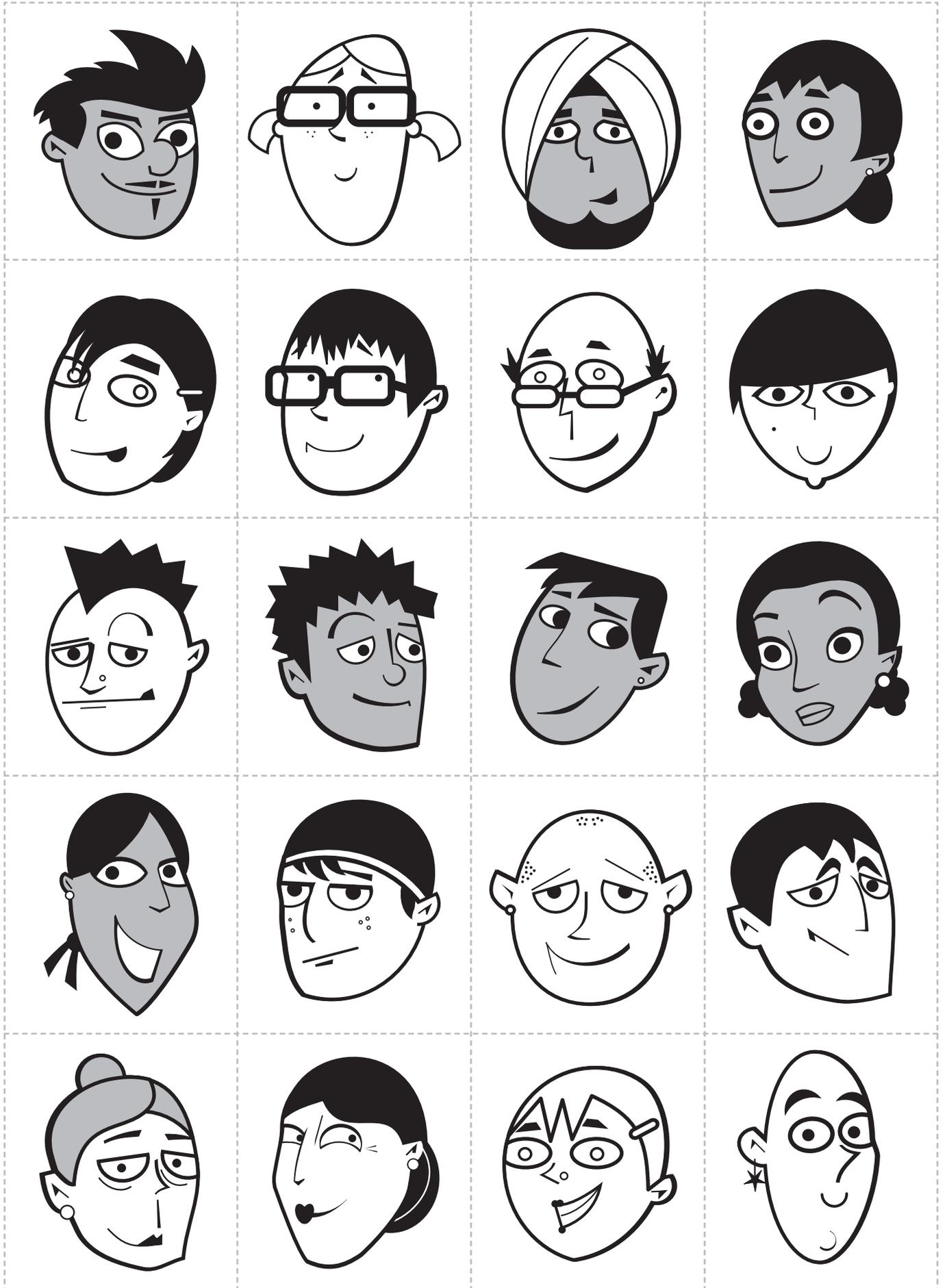
- On a large sheet of paper draw a straight line, and write LIKE at one end and LOVE at the other.
- Explain to the group that you are going to use the characters from the relationship circles exercise to look at feelings we have for different people we come into contact with.
- Using one of the characters, distribute their picture cards to each member of the group, reminding them who each picture is and their relationship with the chosen character.
- Ask the students to place each of the picture cards where s/he thinks it should go on the line and explain why they have placed it there. Discuss with the rest of the group.
- Discuss what the difference is between liking and loving someone. Look at the different feelings we have for different people, for example, would loving your mum be the same as loving your boy/girl friend?

**Alternatively you could use characters from a soap opera and look at the relationships they have in their lives.**

## Who Fancies Who?

This exercise explores Young People's understanding of attraction using the "Who Fancies Who? - Character Cards" or cut out's from magazines (representing a range of different ages, gender, race etc).

- Ask the group what their understanding of "fancying" someone is or "being attracted to" someone is; look at the feelings associated with this.
- Discuss what sexual feelings we may have if we fancy someone and how this would differ from liking someone who may just be a friend or acquaintance.
- Split the group into pairs and ask each group to pick two people out of the assorted pictures who they think may fancy one another.
- Ask the group to discuss amongst themselves why the characters may be attracted to each other.
- Get each group to feedback to the large group and discuss what they think attraction is.
- As a large group discuss what things can make people attracted to each other, i.e. looks, personality, clothes etc. If the group struggles with this part of the exercise, use examples of famous couples and discuss why they might be together.
- Ensure you explain that it's ok to be attracted to someone from the same sex, again use examples of famous/soap relationships.



# Friend or Boyfriend/Girlfriend?

## Friend or Boyfriend/Girlfriend?

Introduce this activity to the group by explaining that following on from relationships you will be looking at how you would behave if you were in a boy/girlfriend 'relationship' and how this may differ from other relationships.

- Place a friend card on one side of the table and boy/girlfriend card on the other.
- Show the group one behaviour card at a time. Ask the group whether they would undertake this activity with a friend, boy/girlfriend or both. Once the group have agreed, place the card on the appropriate side.
- Expand on the exercise and ask what other activities they may do with a boy/girl friend.

The facilitator may have to discuss the specifics of some activities in more detail for example the differences between kissing on the cheek and "passionate kissing".

**Friend**

**Boyfriend  
or  
Girlfriend**



Kiss



Hold hands



Talk about films and music



Talk about using contraception

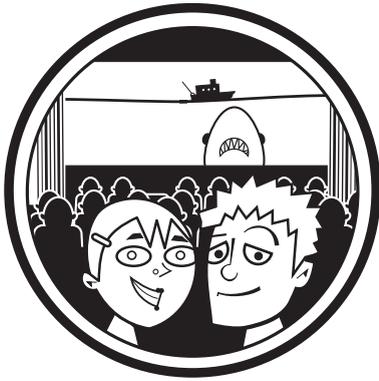


Visit each others' home

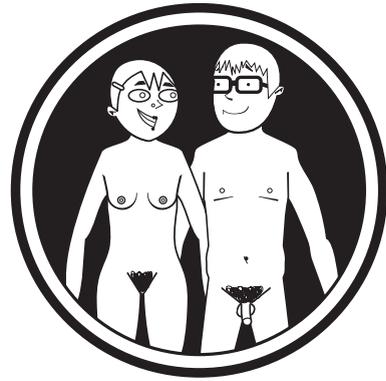


Hug

# Friend or Boyfriend/Girlfriend - Cards



Go to the cinema together



Be together in private, naked



Have sex



Touch each others' private parts of the body



Massage each other



Oral sex

**Friend**

**Boyfriend  
or  
Girlfriend**

## Lift Activity

This activity explores how relationships can develop and change, emotionally and physically.

- Introduce the group to the 2 characters, Jack and Chantelle (resources T5, T6). Explain that these 2 characters have met at college and are going to date. You are going to discuss their emotional and physical relationship and how they progress from their 1st date to 6 months on.
- Hand out the lift activity sheet and explain that each floor represents a month of their relationship. Explain that the 2 characters have just met and are going on a date. Ask the group to decide what they would do on this first date, for example, talk, hold hands etc.
- Word storm the different activities that the couple would do at each monthly stage of their relationship. Pick just 3 things for each stage and then write it on their worksheet. Continue this for each stage.

Ensure the group discuss and understand what is appropriate and inappropriate and clarify issues around consent (especially around sex). Also remind the group that the lift can always stop at any stage of the relationship and even go back down. They can decide when it's time to move on to the next stage. Emphasise that no one should have sexual intercourse until they feel ready.

## Adaptations

If the group struggle to word storm different activities, use the suggestion cards. Hand them out and ask the group to pick the activities they think happen at different stages of relationships.

**Note before doing this activity, make sure the group has discussed relationships between boy/girlfriends and same sex relationships.**

## Lift Activity Worksheet

Jack and Chantelle are about to start a 6 month relationship and you get to decide how their relationship develops from their 1st date to 6 months on. The 1st date starts on the ground floor – what do you think will happen?

The lift will stop at each floor. Under each floor write what the group have decided will happen in that stage of their relationship, what you think they should do and how their relationship progresses.

**1** ●  
●  
●

**2** ●  
●  
●

**3** ●  
●  
●

**4** ●  
●  
●

**5** ●  
●  
●

**6** ●  
●  
●

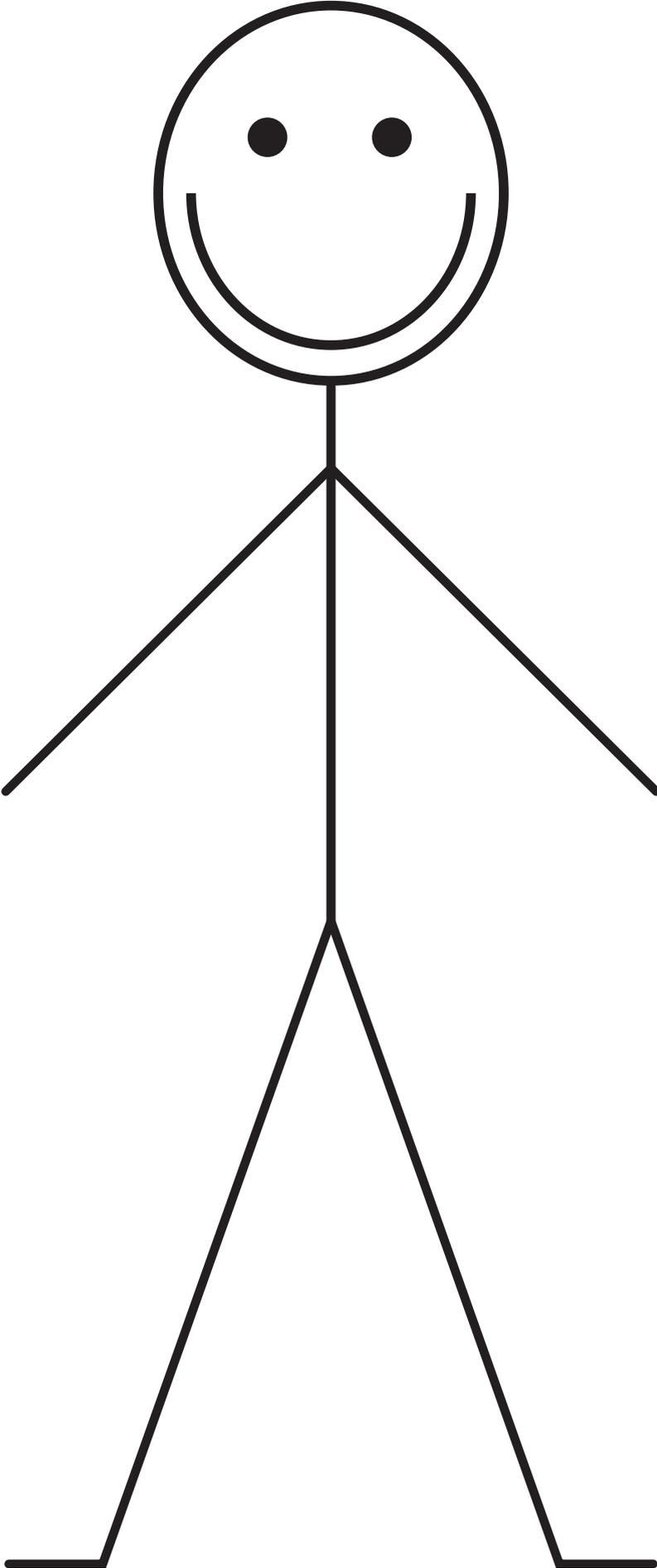
# Lift Activity - Cards

Go for a meal	Go to the cinema	Massage	Text messaging
Send a romantic text	Make sure they are safe	Masturbate	Go shopping
Stay up for hours just talking	Say I love you	Foreplay	Ice skating
Holding hands	Cuddling	Watch a DVD together	Romantic walk
Kissing	Flirt with each other	Have a nice bath together	Have sex
Talk	Get to know each other	Go to a party	Have a weekend away
Stroke each others' neck	Oral sex	Go dancing	Go swimming
Hang out with friends	Cook a meal	Go and get a C Card	Visit a sexual health clinic
Discuss using contraception	Touch private parts of the body	Buy each other a coffee	Give each other a compliment
Meet each others' families	Buy some chocolates	Talk about having sex	Play with each others' hair

## Relationships and Me

This exercise offers students the opportunity to think about relationships in their own lives and the feelings they may have towards other people. Ensure that you explain that this exercise is personal to them and that it won't be discussed as a large group, and that they do not have to show anyone what they have put on their worksheet unless they want to share it with the group.

- Give each member of the group a stick person worksheet and ask them to label it 'me'.
- Ask them to write the names of ten people they have relationships with (i.e. Boy/Girlfriend, friend, teacher, parent, bus driver etc.) around the stick figure.
- Under each person listed ask them to write one word which describes how they feel about that person.
- Discuss the many types of relationships students have in their lives and list general feelings they may have towards people (for example their doctor, their college friend, their bus driver).

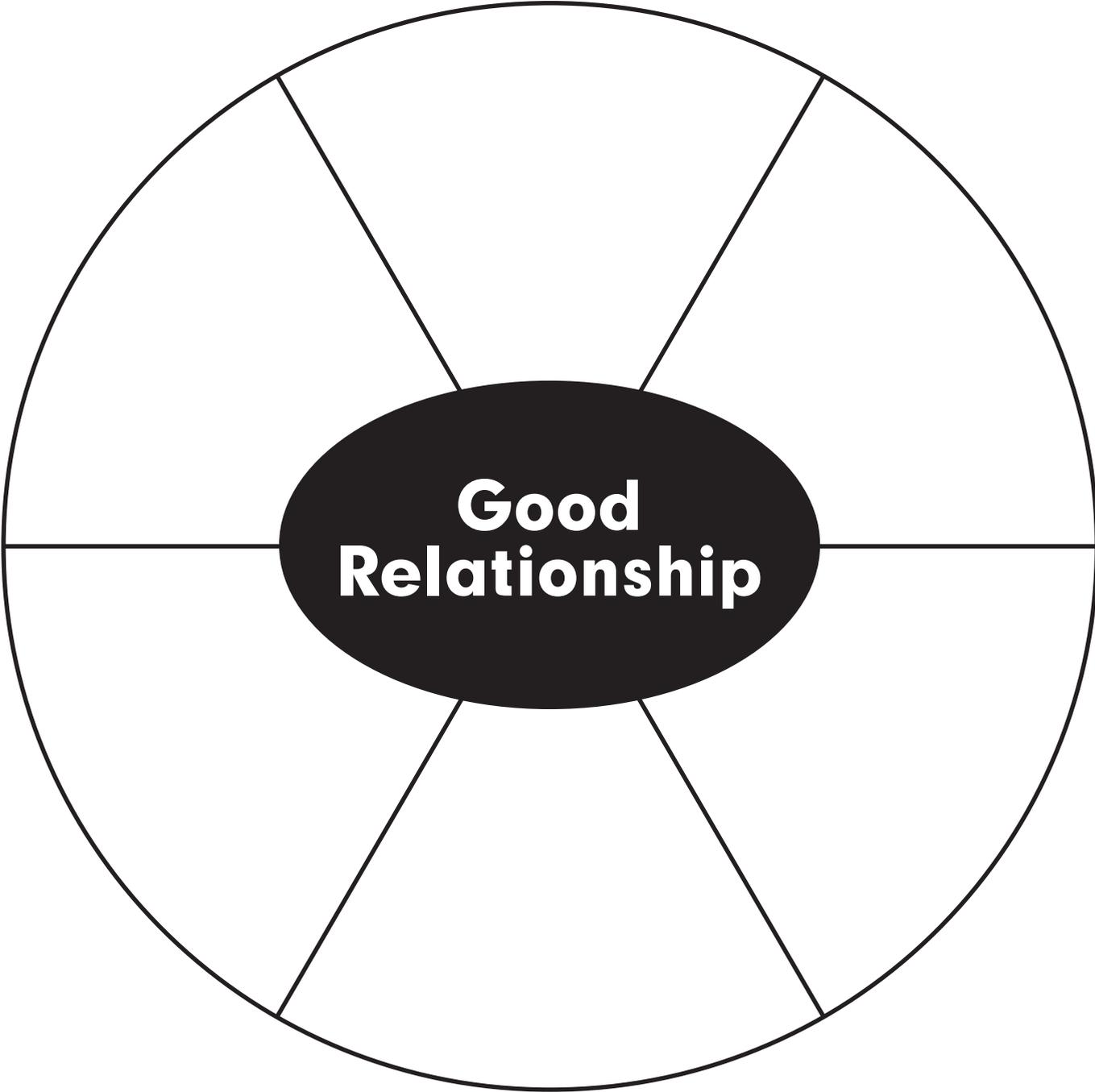


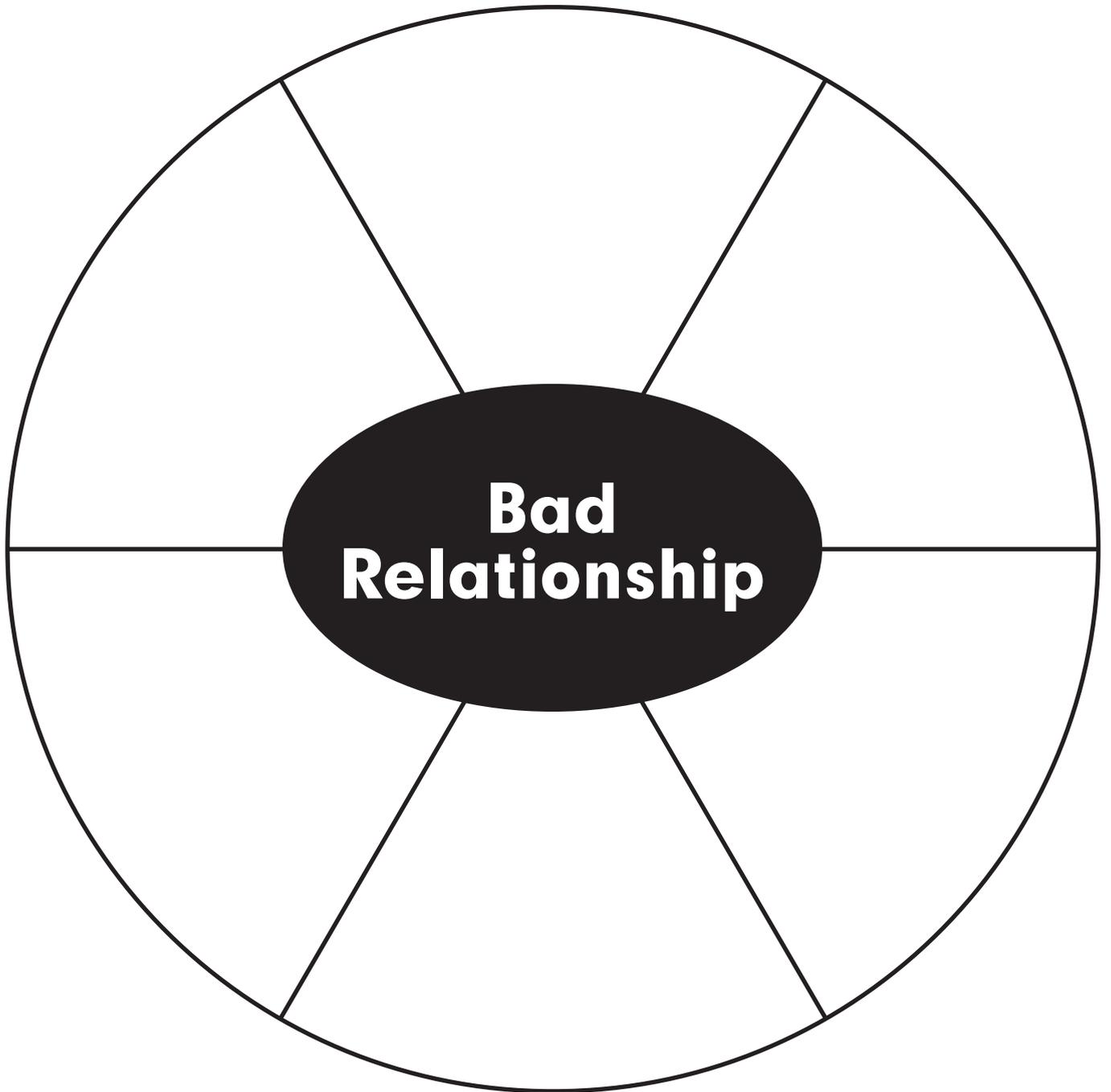
## Who's With Whom?

The aim of this exercise is to get young people thinking about relationships, and what attracts people to one another. Using celebrities or people from TV series gives students the opportunity to look at relationships which are good and bad without disclosing personal information.

- Cut out photographs from magazines, TV guides etc.
- Ask the group to wordstorm what the word “relationship” means.
- Explain that you are going to be looking at different relationships and attraction.
- Get the groups to think about the soap opera characters and the relationships they have in their lives with each other focusing on sexual relationships.
- Ask each group to consider who may fancy each other, why, what the attraction may be and look at sexuality.
- Ask each group to discuss whether their characters have good or bad relationships, and what situations they have got themselves in to.
- Using the worksheets R8 and R9, ask the group to list some of the qualities of a “good relationship” and some of the qualities of a “bad relationship”.
- Bring the group back together and discuss.

**This exercise works better if you are able to discuss current topical stories or storylines and the range of relationships occurring.**



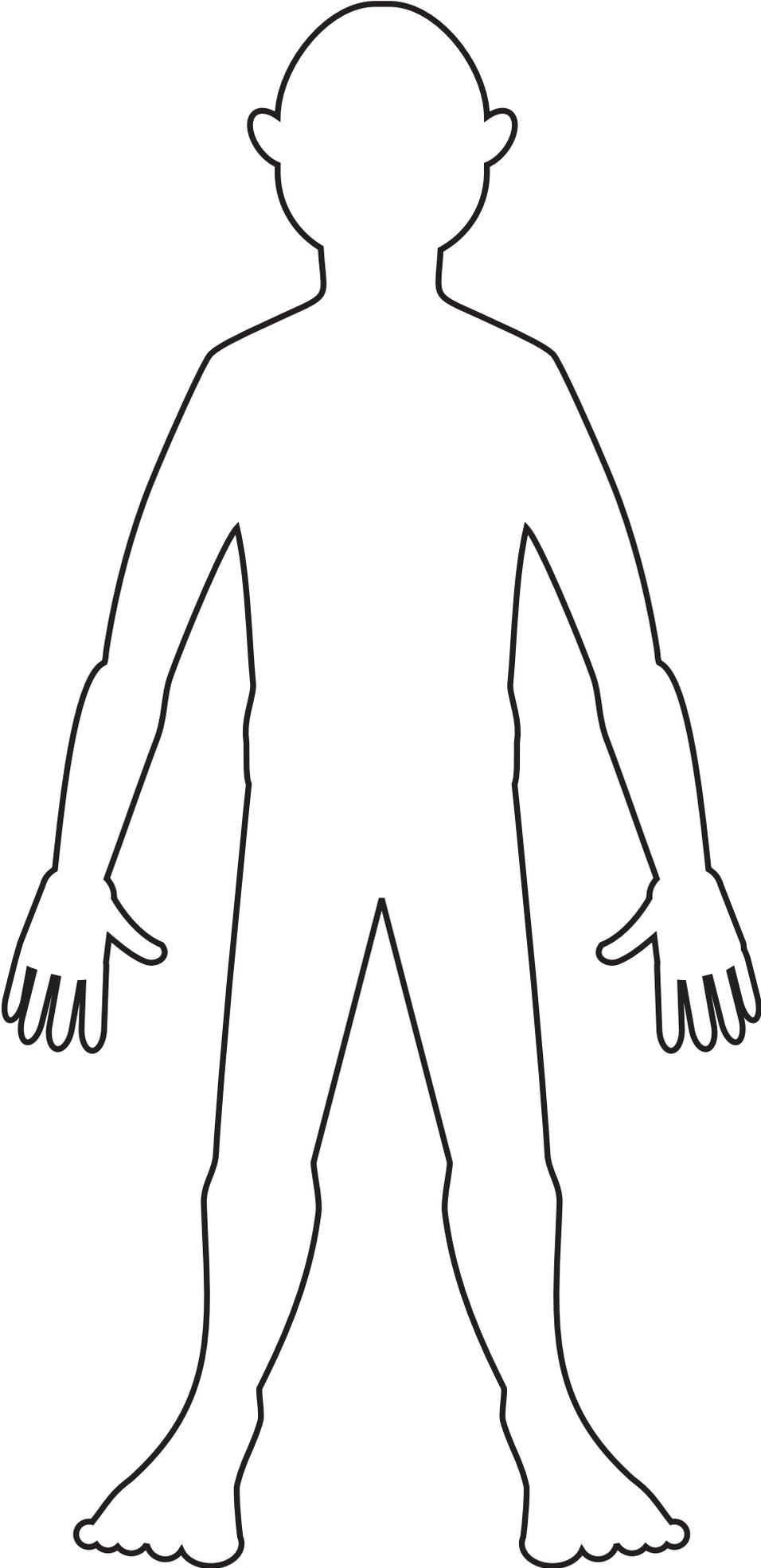




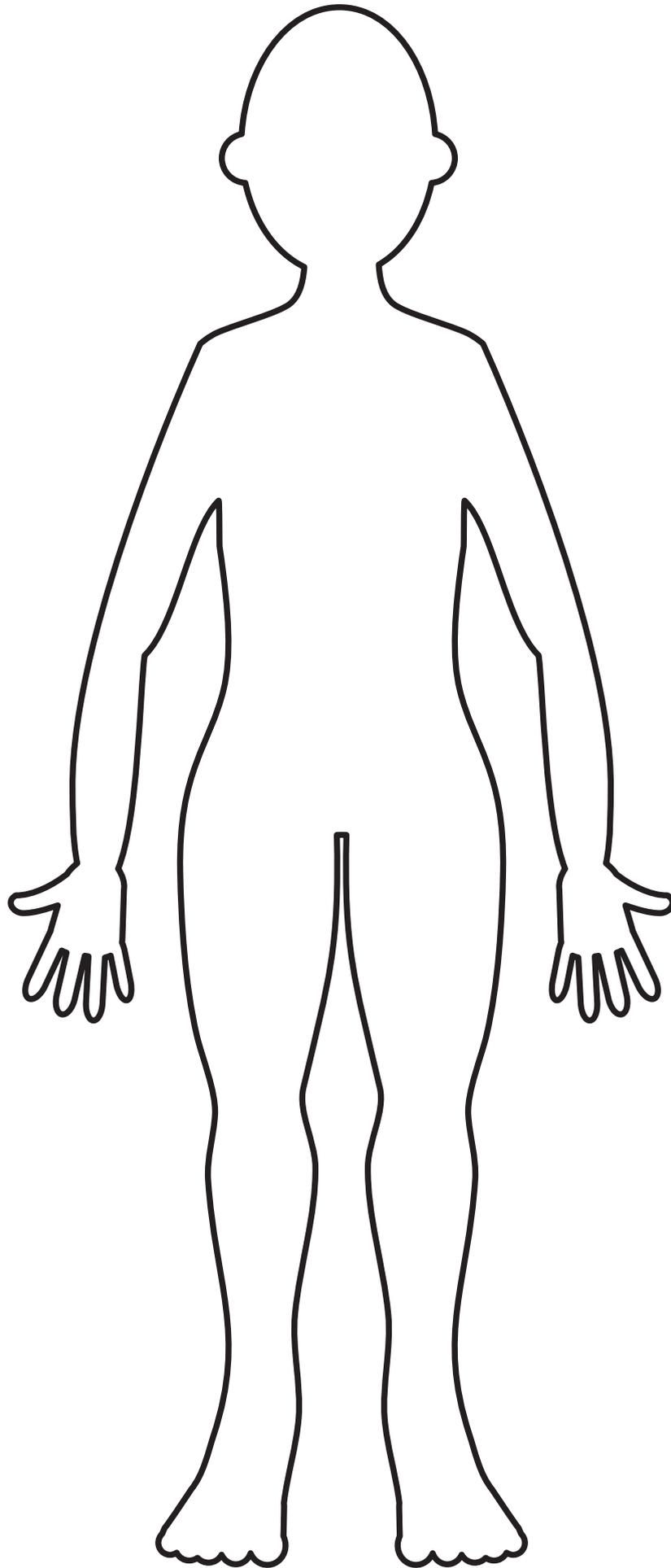
# **The Body**

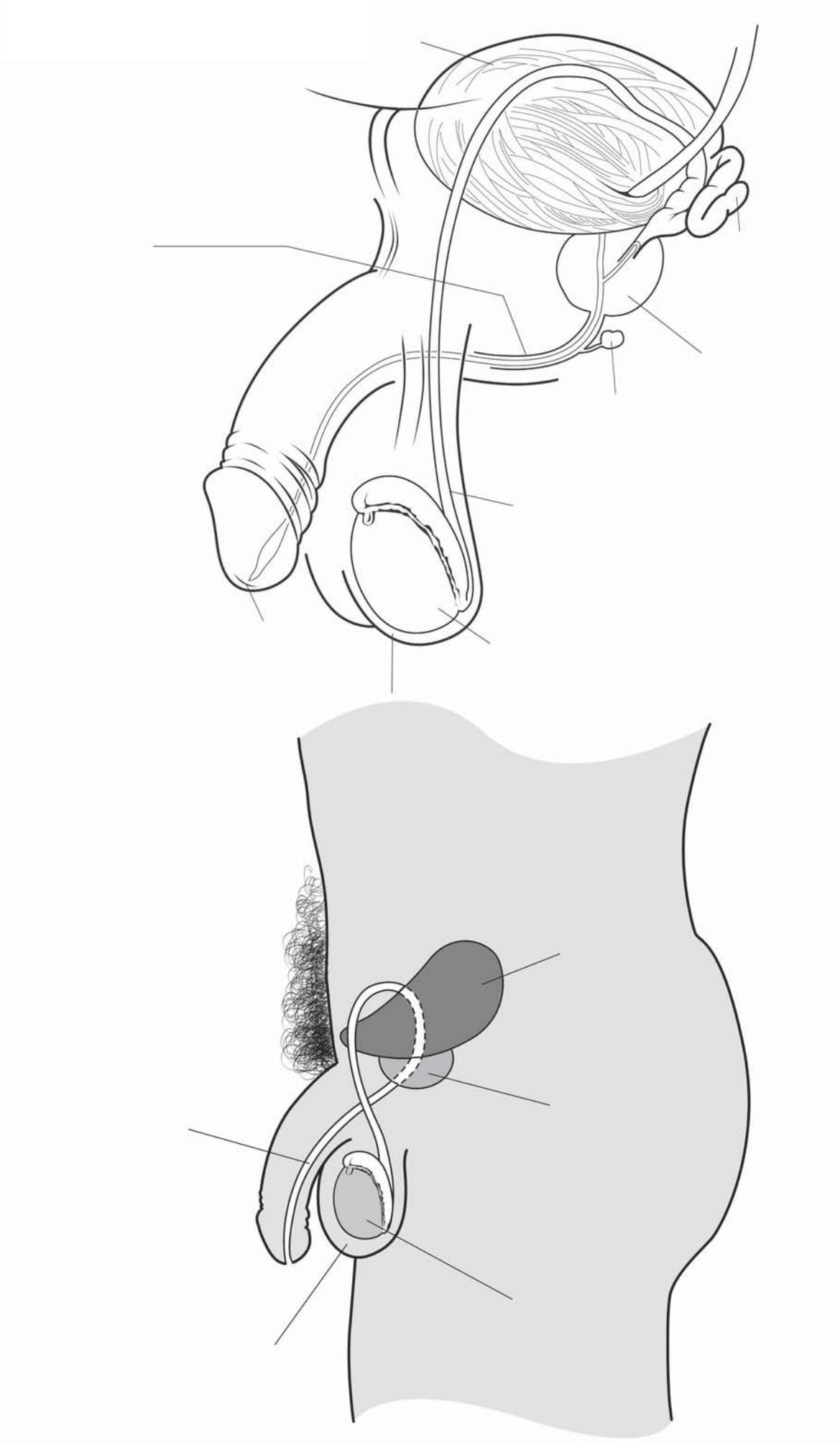
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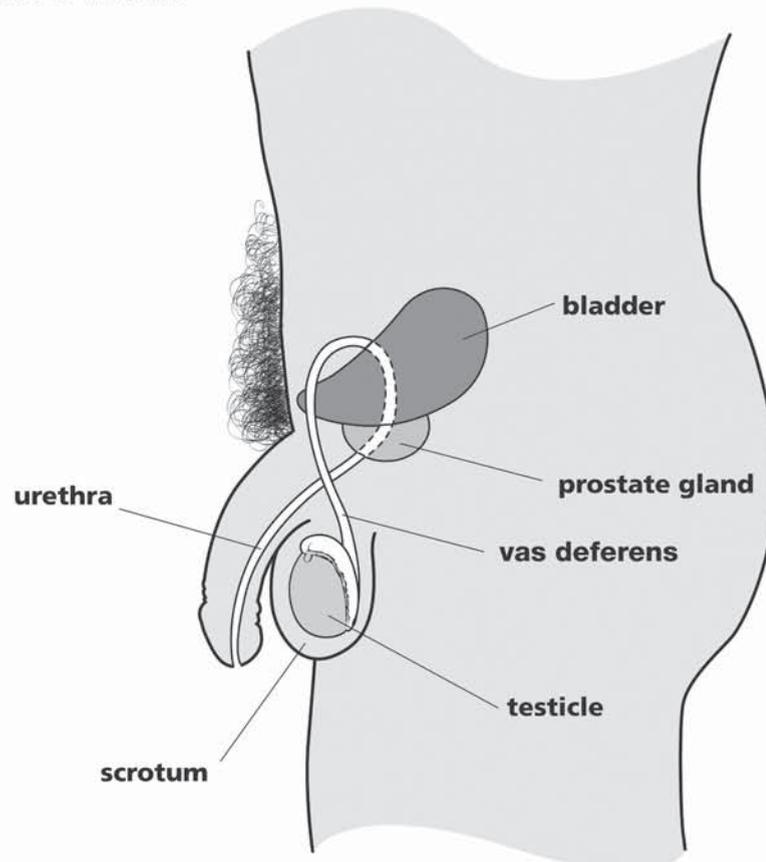
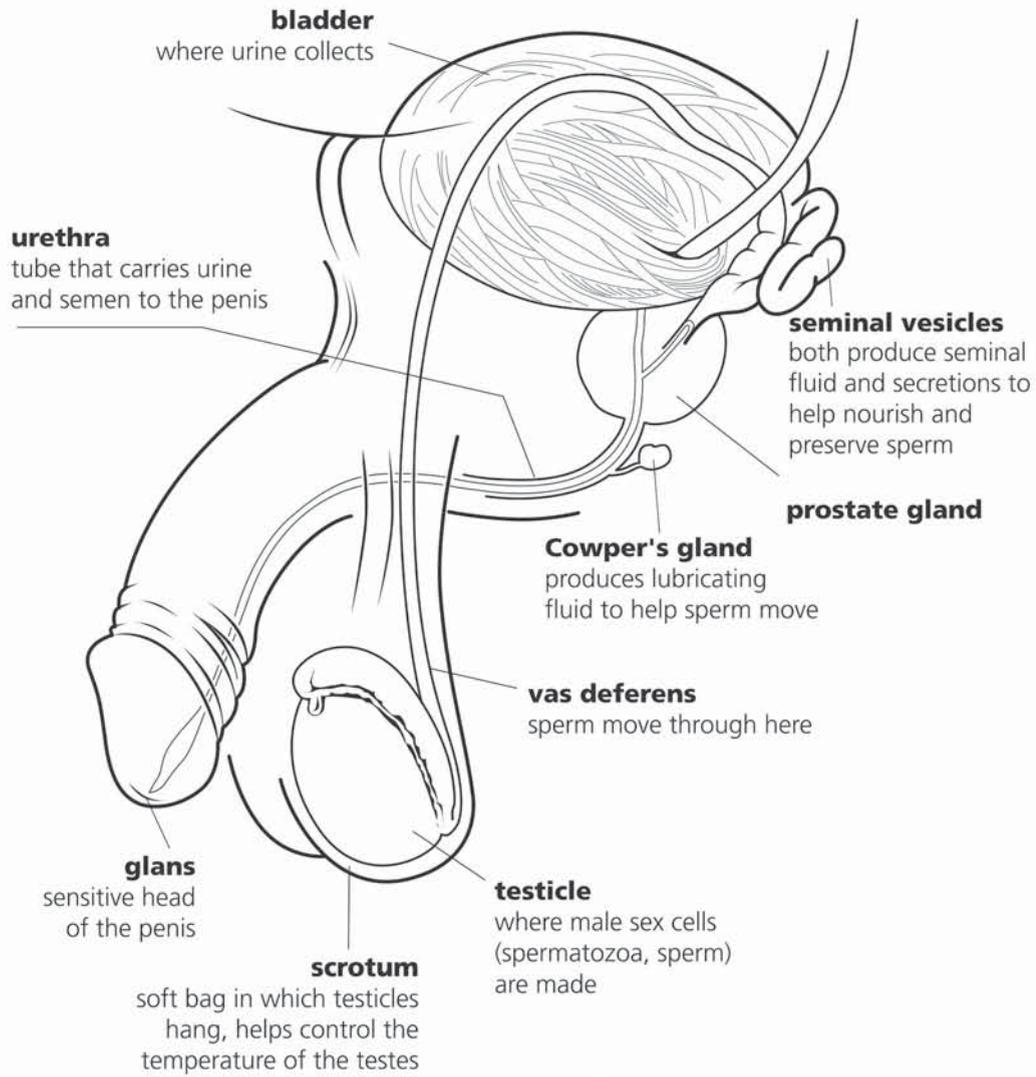


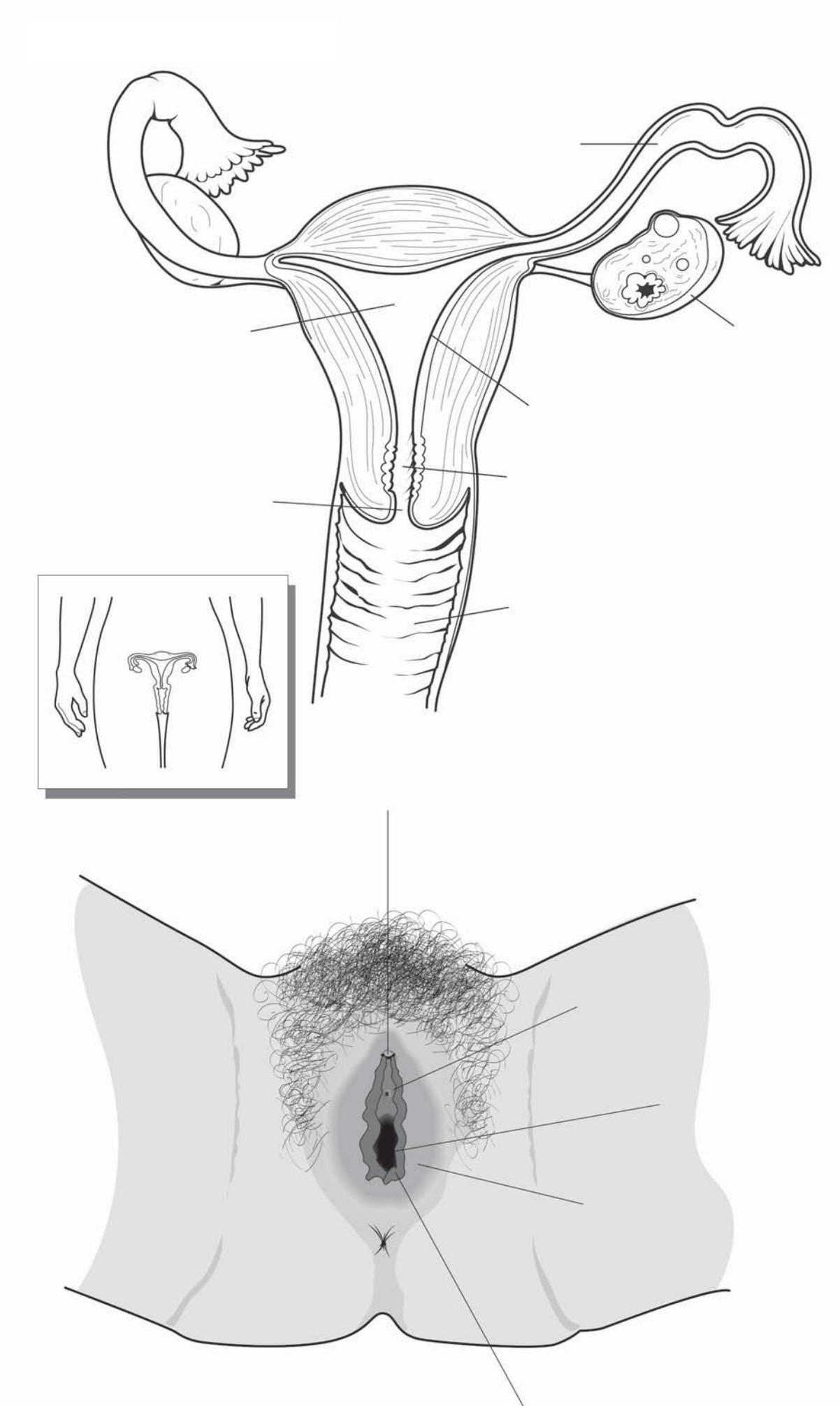
# Female Body Outline



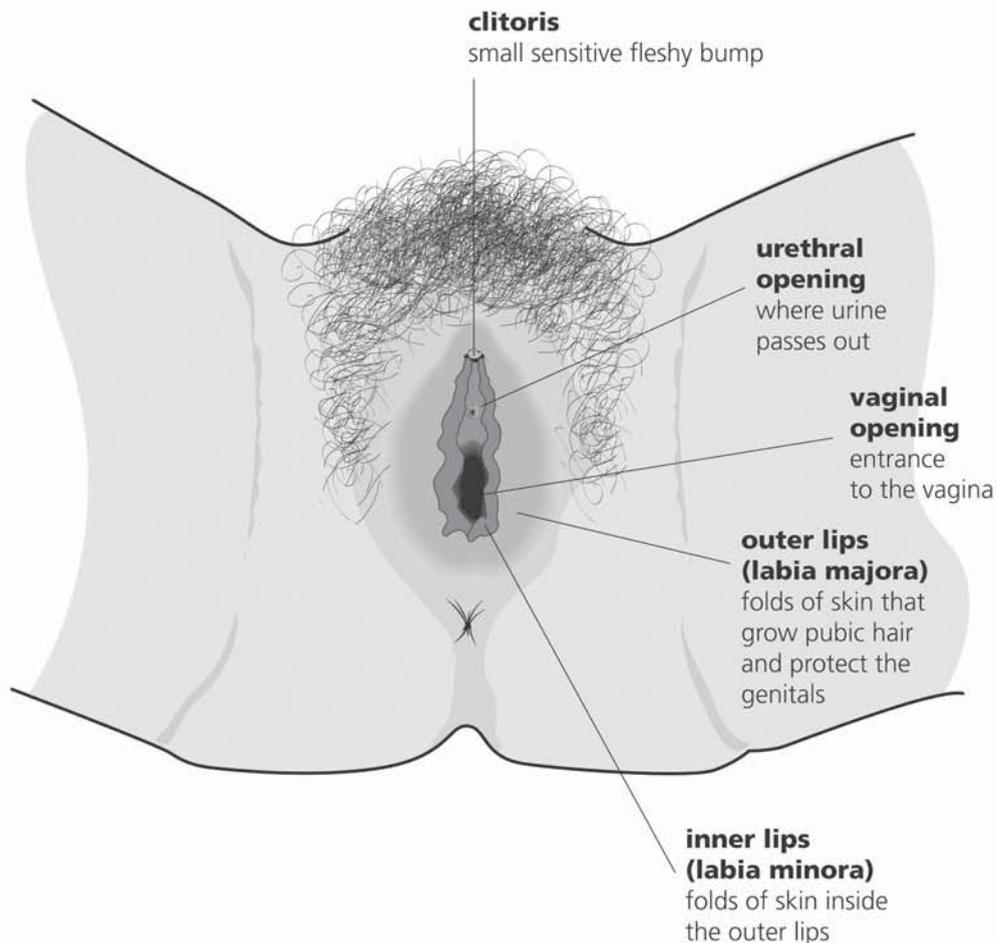
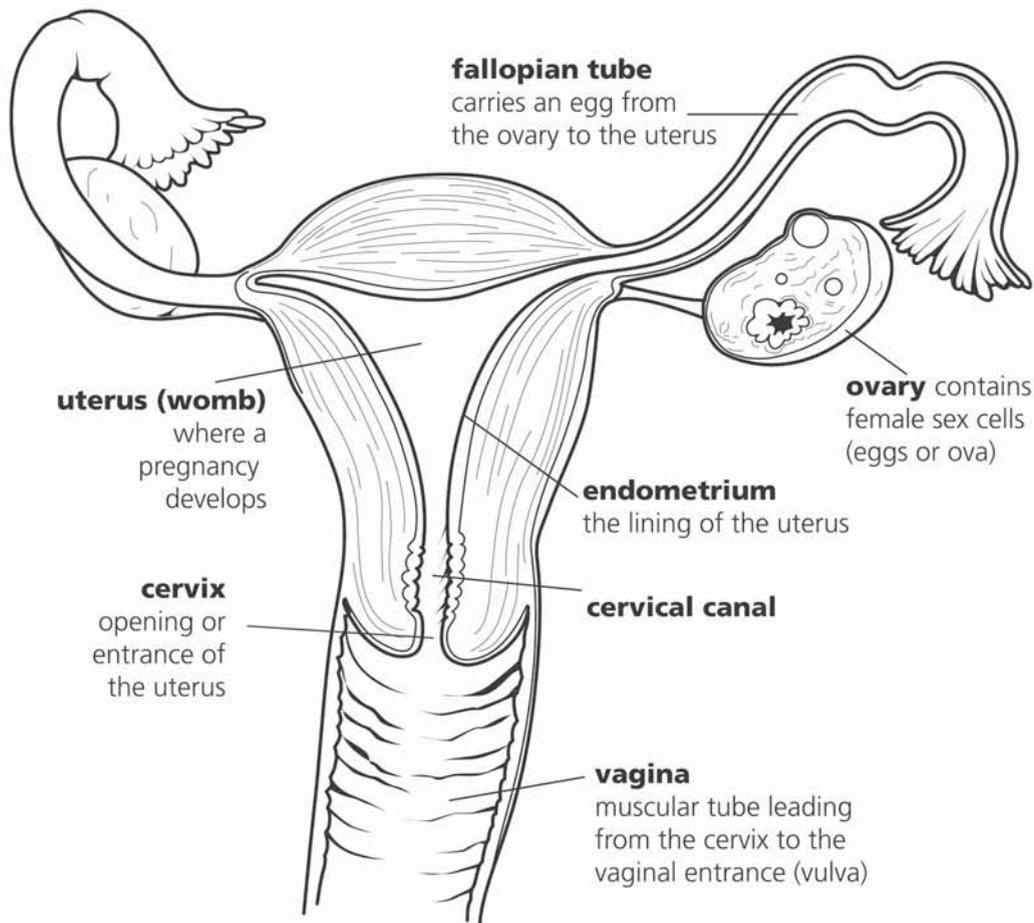


# Male Genitals Handout (labelled)





# Female Genitals Handout (labelled)





## Ovaries

The two ovaries on each side of the uterus are about the size of strawberries.



## Fallopian tubes

The two tubes are passageways through which an egg travels on its way to the uterus, each tube is about three inches long and the width of a drinking straw.



## Uterus

The uterus is hollow inside and is about the size and shape of a pear if you look at it upside down and is connected to the fallopian tubes.



## Testicles

The two testicles are soft and protected by the scrotum or 'ball bag'. Before a boy reaches puberty they are roughly the size of a marble but as he grows up they are about the size of a walnut.



## Vas deferens

The two vas deferens are about half a metre long and are flexible like cooked spaghetti.



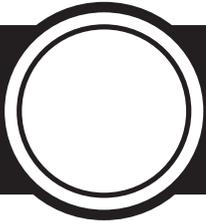


4

**Appropriate  
& Inappropriate**

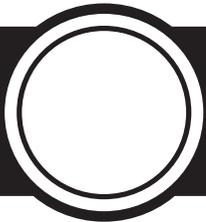
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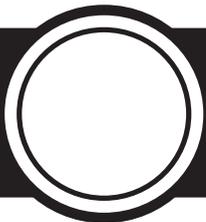
Words the group have agreed to use for

## **Female genitals**

Words the group have agreed to use for

## **Male genitals**

Words the group have agreed to use for

## **Sex**


# Public or Private Places



Is the **café**  
a public or private place?

Is the **bathroom**  
a public or private place?



Is the **park**  
a public or private place?





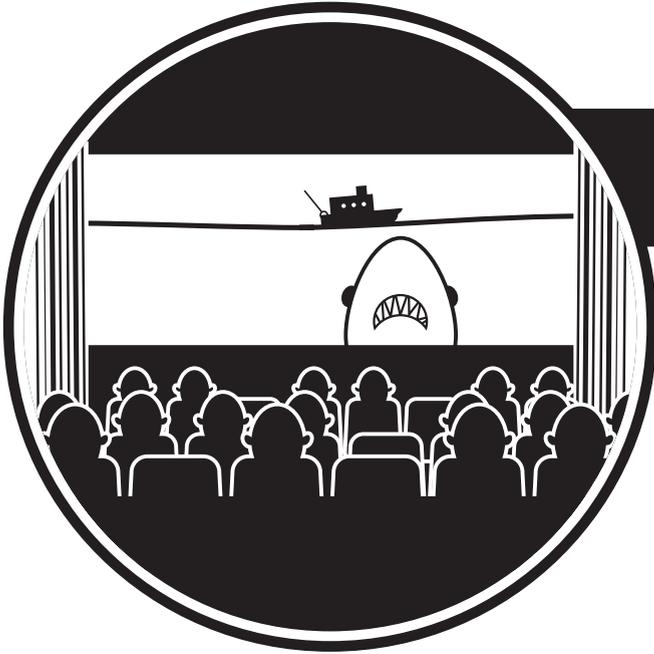
Is the **nightclub** a public or private place?

Is the **bedroom** a public or private place?



Is the **swimming changing room** a public or private place?

# Public or Private Places



Is the **cinema**  
a public or private place?

Is the **living room**  
a public or private place?



Is this **shared bedroom**  
a public or private place?



## Public and Private Activities



**What type of place is it ok to talk to someone in?**

- Public
- Private
- Both



**What type of place is it ok to wear your underwear in?**

- Public
- Private
- Both



**Heavy petting or passionate kissing is ok in which areas?**

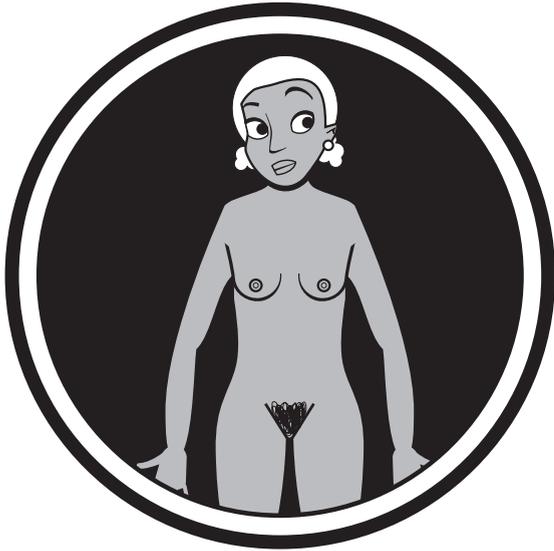
- Public
- Private
- Both

## Public and Private Activities



**Is it ok to masturbate in?**

- Public
- Private
- Both



**Is it ok to be naked in?**

- Public
- Private
- Both



**Is it ok to hold hands in?**

- Public
- Private
- Both

## Public and Private Activities



**What type of place is it ok to hug someone in?**

- Public
- Private
- Both



**Is it ok to kiss in?**

- Public
- Private
- Both



**Is it ok to dance in?**

- Public
- Private
- Both

# Appropriate or Inappropriate?

## Appropriate / Inappropriate Statements

Give each student a set of traffic light cards (T2) and explain that red is inappropriate/bad, yellow is unsure/don't know and green is appropriate/ok. Explain to the group that you are going to read out a statement and they have to state whether they think it is red, green or yellow. Ensure the group understand that it's not a test, it's only to check their understanding of appropriate and inappropriate behaviours. Ensure throughout the exercise any issues or misunderstandings are explained to the group and where necessary refer to the law (T19) etc.

- Is it ok to hug a tutor?
- Is it ok to walk up to a stranger and touch their bum?
- Is it ok to flash your private parts in a public area such as a park?
- Is it ok to masturbate whilst watching TV in a room with other people?
- Is it ok to hold hands with your parents in public?
- Is it ok to kiss your doctor on the cheek?
- Is it ok to walk into someone's private space without knocking?
- Is it ok to be naked in private?
- Is it ok to pull a stranger's trousers down in public?
- Is it ok for two people in a relationship to kiss in public?
- Is it ok to send someone sexual text messages (sexting)?
- Is it ok to make sexual comments to a stranger?

## Acceptable / Unacceptable Game

This activity aims to get young people thinking about their own values and those of their peers. Read each statement out and ask them to rate each statement as acceptable or unacceptable behaviour using the traffic light cards (red = unacceptable, amber = not sure, green = acceptable).

Parents discussing their sex life with their children

Two people having sex the first time they meet

An elderly couple holding hands as they walk along

A young couple kissing in public

A young man hitting his girlfriend because she has cheated on him

A young man kissing his friend's girlfriend

A young man telling his friends that he has had sex with his girlfriend

A young woman slapping her boyfriend during a play fight

A young man lying about his virginity

A young man crying at a party because he has been dumped

A lesbian couple holding hands in the cinema

A couple having sex in a car park after dark in a public place

A young couple having sex at a party while drunk

A gay couple cuddling at a party

A young woman fighting with another female who is going out with her ex-boyfriend

A young person meeting someone on their own who they met through facebook

# Where Would I Like to Kiss?

## Where Would I Like to Kiss?

This exercise enables young people to understand and explore negotiation, trust and sexual behaviour within a relationship by looking at whether it's ok to touch or kiss someone with their permission. The activity aims to ensure students understand issues about consent and the need to ask for permission for certain behaviour.

- Split students into 2 groups and give one team the naked "Jack" figure (T4) and the other the naked "Chantelle" figure (T3).
- Give each team 3 lip counters and 3 hand counters.
- Each team decides where the opposite team's character would like to touch their body, i.e. Team Chantelle decides where Team Jack would touch Chantelle in a loving relationship. To illustrate, they can place either a hand or kiss counter on that part of the body i.e. Team Chantelle decides that Jack will kiss Chantelle on her neck. Team Jack then decide on a body part etc.
- The groups then come back together and negotiate whether it is ok to touch/kiss those parts of the body. If both teams agree the lips or hand can remain on that part of the body.
- Ensure the group understands consent and giving permission as part of this exercise.

# Where Would I Like to Kiss? - Counters







**Sex**

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## Sex and Language Word Game

- Split the group into smaller groups of 3. Pass around one of the word cards (S1) and get the groups to discuss what they think it means. Then ask each group to feedback the meaning of the word on their card.
- Discuss what each word means. Encourage students to talk about what they may have heard in relation to the word and any other slang terms that relate to that word. Ensure the group get the correct meaning at the end of the discussion.
- Ask the group to agree which words are appropriate to use in specific circumstances such as at a doctor's clinic or amongst friends at college.
- Ask the students to complete the Sex Words worksheet for future reference, as they will be discussing relationships and sex in future workshops.

**NB. Give each group only one word at a time and discuss each one separately so that students gain a clear understanding of its meaning. This may also take a whole session as there are 24 words. If running a shorter session omit some words that may not be relevant or are self-explanatory. Put a comfort break in at a suitable break off point.**

**Erection**

**Orgasm**

**Wet  
Dream**

**Ejaculate**

**Period**

**Oral Sex**

**Anal  
Sex**

**Masturbation**

**Clitoris**

**Kissing**

**Foreplay**

**Vaginal Sex**

**Pubic  
Hair**

**Love**

**Sexual**

**Straight**

**Gay**

**Lesbian**

**Bisexual**

**Partner**

**Friend**

**Cuddle**

**Heavy  
Petting**

**Snogging**

**Sex and Language Word Game Worksheet**

Pubic Hair

Love

Sexual

Straight

Gay

Lesbian

Bisexual

Partner

Friend

Cuddle

Heavy Petting

Snogging

Orgasm

Erection

Wet Dream

Ejaculate

Period

Oral Sex

Anal Sex

Masturbation

Clitoris

Kissing

Foreplay

Vaginal Sex

## Sex is about...

The aim of this activity is to encourage young people to think about some of the positive and negative reasons why people may have sex.

- Explain to the group that you are going to look at reasons why people have sex and that you as a facilitator are going to read out 20 statements. They, as a group, then have to decide whether these are good reasons or bad reasons for having sex.
- If they think it is a bad reason then they place the card under the red cross card.
- If they think it is a good reason then they place it under the green tick card.
- Go through each of the statements and discuss where they've placed the cards and why they've placed them there.
- Ensure that issues around consent and permission are covered and young people understand.

Being in love

Having children

Caring for  
someone else

Fancying  
someone

Feeling  
nervous

Intercourse

Kissing

Having fun

Using condoms

Looking into  
someone's eyes

Holding hands

Being able to talk  
to someone

Catching  
infections

Something you do  
when married

The only way to  
show someone you  
love them

Being hurt

Something you  
do when drunk

Something  
you do with  
someone special

A one night stand

Staying together



## Yes or No?

The aim of this activity is to encourage students to think about how a relationship progresses physically and explore some of the reasons why people in relationships have sex.

- Explain that you are going to look at how the relationship between Jack (T4) and Chantelle (T3) has progressed and that they are thinking about taking their relationship a step further and having sex for the 1st time with each other.
- Using the “Yes or No? Cards” ask the group to decide whether they think it is a good reason for the couple to have sex or a reason not to have sex.
- Once discussed, place the cards into two piles, one for “good reasons” and one for “bad reasons”

This activity can be amended using the traffic light cards (resource T2) or using other voting methods.

They haven't got  
a condom

They fancy  
one another

All their friends  
are doing it

They are in a  
private place

They love one  
another

They are over 16

Their parents  
wouldn't want  
them to

They have known  
each other a  
short time

They aren't  
married

They trust  
one another

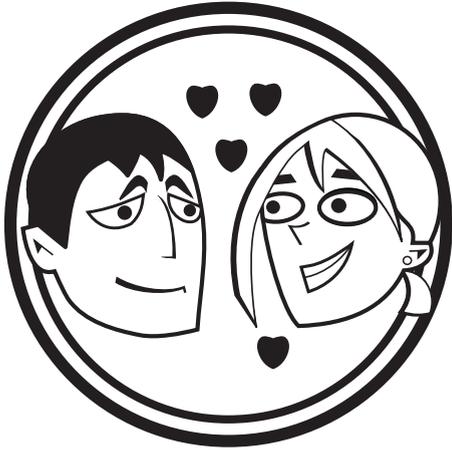
This is what they  
want to do

Everyone on TV  
does it

They want a baby

They really like  
each other

# Sex (what is it?) Worksheet



Jack and Chantelle are in love.  
They decide to have sex.

They are in a private room  
and will be undisturbed.

They both take off their clothes.

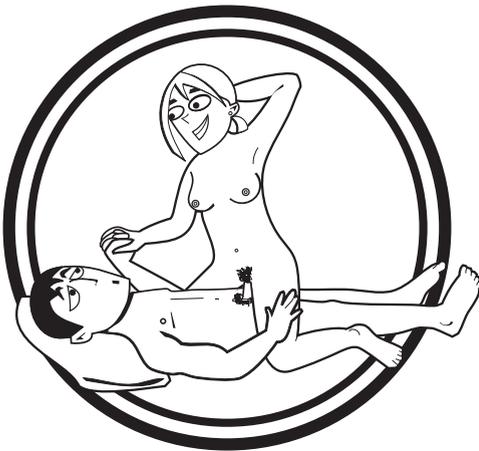
Jack and Chantelle both feel sexy  
and begin to kiss and touch each  
others private parts.

Chantelle touches Jack's penis  
and testicles. Jack touches Chantelle's  
breasts and clitoris.



Jack gets an erection.

He puts a condom on his hard penis so his  
semen will stay in the condom and not go  
into Chantelle's vagina.



Jack has the condom on his penis which he  
puts in Chantelle's vagina.

They both feel sexy and excited. Chantelle  
has an orgasm and then Jack has an orgasm.

Jack's semen has come out of the end of his  
penis into the condom.

Jack carefully takes his penis out of Chantelle's  
vagina, holding it so that none of the semen  
comes out.

He wraps the condom in tissue and puts it in the bin.

They cuddle and feel happy and contented together.



# **Contraception and STIs**

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## How to Use a Condom

**STEP 1**



Check packets for kite marks and that the condom is within the expiry date.

**STEP 2**



Push condom to the side and carefully tear the packet using the jagged edge and take the condom out.

**STEP 3**



Check it is the right way up, with the roll outside.

**STEP 4**



Wait until the penis is erect and hard.

**STEP 5**



Pinch the end of the condom to get rid of the air.

**STEP 6**



Unroll the condom to the bottom of the penis making sure you hold the condom tip with the other hand.

**STEP 7**



After sex, take the still hard penis out of the vagina making sure you keep hold of the condom. Then remove the condom from the penis.

**STEP 8**



Wrap the condom in a tissue and put it in the bin.

## What Goes Where?

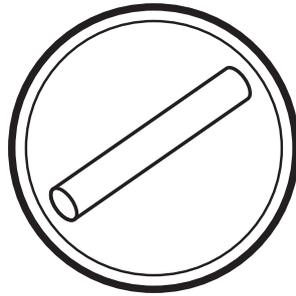
- Use resource T3 (Chantelle - naked) and the contraceptive kit or contraceptive cards (C2).
- Lay out the contraceptives or cards and ask young people to match them one by one to the parts of the woman's body. As each one is placed, explain what it's called and how it works, i.e. Pill by mouth, using hormones. Keep the description brief and simple.
- You may want to cut out and laminate the Contraceptive Types (T16, 1-5) and contraceptive cards (C2). You can also use FPA contraception leaflets for guidance.

NB. It may be helpful to ask someone from your local Contraception and Sexual Health Service to come and help deliver this session. Contraceptive display kits are available to purchase from the FPA, or you may be able to loan one from your local Contraception and Sexual Health Service.

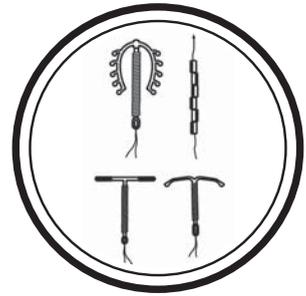
# What Goes Where? - Contraceptive Cards



Contraceptive Injection



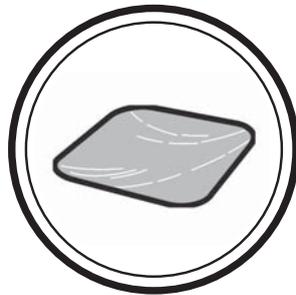
Implant



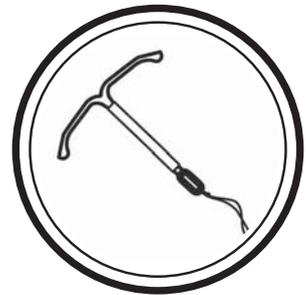
IUD



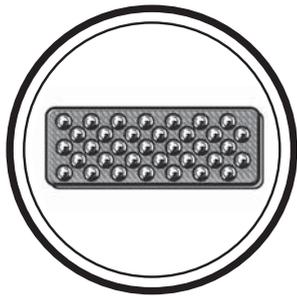
Vaginal Ring



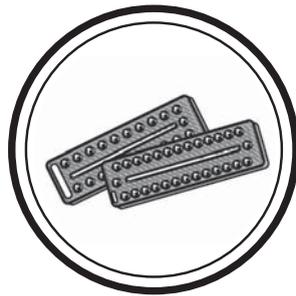
Contraceptive Patch



IUS



Progestogen-only Pill



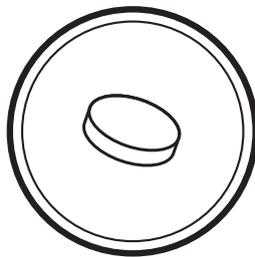
Combined Pill



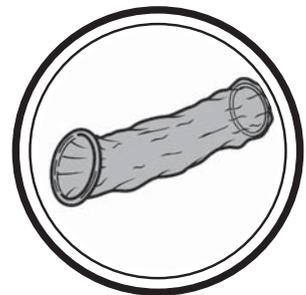
Male Condom



Natural Family Planning



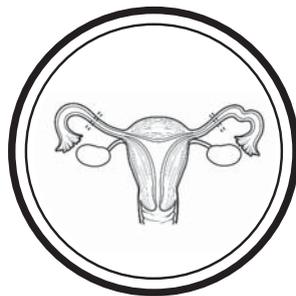
Emergency Contraceptive Pill



Female Condom



Male Sterilisation



Female Sterilisation



Diaphragm or Cap With Spermicide

## Contraceptive Case Studies

Read out each case study to the group (or smaller groups) and look at what each person:

- would need to talk to their partner about
- thinks would be the best time to discuss the issue
- thinks would be the best method.

Get students to complete each of the six case studies for their folder.

## 1

### Tyrone

Tyrone has not had sex but he hopes to soon, as he has a girlfriend he is very keen on. He doesn't think she has had sex with anyone either. He is a bit shy about using condoms as he has never used one before.



**2****Paige**

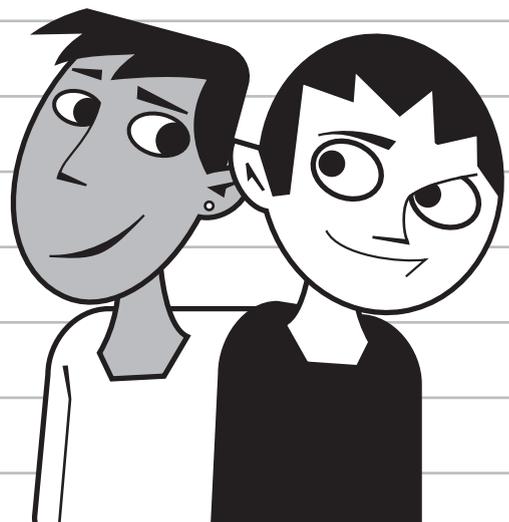
Paige has had a few sexual relationships. She is confident and assertive but her life is a bit chaotic and she is very forgetful.





**4****Kieron**

Kieron is in a steady relationship with Asif. They have kissed and cuddled and touched each others private parts but they would like to have intercourse.







## Albert

Albert has been dating Sam for four months, they are both virgins. They want to have sex but don't want a baby yet and don't want to use condoms all the time.





After sex, take out the penis while still hard making sure you keep hold of the condom and then remove from penis.



Wait until the penis is erect and hard.



Check packets for kite marks and that the condom is within the expiry date.



Wrap the condom in a tissue and put it in the bin.

# Condom Use Sequence Cards (2)



Pinch the end of the condom to get rid of the air.



Push condom to the side and carefully tear the packet using the jagged edge and take the condom out.



Check it is the right way up, with the roll on the outside.



Unroll the condom to the bottom of the penis making sure you hold the condom tip with the other hand.

## STIs

### Introduction to Sexually Transmitted Infections (STIs)

The aim of this session is to raise awareness of different STIs, transmission, symptoms, how they can be treated and, importantly, how they can be prevented.

- Wordstorm what students know about STIs and discuss as a group
- Discuss common STIs
- Show STI pictures (download from: [www.emfec.co.uk](http://www.emfec.co.uk)) and discuss how the STIs are passed, treated and their symptoms
- Discuss how to test for STIs and signpost to local services

**NB.** For this session it may help to get someone in from either your local CaSH or GUM clinic. More information can be found from the FPA leaflets if you are delivering the session on your own without a health professional.

### Facilitator Notes

**STIs are infections passed from one person to another through sexual contact.**

**Anyone can contract an STI – old or young, male or female, gay or straight, those who are single and sexually active, and those who are in a relationship.**

**Most STIs can be passed from person to person through:**

- Vaginal, oral and anal sex
- Close sexual contact
- Some can be passed from a mother to her child during pregnancy or childbirth
- Some can be passed from person to person through sharing needles or injecting drug equipment (i.e. through blood)

**Many STIs have no clear signs, while others have symptoms that appear then disappear, even though the infection still exists. Warning signs can include:**

- Unusual discharge from the penis or vagina
- Vaginal bleeding
- Rashes, open sores, blisters, itchiness, lumps or pain in the genital area
- A burning sensation when going to the toilet
- Pain during sex, painful testicles, pain low in the abdomen
- Going to the toilet more often than usual

**If someone has had unprotected sex they can consider talking to:**

- A doctor or local sexual health (GUM) or Contraception & Sexual Health (CaSH) clinic
- Their partner

**What are the important points to remember?**

- There are 25 known STIs and many have no clear signs, while others have symptoms that appear then disappear, even though the infection still exists
- Use a condom during all sexual activity where there is a possibility of sexual bodily fluids being exchanged. Fluid released from the penis in the early stages of an erection can contain sperm and organisms that cause STIs
- Seek medical advice if concerned - many STIs can be cured, but if not treated quickly, the infection could become worse and even cause infertility
- Chlamydia is the most common STI affecting men and women. Like all STIs it is transmitted through unprotected sex and can cause infertility in women if not diagnosed early. It may also affect men's fertility (i.e. their ability to have a baby)
- HIV - Human Immunodeficiency Virus – attacks the body's immune system and can eventually develop into AIDS (Acquired Immunodeficiency Syndrome). A weakened immune system leads to general poor health, making people vulnerable to recurring bouts of other infections and illnesses
- Some STIs are curable and some are not, however there are treatments available for all STIs to reduce symptoms
- Regular check ups at a clinic are advisable, especially if changing sexual partners, because many STIs don't have any symptoms

## Chlamydia

- Bacterial Infection
- Most males and females do not have symptoms
- Passed through unprotected vaginal, anal and oral sex
- In women signs may include: an unusual discharge or lower abdominal pain
- In men signs may include unusual discharge from the penis or pain when passing urine
- If left untreated it can cause serious long-term health problems such as infertility in men and women
- Self taken test which involves urine sample for males and lower vaginal swab for females
- Can be completely cured with antibiotics

## Gonorrhoea

- Bacterial Infection
- It is possible to have no symptoms
- Passed through unprotected vaginal, anal and oral sex
- In males can cause pain when urinating and an unusual discharge, which is often yellow or green
- In women symptoms can include pain when urinating or unusual discharge
- Does not cause any serious side effects if treated early, but if left untreated it can cause serious problems, e.g. infertility in men and women
- Sometimes known as “the clap”
- Self taken test which involves urine sample for males and lower vaginal swab for females
- Can be completely cured with antibiotics

## Syphilis

- Bacterial Infection
- Passed through unprotected vaginal, anal and oral sex
- Symptoms can be difficult to recognise but include painless sores on the genitals about 3 weeks after infection. This can progress to a rash spreading over the body; patchy hair loss
- If left untreated, it is a serious illness that can lead to damage to the major body organs and nervous system
- Treated with a course of antibiotics, and cured completely

## Genital Herpes

- Viral Infection. Passed through unprotected vaginal, oral and anal sex as well as close sexual contact
- Small and very painful blisters in the genital area. Other symptoms include itchiness or a burning sensation when peeing; sometimes people feel like they've got flu
- There is treatment to relieve the pain from the blisters. There is also treatment to reduce the intensity or frequency of the infection. Many people only ever have one outbreak of symptoms but the virus remains dormant so people could have further outbreaks

## Genital Warts

- Viral Infection. Passed through close sexual contact (skin to skin contact) or sexual intercourse
- Symptoms of genital warts are "cauliflower-like" growths on the genital area of men and women, this can take months or longer to appear. Sometimes the growths are flat and smooth
- No long term ill effects on health but do not look very nice
- Treated by Freezing or burning the growths. An ointment sometimes works but the virus remains inside people for life and the warts may return

## HIV - Human Immunodeficiency Virus

- Viral Infection. Passed through blood, semen, vaginal fluid, pre-cum or breast milk
- People may feel as if they have flu about 3 weeks after being infected. They may feel better and feel fit and healthy for a long time, therefore many people do not know they are infected unless they have a blood test
- It affects a person's immune system so it makes it hard to fight off illness and infections; this damage can get severe and can lead to illnesses so serious a person can no longer fight them off
- There is no cure or vaccine for prevention, but new drug treatments mean those infected can live long and healthy lives

## Hepatitis B

- Viral Infection. May not cause symptoms, but usually symptoms come in two stages 1-6 months after infection. First stage: people feel like they have flu and have little or no appetite. Second stage: jaundice (yellowish skin and white eyes); darkish brown urine; weight loss
- Can cause liver cancer and other liver damage
- There is no treatment. It is advised that people eat plenty of healthy food and get lots of rest. It can take months to recover
- Can be prevented with a vaccine before exposure

## STIs - Parasitic

### Pubic Lice

- Caused by a parasitic insect
- Can cause itching which can get infected if scratched raw
- Relatively harmless but cause people to feel uncomfortable because they crawl around on the pubic hair and are visible
- Can not get rid of them by shaving off pubic hair but they are easily treated with special shampoos and lotions

## Contraception Quiz

1. What does contraception mean?

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2. Name one place you can get condoms from?

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3. Name 3 different contraceptives?

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4. What can you do if a woman has sex without contraception or if the contraception doesn't work?

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5. What contraception is put into a woman's arm?

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6. What is the only contraceptive a man can use?

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7. Is contraception free?

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8. Which 2 contraceptives can prevent you getting a Sexually Transmitted Infection (STI)?

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**Staying Safe**

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- 1. It is illegal for under 16s to buy condoms**
  - a) True
  - b) False
  
- 2. It is a criminal offence for a person in a position of trust (for example, a carer, teacher or social worker) to engage in any sexual activity with a person under the age of 18, even if the basis for their relationship is consensual.**
  - a) True
  - b) False
  
- 3. The age of consent is (including gay men and women)?**
  - a) 14
  - b) 16
  - c) 18
  - d) 21
  
- 4. Which of these legal rights do 16 year olds have?**
  - a) To marry without parental consent
  - b) To change their doctor
  - c) To decide their own medical treatment without parental knowledge?
  - d) To enter into sexual relationships with members of the opposite sex
  - e) To vote
  
- 5. A young woman under 16 can have a legal abortion:**
  - a) On demand
  - b) If two doctors agree that she should
  - c) Provided that the father of the baby agrees.

# Sex and The Law Quiz

- 6. Which of these is illegal**
- a) Owning pornography that shows adults
  - b) Owning pornography that shows children
  - c) Owning pornography that shows adults who look like children
  - d) Looking at internet pictures of pornography that shows children.
- 7. If two people get severely drunk and have sex, a sexual offence could be committed if one party later decides it was a mistake?**
- a) Yes
  - b) No
  - c) Maybe
- 8. Only gay men can be prosecuted for a sexual offence if they have sex in a public toilet?**
- a) True
  - b) False
- 9. A young person (A) is walking down the road. Another young person (B) is trying to catch their attention. When (A) passes (B) touches his/her back pocket. Has a sexual offence been committed?**
- a) Yes
  - b) No
  - c) Maybe
- 10. If you show your genitals by accident, you can be prosecuted for indecent exposure?**
- a) Yes
  - b) No
  - c) Maybe

## Sex and The Law Quiz – Answers

- 1. It is illegal for under 16s to buy condoms**  
b) False
- 2. It is a criminal offence for a person in a position of trust (for example, a carer, teacher or social worker) to engage in any sexual activity with a person under the age of 18, even if the basis for their relationship is consensual.**  
a) True
- 3. The age of consent is (including gay men and women)?**  
b) 16
- 4. Which of these legal rights do 16 year olds have?**  
b) To change their doctor  
c) To decide their own medical treatment without parental knowledge?  
d) To enter into sexual relationships with members of the opposite sex
- 5. A young woman under 16 can have a legal abortion:**  
b) If two doctors agree that she should
- 6. Which of these is illegal**  
b) Owning pornography that shows children  
c) Owning pornography that shows adults who look like children  
d) Looking at internet pictures of pornography that shows children.
- 7. If two people get severely drunk and have sex, a sexual offence could be committed if one party later decides it was a mistake?**  
c) Maybe
- 8. Only gay men can be prosecuted for a sexual offence if they have sex in a public toilet?**  
b) False
- 9. A young person (A) is walking down the road. Another young person (B) is trying to catch their attention. When (A) passes (B) (B) touches his/her back pocket. Has a sexual offence been committed?**  
c) Maybe
- 10. If you show your genitals by accident, you can be prosecuted for indecent exposure?**  
c) Maybe

## Social Networking and "Sexting"

### Aim:

- To enable students to explore social networking sites and 'sexting', reflect upon their own online behaviour and examine safe and unsafe choices regarding internet and phone useage.
- Increase student's awareness of legislation in relation to internet and phone useage.

### You will need:

- Copies of "All&About.com" profiles
- Flip chart paper and pens
- Activity sheet
- Social Networking DVD ([www.thinkuknow.co.uk/teachers/resources](http://www.thinkuknow.co.uk/teachers/resources)) 'Matt thought he Knew' - It follows the story of a teenage boy who gets tricked online by a paedophile through a social networking site. The film is edgy and modern, bringing real life situations to the screen.
- 'Sexting' DVD ([www.thinkuknow.co.uk/teachers/resources](http://www.thinkuknow.co.uk/teachers/resources)) 'Exposed'

Professionals can register with [www.thinkuknow.co.uk/teachers/resources](http://www.thinkuknow.co.uk/teachers/resources) and gain access to free resources. CEOP also offer free training courses in order to enable staff to effectively use their resources and accompanying teachers notes.

### Steps:

- Outline the aim of the session to students, emphasizing it is about keeping them safe whilst on line and exploring issues around social networking sites and in relation to using their mobile phones and the implications of 'sexting'. Depending upon the pace your group works at you may want to split this into two sessions, one covering social networking and the other mobile phone useage and 'sexting'.
- Word storm social networking sites and record on flip chart. These are likely to include Facebook, Bebo, My space, Instant Messenger, BBM etc.
- Now ask the group how many of them use one or more social networking sites and record their responses against the sites.
- Ask what they like about using these sites.
- Word storm the common elements of their own and others profiles and what kind of information they put on their profiles and why.

- Now word storm the potential dangers associated with such profiles. (Be careful not to personalize this too much as some of the students may have had negative experiences themselves).
- Now show the DVD. CEOP have a range of DVDs which can be downloaded or purchased from their web site suitable for different age groups and genders depicting real life situations where young people have been groomed and/or sexually exploited on line. All have accompanying worksheets.
- Following the DVD ask the group to summarise what happened and how the situation could have been avoided.
- Ask the group to recall what information the character in the DVD gave out online – what could s/he have done differently? Remind them that it is impossible to be sure who someone is who they say they are on line.
- Ask the group where the character could have gone for help – this might include a parent or guardian or another trusted adult, CEOP, Police, teacher at College or Childline.
- Now divide the group into smaller groups and provide them with a sample "all&about" profile. Give them 5-10 minutes to complete an activity to highlight the safety mistakes made within the profile. Handout activity sheet (SS3).
- Ask the groups to feedback and ask them how the profile can be improved and made safer.
- Now ask the group to think about their own profiles.
  - How many friends have they collected?
  - Do they know them all?
  - Do they confirm all friend requests?
  - Did they put their email and mobile number on their profiles?
  - What privacy settings do they have if any?
  - Ask the group to look at their own profiles when they go home and make any changes necessary to ensure their safety. Also discuss privacy settings and if they are not sure how to set these to ask a trusted adult to help them.

## Intended Learning points:

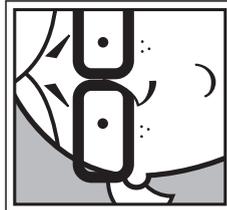
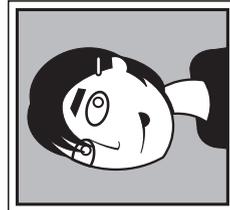
- Students will gain an understanding of appropriate behaviour when using the internet and their phones
- Increase their awareness of personal safety whilst using social networking sites and mobile phones and how to report abuse
- Consider the implications of their actions in relation to legislation

## 'Sexting'

- On flip chart paper ask the group to share their understanding of the term 'sexting' and record. Clarify a definition with the group to ensure a shared understanding. For example, someone taking an indecent image of themselves, i.e. without their clothes on or exposing their private parts such as their breasts or genitals, and sending it to their friends or boy/girlfriend via a mobile phone or some other form of technology is sometimes referred to as 'sexting'.
- Play the DVD from CEOP- 'Exposed'.  
*'Exposed' is a 10 minute drama about a 15 year old girl who makes a common mistake by sending indecent photos of herself to her boyfriend. Without thinking of the consequences he then forwards the photos to a friend and very quickly the images become public and everyone at school has seen them. As we watch, the distressed female character is helped through the situation by her alter-ego. Together they come to terms with the consequences of her actions and learn where to go for help and advice.*  
*The film is available for young people, parents and teachers to watch online. It is aimed at 14 to 18 year olds, although in practice teachers, trainers and parents may feel the film is suitable for those outside of this range.*  
*The film resource and supporting materials are available for teachers and trainers to download from the Thinkuknow website [www.thinkuknow.co.uk/teachers/resources](http://www.thinkuknow.co.uk/teachers/resources)*
- Ask the group to discuss the DVD and what the characters could have done differently.
- What are the consequences of sending sexy images over the internet and by phone?
- Discuss with the group that once images have been taken and sent to others, control is lost of them, they cannot be recalled and they can end up anywhere on the world wide web and not just for those they were intended for. They could be seen by friends and family, a future employer, or even, in some cases, end up in the possession of an offender!
- Inform the group that many young people have been bullied and harassed as a result of sending indecent images and that some young people have even killed themselves as somebody they may or may not have known used the images and technology to bully, harass or even try to locate them.
- Remind the group that if they wouldn't print and pass these images around College or show their mum/dad/teacher they are not appropriate to share via phone or other technologies.
- Clarify the law with the group. If a teenager had in their possession an indecent image of another minor (i.e. under 18), they would technically be in possession of an indecent image of a child, which is an offence under the Protection of Children Act 1978 and the Criminal Justice Act 1988. By sending indecent pictures of a person under 18 on to someone else they could be breaking the law

## Intended Learning points:

- Students will gain an understanding of appropriate behaviour when using the internet and their phones
- Increase their awareness of personal safety whilst using social networking sites and mobile phones and how to report abuse
- Consider the implications of their actions in relation to legislation

All&About  
comAll&About  
MyFriendsPaige  
PepperJackie  
Walters

## Sophie LeFleur

**Favourite quote:** "You can count a girl's wealth by the number of her friends"

**Birthday:** 23 March

**Age:** 15 years old

**Hometown:** Nottingham UK

**My email:** [sexsophie23@hotmail.com](mailto:sexsophie23@hotmail.com)

**Want to chat:** IM me on: [sexsophie23@hotmail.com](mailto:sexsophie23@hotmail.com)

**Looking For:** Fun, love, adventures!!!

I am crazy about netball. Every Saturday morning I play with my team the Broxtowe Ballgirls at my local sports centre.

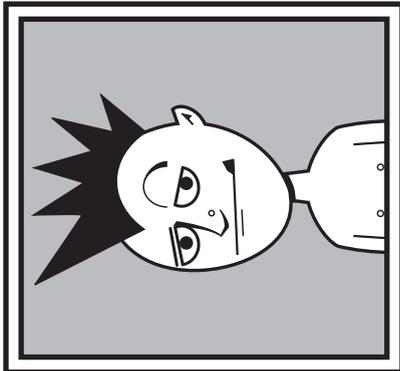
I also play badminton, every Tuesday after school with my little brother. He is much better than me, not bad for an 11 year old. If you wanna email him his address is [sneakysimonLF@hotmail.com](mailto:sneakysimonLF@hotmail.com). He is pretty geeky, but can be fun.

### Interests

I love love love travelling and me and my family are going to Florida on 2nd August for 2 weeks. Can't wait!!!

As well as sport I like lots of other funky stuff. Mostly fashion and Music. As both my parents work on Saturday nights I have lots of sleep overs and parties when me and my friends give each other make-overs and dance to Beyoncé. I love R+B, much better than the rubbish punk my brother is into!!! I really like shopping with my mates too. Every saturday we go to Primark and H&M.

Other than than that I like most things that involve going out and meeting people. I am realllllly easy-going and love to socialise and have fun.



## Charlie "Sparkie" Cooke

Nudge Charlie

**Favourite quote:** "Only give it if you can take it"

**Birthday:** 9th September

**Age:** 17 years old

**Hometown:** Nottingham UK

**My email:** CCSparkie@hotmail.com

**Want to chat:** IM me on: CCSparkle@hotmail.com

**Looking For:** Friends and like-minded individuals

Not much to say about me really. I am what I am. I go to college in Bestwood where I study dance and drama.

I have plenty of friends, mostly girls, who I love to spend time with. We like nothing better than to hang around "The Lions" on Market Square most evenings and every Saturday without fail.

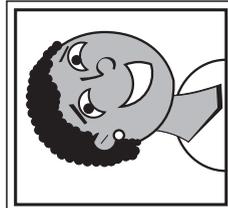
### Interests

I love theatre and the cinema, especially old classics like Grease and The Sound of Music. Although I do like some modern films like the Twilight Saga.

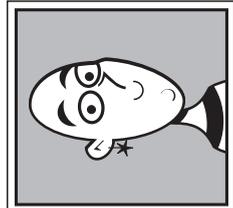
On TV I love love Glee - some days Rhonda (my best friend from college) and I pop on a series boxset and sing it through from start to finish. Rhonda has an amazing voice and I am sure will make it big one day. Watch out Hollywood, we are coming!!!

Other than singing and dancing I sometimes help my dad out in his pet shop "Pete's Pets". I have a special responsibility for looking after the budgies.

### All&About MyFriends



Rhonda Wilson



Tristan Thomas



**Favourite quote:**

**Birthday:**

**Age:**

**Hometown:**

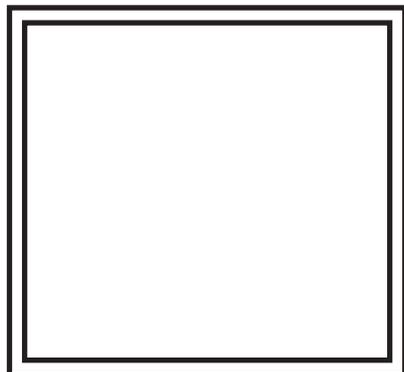
**My email:**

**Want to chat:**

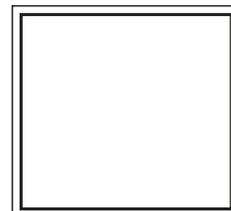
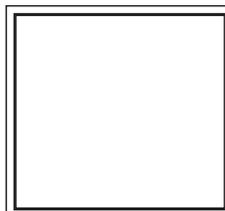
**Looking For:**



**Interests**



**All&About  
MyFriends**



## Ten top tips to help you stay safe on line.

- 1 Don't** give out too much personal information on any social networking profiles, such as your full name, e-mail address, mobile phone number, passwords, home and College address and don't tell people in detail what you are doing and when.
- 2 Don't** upload any dodgy photos of either yourself or anyone else. You might regret it afterwards and you could get into trouble legally. Remember images can stay on the web forever
- 3 Don't** give out your phone number to anyone you have chatted to on line unless you really do know them.
- 4 Don't** respond to any abusive or threatening messages.
- 5 Don't** arrange to meet up with someone you don't know or haven't met before.
- 6 Do** set up privacy settings on all social networking accounts – if you don't know how to do it ask an adult you can trust for help.
- 7 Do** tell someone straight away if you are worried or feel uncomfortable or feel bullied by any messages you receive on line.
- 8 Do** report abuse on line and/or ask for offensive items to be removed by your service provider or for example YouTube. Visit the sites safety centres and follow their reporting links. If messages are of a sexual nature or you are concerned someone is making inappropriate contact with you fill out a report form at [clickCEOP](#) and tell a trusted adult. You can also call childline and talk to someone in confidence Tel; 0800 1111.
- 9 Think** before you click confirm. Do you really know this person?
- 10 Think** before you send a sext. Would you want your mum, your dad, your Aunty to see it? Would you be happy if this image was sent to everyone at College? If your answer is no don't send it!! How do you know that whoever you send it to won't pass it on? If you receive a sext, don't forward it to someone else. Tell a trusted adult then delete it. You could get into trouble with the law if you pass it on.

# Social Networking Profile Activity Sheet

Take a look at the profile page you have been given. Now spend the next 5-10 minutes to find as many safety mistakes as you can, i.e. what has the character put on their profile that might put themselves or others at risk?

Information on profile	Why is this information dangerous?
Sophie gives her email address	Provides further form of contact. "Sexysophie" may give an inappropriate message.



**Sex and  
Pregnancy**

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## Sex and Pregnancy

This section has been added as it was felt there was a gap in the kit regarding pregnancy options and abortion. This was not fully covered in the courses delivered however young people consistently asked for further information and wanted to discuss abortion in more detail.

This would probably be best to discuss following section 3 on the body, section 5 Sex and section 6 Contraception so that students have a basic understanding of the reproductive system, the mechanisms of sex and how to avoid unplanned pregnancy through the use of contraception. Using the cut out characters provided in the toolkit will enable students to distance and de-personalise issues discussed.

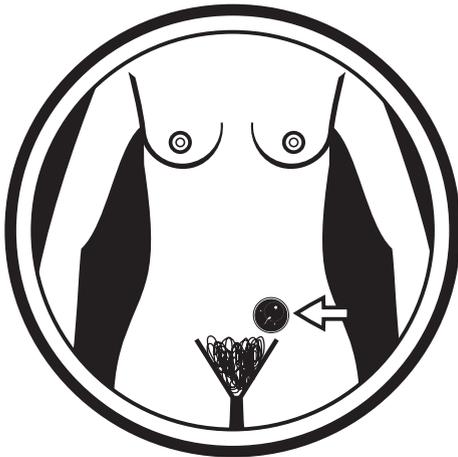
### Key points

Explain to the group that activities in this kit have explored different types of relationships and lots of different ways in which people can have sex and show each other they care about each other. Ask the group to re-cap what they have learnt, for example, that men can have sex with men, women with women, some people have sex with men and women and men and women can have sex with each other. Sex can involve all sorts of activities that feel nice and not just intercourse.

# Reproduction - The Basics



When a man and a woman have sexual intercourse and the man's penis goes into the woman's vagina, his sperm (white liquid) comes out of his penis.



If the man wears a condom, then the sperm will be caught inside the condom. If he doesn't, then the sperm will go inside the woman's vagina.



Once the sperm and the egg have met inside the woman's body, the fertilised egg implants itself in the lining of the womb.



This can make a tiny fetus, the tiny beginning of a baby.

The fetus grows into a baby inside the woman's womb or uterus.

It takes nine months to grow into a baby before it is born and comes into the world.

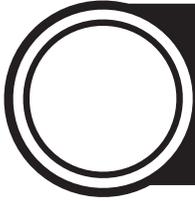
## Chantelle is Pregnant

The purpose of this activity is to encourage the student group to consider the consequences of having unprotected sexual intercourse, where to go for help and to explore options for an unplanned pregnancy. Refer to the scenario sheet. Read the scenario to the group then ask them to consider and discuss the following questions.

### Discussion points

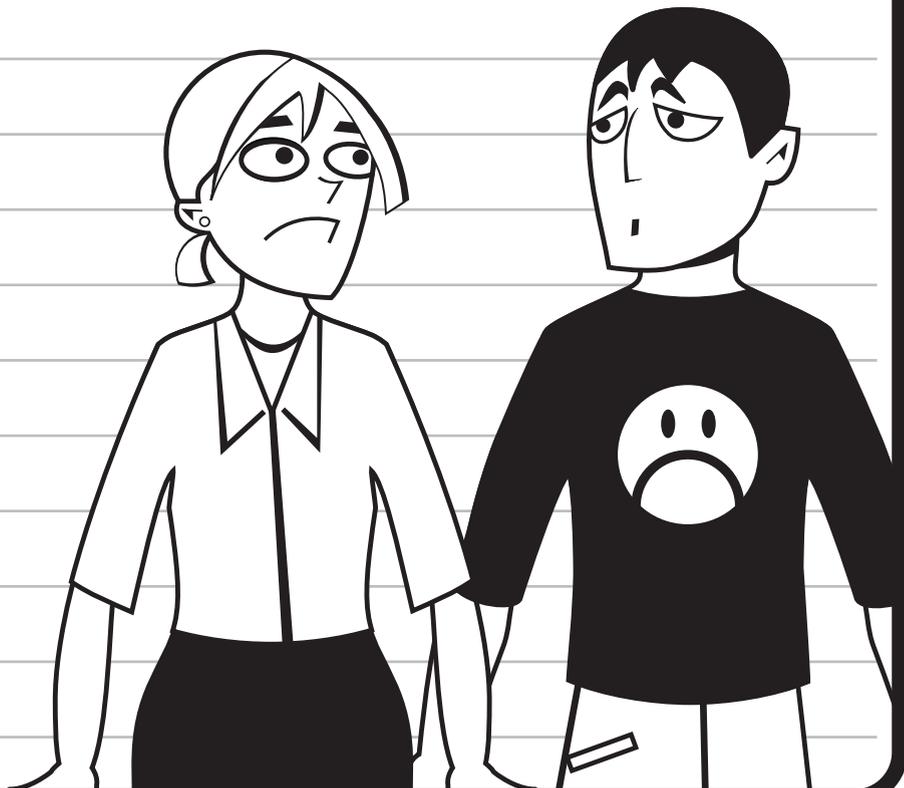
- How do you think Chantelle feels?
- How do you think Jack feels?
- What could Jack and Chantelle have done to prevent the pregnancy? (Re-cap on previous sessions, i.e. contraception, emergency hormonal contraception).
- Who can they tell?
- Where can they go for help? (Make sure students are aware they can talk to their GP, a tutor, a nurse from Contraception and Sexual Health at the College and ensure they are reminded of local service provision. You might want the group to repeat T4 Where can I go for help? - Toolkit).
- What are the options for Jack and Chantelle? (Encourage the group to think about all the possible options including abortion, adoption, keeping the baby, fostering until ready to look after the baby themselves).
- How would they feel and what would their life be like if they continue with the pregnancy and have a baby? Who would help them?
- How would they feel if they had the baby but had it adopted?
- How would they feel if they decided to have an abortion and end the pregnancy?

Ensure that each option is explored and advantages and disadvantages are carefully considered. Remind the group that the decision to continue with an unplanned pregnancy and have a baby, keep it or have it adopted or end the pregnancy through an abortion is not an easy one and is an individual decision. Chantelle and Jack might find it helpful to talk to someone like a tutor, a Dr. or nurse or their family to support them through this process.



## Chantelle is pregnant. What should she do?

Chantelle and Jack had sex at a party, but did not use a condom. Chantelle missed her last period, got a pregnancy test from her local pharmacy, did the test and is pregnant. She told Jack straight away because she felt scared, but has not told her parents. They didn't want to have a baby, but now they don't know what to do. They do not know who to talk to and who to ask for advice and feel very scared.



## What is abortion?

An abortion or termination is the ending of a pregnancy where the embryo or fetus is removed from the woman's uterus or womb. This means it will not develop into a baby or be born.

## The law

Abortion is legal in this country under the abortion Act 1967 as amended by the Human Fertilisation and Embryology Act 1990. The law allows abortion to take place before 24 weeks pregnant – but most abortions are carried out before 12 weeks of pregnancy. It can be difficult to get an abortion after more than 18 weeks so if someone thinks they might be pregnant it is best for them to get help and advice as soon as possible.

## What happens?

Abortion is safe but there can be side effects, so if a woman decides to have one she will be given information. There are different types of abortions depending how far pregnant the woman is.

In a surgical (or suction) abortion the woman will be put to sleep for a short time (this is called a general anaesthetic) and it will take about ten minutes. Afterwards she might bleed, a bit like a period.

In a medical abortion she will be given medicine, but not put to sleep and the medicine makes the fetus come out of the womb.

## Does it hurt?

Most women get a bit of pain (like a period pain) or cramping and if it hurts a lot then a Dr. can give her some more pain killers.

## Do young people need parental consent?

If the woman is under 16, in some circumstances she can have an abortion without her parents consent, but it is always best to talk to an adult she feels she can trust, an adult relative or a nurse or Dr. who offers support. If she has a learning disability other professionals might need to be involved to make sure she really understands her decision and the consequences and is able to fully give her consent. An abortion cannot take place without her consent. No one should try and force anyone to have an abortion.

## Abortion Facts (2)

### **How will she feel after an abortion?**

Most women have an abortion because being pregnant and having a baby at that time in their life was not right for them. Many women feel relief afterwards, but some may feel sad. Their partner might feel confused too and it is really important they talk to someone about it.

### **Do many teenagers have abortions?**

Yes. About 50% of pregnant teenagers choose to have an abortion. We have talked about contraception in this kit. It is always better to think about contraception BEFORE having sex. Having to make a difficult decision about having a baby or having an abortion or having baby adopted is not easy; but if someone thinks they may be pregnant it is always best to tell someone and get some help as soon as possible.

### **If someone has an abortion can they still have a baby later on?**

Yes. She is just as likely as women in general to have a healthy baby in the future.

### **Is it wrong to have an abortion?**

If someone is pregnant they have to make a decision that is right for them and not for someone else. Many people also believe that abortion is a responsible decision when a woman cannot handle a pregnancy or doesn't have enough support to take care of a child.

## Abortion – Activity

Having explained the process of abortion, now ask the group to think about some of the reasons why a woman or a couple may choose to end a pregnancy and have an abortion.

Ask them to word storm examples and discuss each as a group and record on flip chart paper. Re-iterate the working together rules and try to enable the group to distance themselves from the examples offered. It might be useful to use the cut out characters from the toolkit here as a distancing technique.

Remind the group that people have strong feelings about abortion and a woman has the right to make the decision for herself without being judged by others.

If the group can't think of any reasons please use the prompts (P6) which can be cut out as cards and read out for discussion.

# Abortion – Activity Cards

The woman has a disease that would be passed on to the baby if it was born.

Having the baby would make the woman ill – she might even die.

The woman's boyfriend does not want to start a family yet.

The woman wants to do her exams and get an education before she has a baby.

The woman thinks her dad will kill her if she has the baby.

The woman didn't want to have a baby, it was an accident.

The woman was raped and she doesn't want to have a baby which she thinks will constantly remind her.

The couple think they are too young and are not ready to look after a baby and bring up a child.

The couple do not have enough money or a house of their own.

The woman doesn't have a boyfriend or husband to help her.

The young man doesn't want to look after a baby. He wants to go out with his friends all the time not stay at home and change nappies.

The woman's mum says she will have to move out of the family home and go and live in a hostel if she has the baby because she doesn't want any more children in the house.

The woman just got a place at university.

The woman is an alcoholic

## Useful Resources

- **‘Delivering Accredited Training to Young. People Part One’**  
(Brook Oldham, E Popey, E Weedon, B Deakin 2009)
- **‘Contraceptive Display Kit, User’s Manual’**  
(FPA, 2005)
- **‘Talking Together . . . about growing up’**  
(FPA, L Scott & L Kerr-Edwards, 1999)
- **‘Talking Together . . . about sex and relationships’**  
(FPA, L Scott & L Kerr-Edwards, 2007)
- **‘Talking Together . . . Contraception, Book One’**  
(FPA, L Scott & L Kerr-Edwards, 2007)
- **‘Talking Together . . . Contraception, Book Two’**  
(FPA, L Scott & L Kerr-Edwards, 2007)
- **‘Let’s Plan It’**  
(Image In Action, L Scott & S Duigan, 2005)
- **‘Let’s Do It’**  
(Image In Action, R Johns, L Scott & J Bliss, 2007)
- **‘Puberty & Sexuality for Children and Young People with a Learning Disability’**  
(NHS Leeds, The Children’s Learning Disability Nursing Team, 2009)
- **‘Jiwsj – A Pick ‘n’ Mix of Sex and Relationships Education Activities’**  
(FPA, M Gadd & J Hinchcliffe, 2007)
- **Sheffield Sex and Relationships Education (SRE)**  
(NHS Sheffield, 2009)
- **The Choices Secondary School SRE (Sex and Relationships Education) Resource**  
(Calderdale PCT Health Promotion Service, 2004)
- **Abortion – Rights Responsibilities and Reason, A cross-curricula Resource**  
(Education For Choice, 2004)
- **Let’s Talk About Sex – Growing Up, Changing Bodies, Sex and Sexual Health**  
(Robie H. Harris illustrated by Michael Emerley, 2005).
- **Post – 16, autism and severe learning disabilities – transition to adult life – Going beyond the residential school gate**  
(Cambian Group. 2011)

# Congratulations



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on completing the  
Keeping It Safe  
Sex and Relationships course

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Date

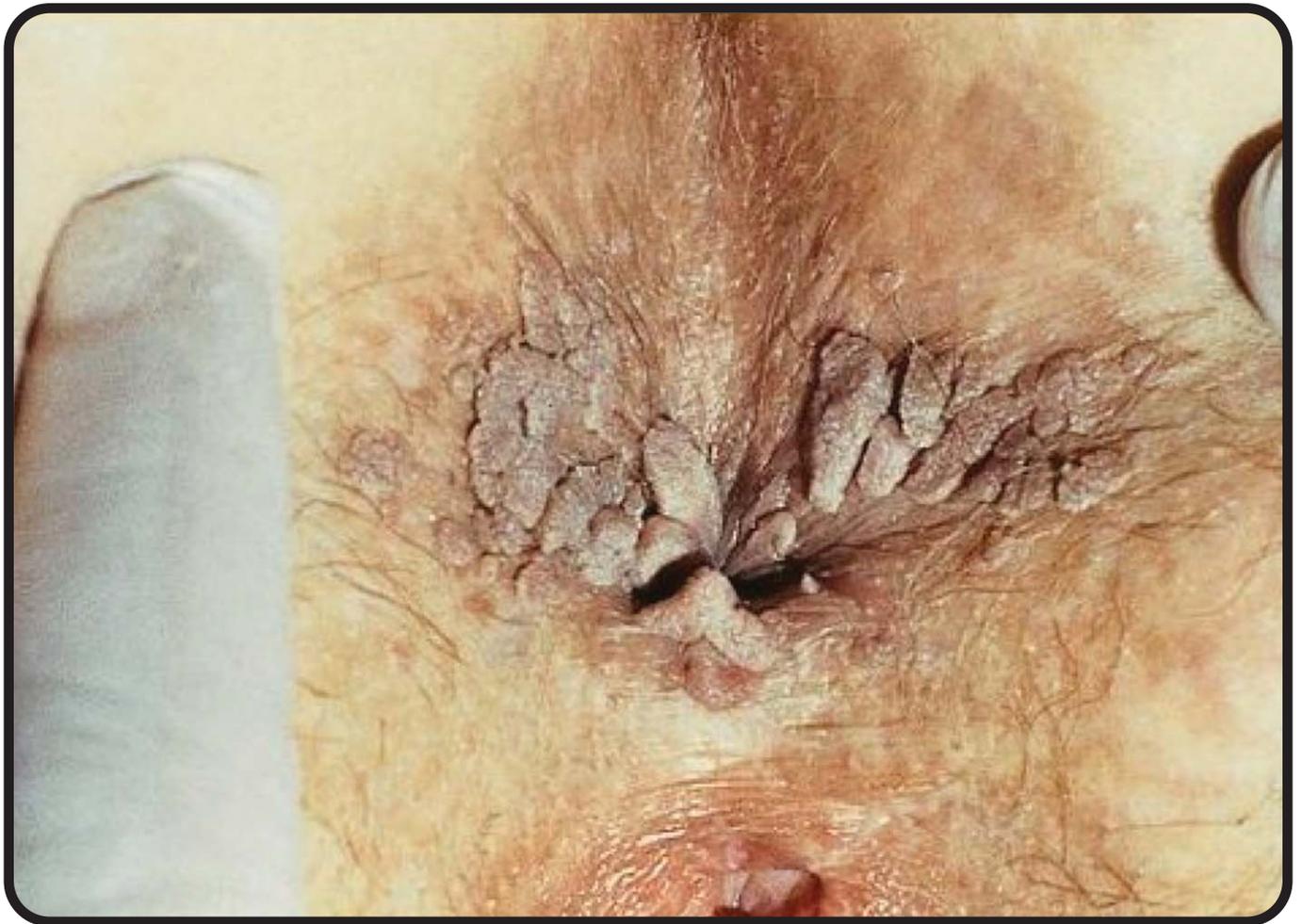
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Course leader

Genital warts on the vagina



Genital warts around the anus



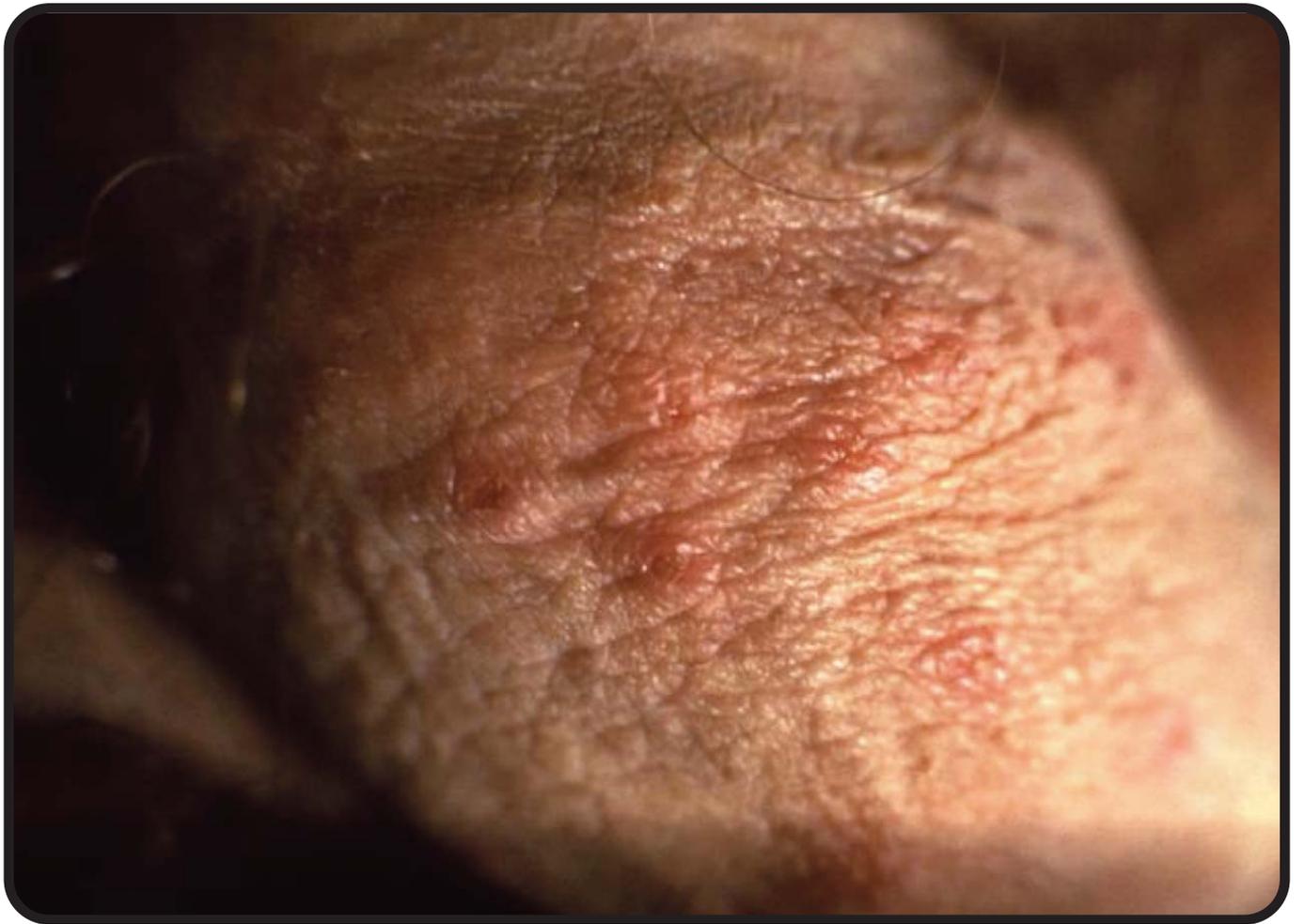
Genital warts on the penis



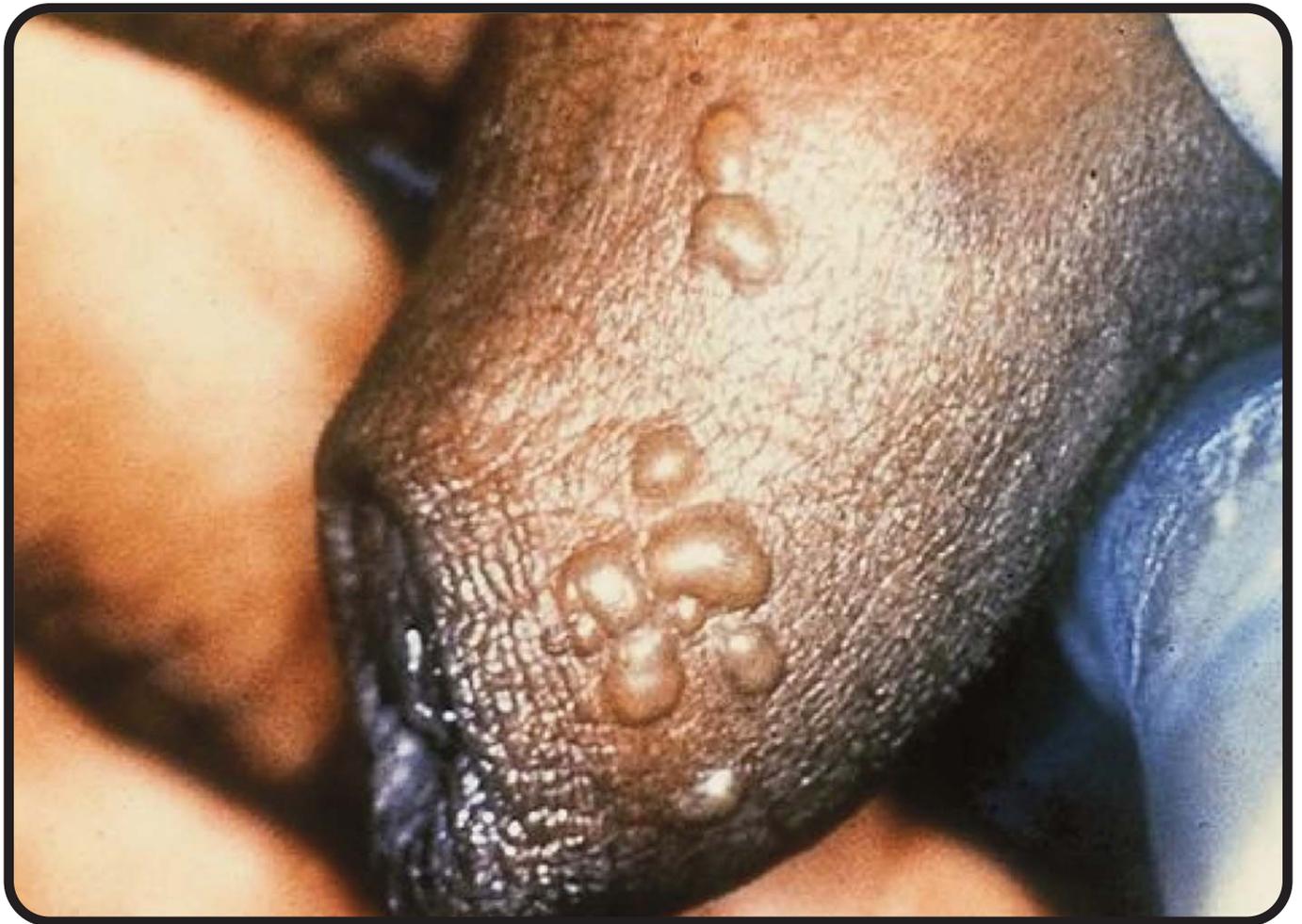
Genital warts on the penis



Genital herpes on the penis



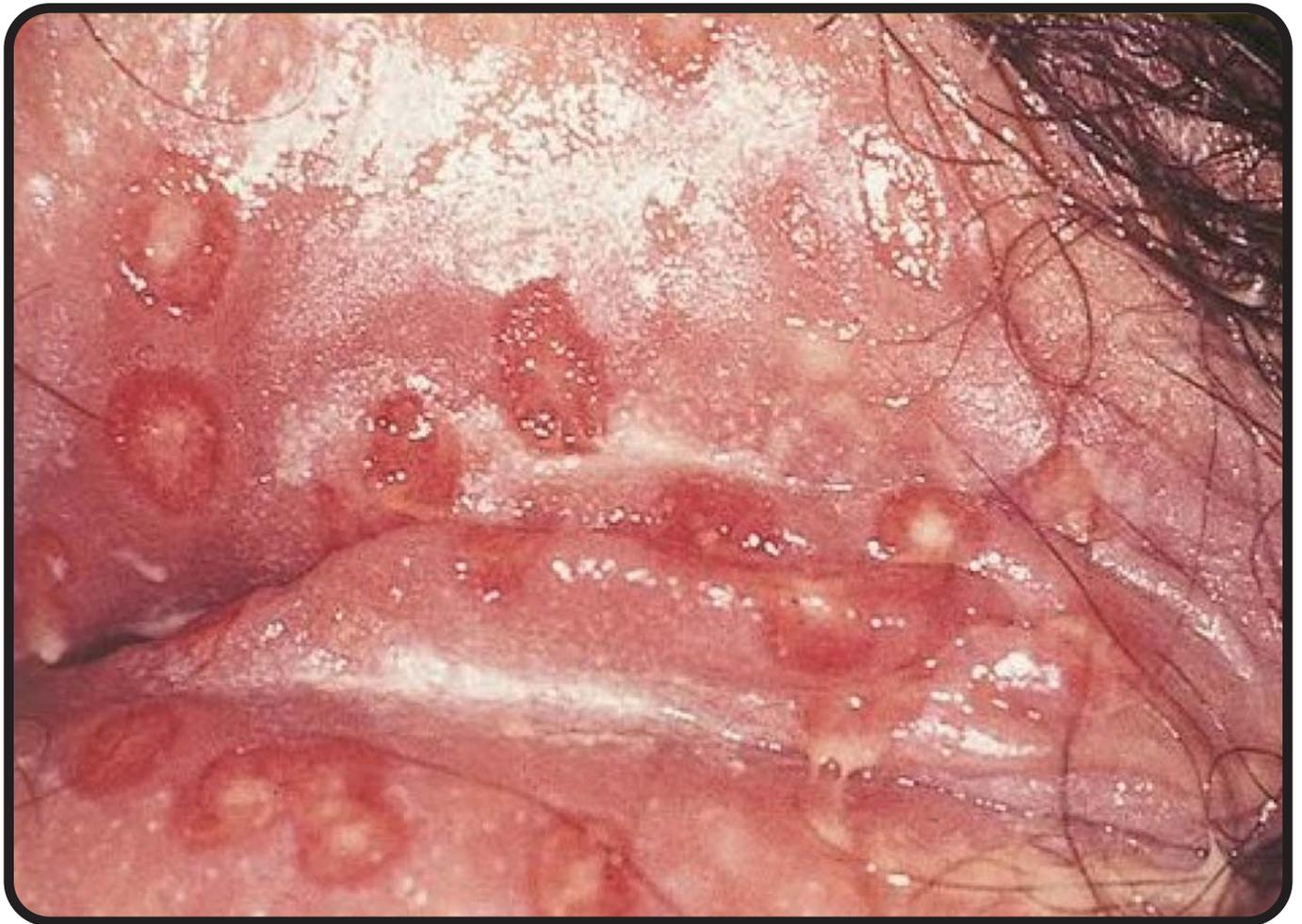
Genital herpes on the penis



## Genital herpes on the penis



Genital herpes on the outside of the vagina



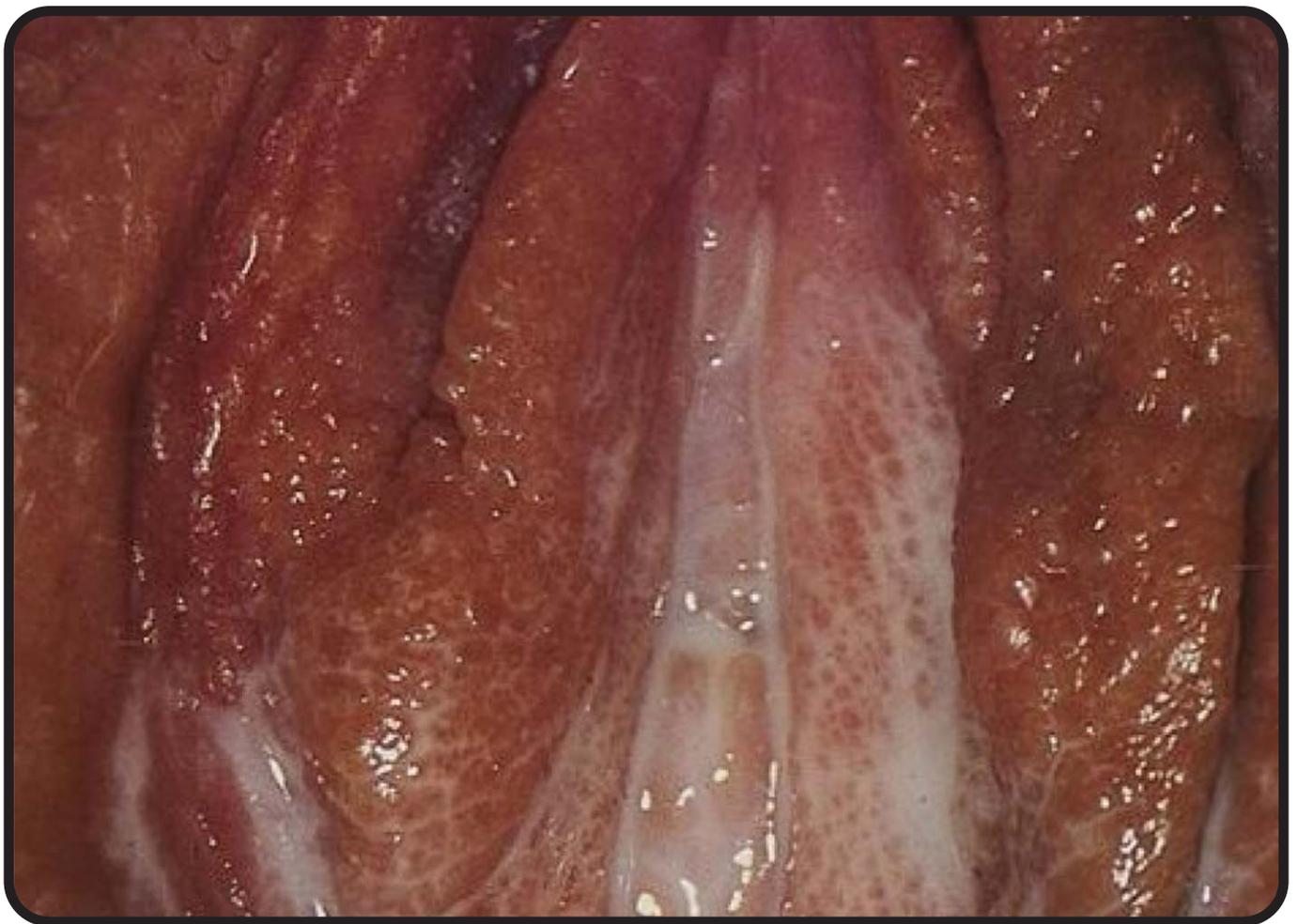
Crabs on pubic hair



## Gonorrhoea symptoms affecting the penis



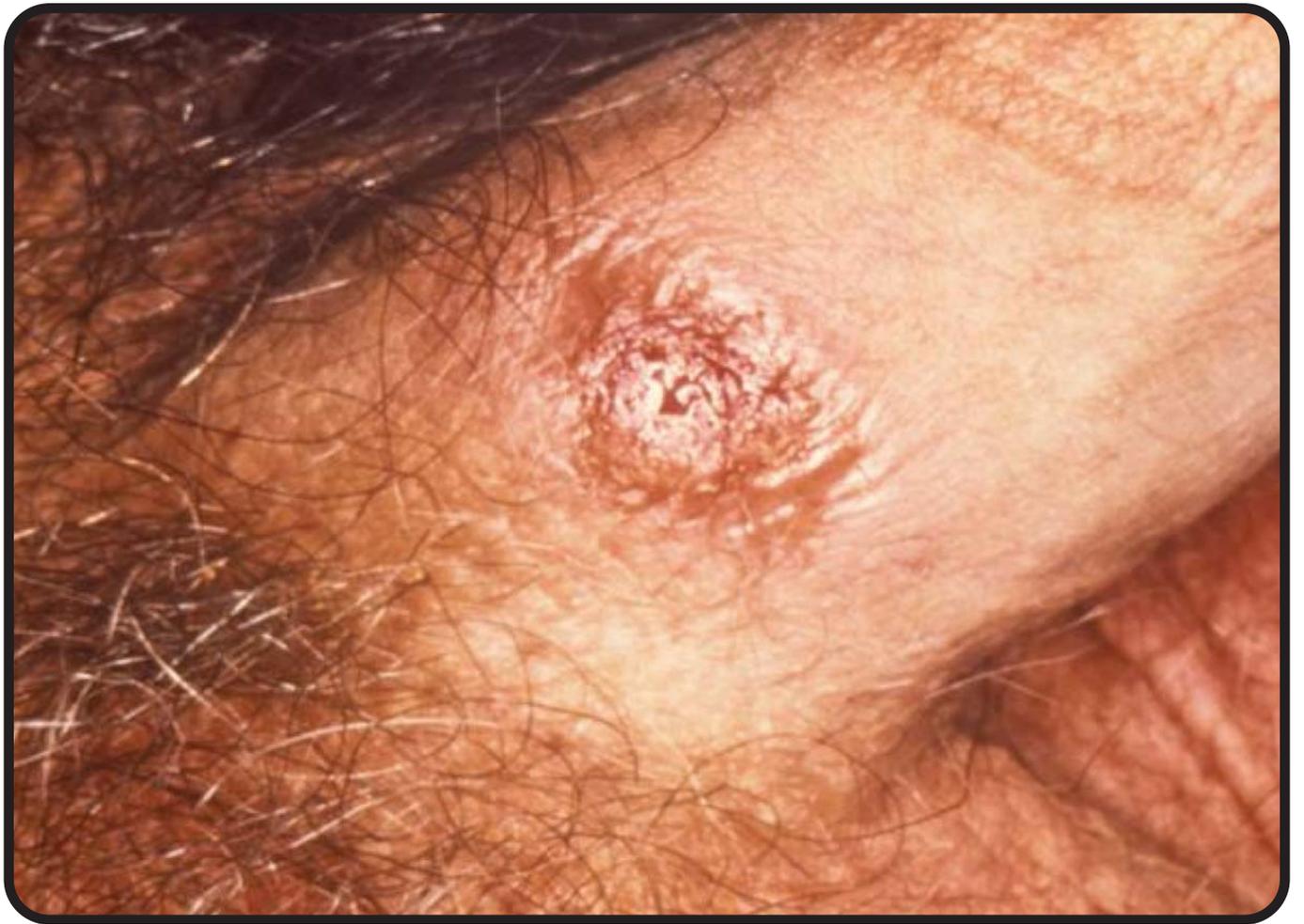
Gonorrhoea symptoms affecting the vagina



## Syphilis symptoms on the penis



## Syphilis symptoms on the penis



Syphilis around the vagina



Secondary syphilis around the anus and vagina





# Keeping It Safe - Feedback Form

In order to evaluate the Keeping It Safe resource we would really appreciate some feedback in relation to how you have used the materials, with whom, how useful they were and how you think they may be improved. Could you, therefore please take a moment to complete the feedback form and return it to the address overleaf.

## About you

Name:	Job Title:
Work Place Address:	
Contact Tel Number:	Email Address:

## Delivery

Who delivered the activities?
Did you have any external support?

## About Your Group

Who have you used the resource with?
--------------------------------------

## About the activities

Which activities have you used? (please tick as appropriate)

- |                                                        |                                       |
|--------------------------------------------------------|---------------------------------------|
| <input type="checkbox"/> Relationships                 | <input type="checkbox"/> The Body     |
| <input type="checkbox"/> Appropriate and Inappropriate | <input type="checkbox"/> Sex          |
| <input type="checkbox"/> Contraception and STIs        | <input type="checkbox"/> Staying Safe |
| <input type="checkbox"/> Sex and Pregnancy             |                                       |

On a scale of 1-10 (1 being low - 10 being high) how relevant did you find the content of the resource for your specific group of students (please circle as appropriate)?

1            2            3            4            5            7            8            9            10

## Feedback from students

Did your students enjoy the activities?  Yes     No

Comments:
What learning can you identify as a result of delivering the activities?
What feedback did you receive from the students in relation to the activities?
What worked well?
What did not work well?

# Keeping It Safe - Feedback Form

Do you have any other comments or ideas on how the pack could be improved or can you think of anything that needs adding to support you in the delivery of this work?

**Thank you very much for your time and comments**

**Please return the completed form to:**

Judith Green  
Outreach Team Manager  
Outreach Contraception and Sexual Health Services  
Nottingham University Hospitals NHS Trust  
Victoria Health Centre  
Glasshouse Street  
Nottingham  
NG1 3LW

*Tel: 0115 883 9052*

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Nottingham University Hospitals   
NHS Trust