

# "COMPREHENSIVE SEXUALITY EDUCATION FAH WE"



A COMPREHENSIVE SEXUALITY  
EDUCATION MANUAL FOR  
CARIBBEAN YOUTH LEADERS

PREPARED BY:  
CARIBBEAN RIGHT HERE RIGHT NOW  
PLATFORM

**Acknowledgements:**

*DRAFT*

## Table of Contents

Lesson 1- Introduction to Comprehensive Sexuality Education.....	5-6
Lesson 2- Sexual Reproductive Health and Rights .....	7-9
Lesson 3- How Does Comprehensive Sexuality Education Affect “All ah we”? .....	9-10
Lesson 4- What does Comprehensive Sexuality Education Encompass? .....	10- 13
Lesson 5- Sexual Health .....	14-19
Lesson 6- Mental Health.....	20-25
Lesson 7- Physical Health .....	26-31
Lesson 8- Sex101- All You Need to Know .....	32-36
Lesson 9- Safe Sex and Protection .....	37-43
Lesson 10- Consequences of Sexual Activities .....	45-56
Lesson 11- Relationships .....	57-59
Lesson 12- Effective Interpersonal Communication .....	60-63
Lesson 13: Gender Based and Other Forms of Violence.....	64-69

DRAFT



## LESSON 1: INTRODUCTION TO COMPREHENSIVE SEXUALITY EDUCATION

### Lesson Objectives:

- To define CSE using international best practices
- To have young people discuss their own ideas and definitions
- To underscore the importance & relevance of CSE



### *Introduction:*

In the Caribbean, we have often avoided conversations about sex; especially with young people. The older generation themselves still cannot have conversations about human sexuality, so it would be fair that they do not feel comfortable enough to have these conversations with young people. Sex is natural, and probably one of the oldest human activity to exist but still we have a lot to figure out.

According to UNFPA's Caribbean Sexual Reproductive Health Thematic Brief of 2017, one in every 5 live births are to a teen mother. UNICEF's Multiple Indicators Surveys in the Caribbean between 2010 to 2015 have found that almost half of the Caribbean's young people do not demonstrate accurate knowledge on HIV prevention. Other regional reports have shown that young people are engaging in sex at earlier ages and there has also been slight increases in new HIV cases among young people 18-25 years.

It is under that blanket that we understand the importance of equipping young Caribbean people with the requisite knowledge, information, skills and services available to ensure they make informed sexual decisions. Comprehensive Sexuality Education (CSE) is the most effective means of doing so.



### ***Definitions:***

*UNESCO defines CSE as, “a curriculum-based process of teaching and learning about the cognitive, emotional, physical and social aspects of sexuality. It aims to equip children and young people with knowledge, skills, attitudes and values that will empower them to: realize their health, well-being and dignity; develop respectful social and sexual relationships; consider how their choices affect their own well-being and that of others; and, understand and ensure the protection of their rights throughout their lives.”*

Other definitions have stressed that CSE is, “an age-appropriate, culturally relevant approach to teaching about sex and relationships by providing scientifically accurate, realistic, non-judgmental information” about young people’s sexual reproductive health.

### ***Session Guide:***

- Ask each participant to write down what came to mind when they first heard the term “Comprehensive Sexuality Education”(5 minutes)
- Place persons into groups of three to six, depending on the number of participants and ask them to discuss their individual responses and then ask them to compile aspects of each of their definitions to come up with one. (15 minutes)
- Ask each team to share their responses and what stood out mainly from their discussions. Give each team 5 minutes.

### ***Note to Facilitator:***

- Underscore the importance of the individuality of each response, since many people’s perception of CSE is largely influenced by their frame of reference.
- Share the accurate definition of CSE with the group and highlight where they would have mentioned something similar and respectfully correct those with less accurate definitions.
- Ask two persons to share their thoughts now that you would have discussed the definition of CSE with them.

*Play the following video if you have the facilities:*

<https://youtu.be/eV92ALv-TGw>

---



## LESSON 2: SEXUAL REPRODUCTIVE HEALTH AND RIGHTS

### Lesson Objectives:

- To define Sexual Reproductive Health & Rights
- To discuss & list what are Sexual Rights
- To present instruments that support Sexual Reproductive Rights as Human Rights



### Introduction:

The Caribbean is not new to conversations about human rights, however, we have not always taken a stance to uphold the sexual reproductive health and rights (SRHR) of our citizens. It is important that we champion this message as well, especially since; Sexual and Reproductive Health and Rights (SRHR) promotes the right of all persons to make informed decisions about their sexual activity and reproduction “free from discrimination, coercion, and violence”.


“Sexual and reproductive rights assumes that all people have the right to a healthy, safe, consensual and enjoyable sex life; to control their bodies and have sufficient accurate information to use in making decisions and seeking healthy behaviours; and to have affordable, accessible services that keep them healthy.” Says the WHO.

### Definitions:

The World Health Organization (WHO) defines Sexual Health as, “a state of physical, emotional, mental and social well-being in relation to sexuality; Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence.” They have also noted that in order for sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled.

### Session Guide:

Share with them the following images that speaks to what are SRR and what are some of the international documents that support them.



What are some of the international "rights" documents (both in international law & global consensus documents) that justifies SRHR as human rights?

- Sexual and reproductive rights are most clearly defined in the 1994 International Conference on Population and Development (ICPD) Programme of Action.
- International Covenant on Economic, Social and Cultural Rights
- Convention on the Elimination of All Forms of Discrimination Against Women
- Convention on the Rights of a Child
- Convention on the Rights of Persons with Disabilities
- Declaration on the Rights of Indigenous Groups
- Convention Against Torture
- United Nations General Assembly Special Session Declaration on HIV/AIDS;

## Sexual Reproductive Rights Include:

<input type="checkbox"/> the rights to equality and non-discrimination	<input type="checkbox"/> the rights to the highest attainable standard of health (including sexual health) and social security
<input type="checkbox"/> the right to be free from torture or to cruel, inhumane or degrading treatment or punishment	<input type="checkbox"/> the rights to information, as well as education
<input type="checkbox"/> the right to privacy	<input type="checkbox"/> the rights to information, as well as education
<input type="checkbox"/> The right to bodily integrity	<input type="checkbox"/> the right to an effective remedy for violations of fundamental rights.

- Instruct Participants to come up with a 5 minute role play that brings clarity to one of these sexual rights that they feel are most relevant to their peers.
- They will have 15 minutes to discuss and prepare their presentation.
- At the end of all of presentations; ask participants to share their take away messages.

### ***Facilitators' Note:***

- SRHR covers a plethora of topics, to which we will examine in a later chapter.
- The aim of this session was to introduce SRHR as most of CSE and the other topics that will be covered; are heavily influenced by this.
- Ensure that participants have a really grasped these concepts before you move on.



## **LESSON 3: "HOW DOES COMPREHENSIVE SEXUALITY EDUCATION (CSE) AFFECT ALL AH WE?"**

### **Lesson Objectives:**

- To discuss the benefits of Comprehensive Sexuality Education
- To discuss some of the barriers to Comprehensive Sexuality Education



### ***Introduction:***

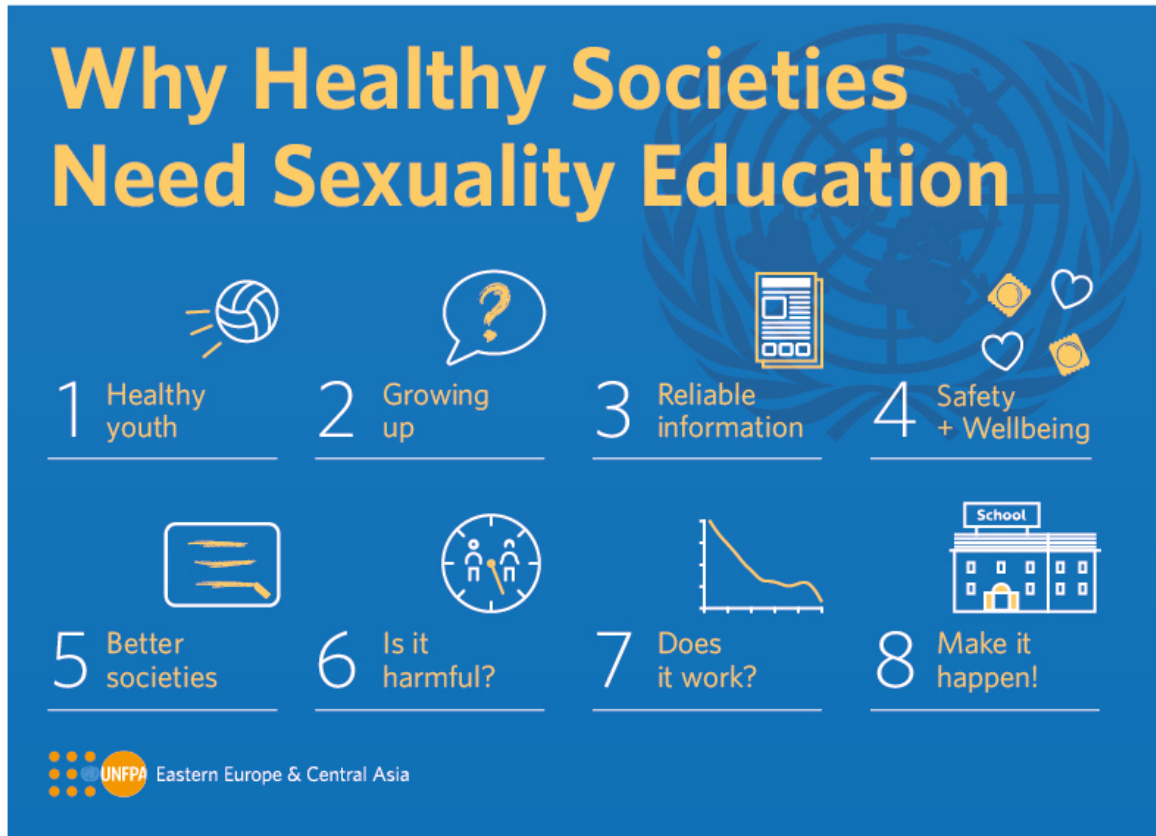
UNESCO, commissioned a study in 2016 and this review was conducted by Paul Montgomery and Wendy Knerr of University of Oxford Centre for Evidence-Based Intervention, UK. This is one of quite a few studies commissioned by the UN agency, and over the years they have found that CSE has been effective in addressing a number of issues.

*Some of the overall outcomes of CSE include:*

<input type="checkbox"/>	Delayed initiation of sexual intercourse	<input type="checkbox"/>
<input type="checkbox"/>	Decreased frequency of sexual intercourse	<input type="checkbox"/>
<input type="checkbox"/>	Decreased number of sexual partners	<input type="checkbox"/>
<input type="checkbox"/>	Reduced risk taking	<input type="checkbox"/>
<input type="checkbox"/>	Increased use of condoms	<input type="checkbox"/>
<input type="checkbox"/>	Increased use of contraception	<input type="checkbox"/>

### **Session Guide:**

- Share the following UNFPA Image with them and ask them to discuss the relevance to our local context.



(See link to webpage: <https://eeca.unfpa.org/en/node/9642> )

- Ask participants to come up with three points to support the positions presented and three ways in which they disagree with the narrative.
- Ask participants to interrogate each other's responses centering around countering anti-CSE narratives. If they can come up with their own criticisms then they will be able to counter narratives presented by oppositions.

### **Facilitators' note:**

- *To further stimulate dialogue; see the following video by Reutgers and share with the group and ask for feedback. You can also just watch the video for your own information.*

<https://youtu.be/uEhim6vkYGw>



## ◦ **LESSON 4:** **"WHAT DOES COMPREHENSIVE SEXUALITY EDUCATION ENCOMPASS"**

### **Lesson Objectives:**

- To discuss the various topics covered in Comprehensive Sexuality Education
- Dealing with Opposition to Comprehensive Sexuality Education
- Countering myths and concerns of Comprehensive Sexuality Education



### **Introduction:**

The Caribbean region is known for having a lot of religious influences, as many of our citizens come from traditional religious families. A lot of these conservative views have slipped its way into laws and policies that address young people's sexual reproductive health and rights. As such, young people have been making a case to politicians and religious leaders to ensure they put measures in place to promote SRHR among youth in and out of school.

*It is important to ensure young people are equipped with the right information to counter opposing narratives that may be shared.*

### **Session Guide:**

- Read out the following Statements and have participants decide whether they are true or false. Ask persons who believe it to be true to stand, and those who believe the statement is false; ask them to sit. If persons are not sure then they can sit but put both hands up. There will be justifications provided for the answers:



<i>Statement:</i>	<i>Answer:</i>	<i>Justification:</i>
<i>Comprehensive sexuality education encourages youth to have sex .</i>	<i>F</i>	Numerous studies in peer reviewed literature, including a comprehensive study by the World Health Organization, have demonstrated that sex education programs that teach young people about both abstinence and contraception do not increase sexual activity nor lead youth to engage in sex at an earlier age.
<i>Multiple polls indicate that an over- whelming majority of parents support the provision of comprehensive sexuality education in schools.</i>	<i>T</i>	According to the United Nations Educational, Scientific and Cultural Organization (UNESCO), “the role of governments through ministries of education, schools and teachers is to support and complement the role of parents by providing a safe and supportive learning environment and the tools and materials to deliver good quality sexuality education .
<i>Comprehensive sexuality education in- corporates values and cultural sensitivity</i>	<i>T</i>	Quality comprehensive sexuality education sup- ports a rights-based approach in which values such as respect, acceptance, tolerance, equality, empathy, and reciprocity are inextricably linked to universally agreed human rights. Comprehensive sex education also provides young people with the opportunity to explore and define their individual values as well as those of their families and communities.
<i>Comprehensive sexuality education teaches the mechanics of sex to young children.</i>	<i>F</i>	Comprehensive sexuality education provides age- and developmentally-appropriate information and skills to help young people delay sexual initiation and to protect themselves when they do become sexually active.
<i>Studies show that CSE has managed to help young people delay their sexual debut and even encourage abstinence.</i>	<i>T</i>	Comprehensive sexuality education programs emphasize abstinence as the best and most effective method of avoiding STIs, HIV, and unintended pregnancy. They also provide young people with information about contraception and condoms to help them protect their health and lives when they do become sexually active. Research shows that these programs are more effective at helping young people delay sexual initiation than abstinence-only programs.
<i>Comprehensive sexuality education programs are used as a tool to control population growth.</i>	<i>F</i>	Comprehensive sexuality education affirms the right of couples and individuals to voluntarily decide the size and spacing of their families. In developing countries, more than 215 million women are not using modern contraception.
<i>CSE has a one size fits all approach.</i>	<i>F</i>	CSE is tailored specifically to various age groups, as it would be irresponsible for persons to share information crafted for 15-20 year olds with 5-10 year olds.

*UNESCO's International Technical Guidance on Sexual Education recommends that CSE covers the following issues*



*Facilitators Note:*

- *Be sure to ask participants for any other myths they may have heard and respond to the best of your knowledge.*

DRAFT





## LESSON 5: "SEXUAL HEALTH"

### Lesson Objectives:

- To be more aware of changes – puberty
- To learn about the Reproductive system – anatomy & function
- Healthy sex – how to protect yourself?  
With focus on Abstinence



### Introduction:

As we mentioned at the beginning of lesson 1; sexual reproductive health deals primarily with the human reproductive organs and its functions. Young people go through “puberty”, which is the period between childhood and adulthood. It is the period when the body changes, and start to prepare for reproduction.

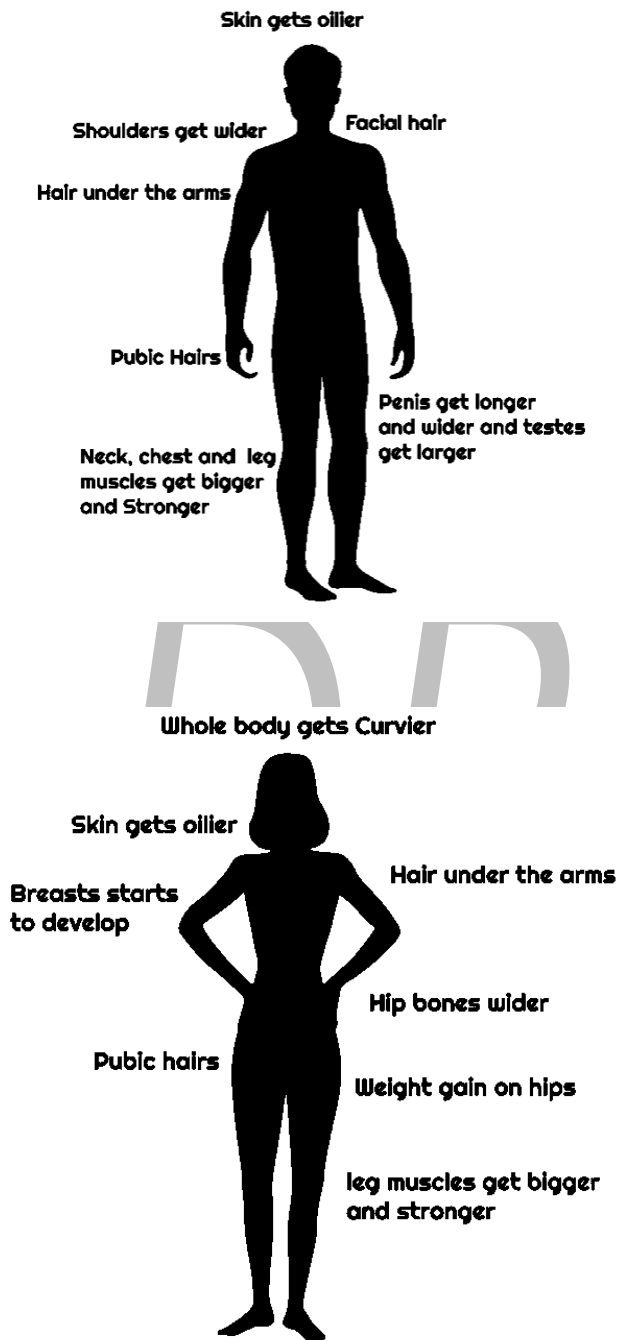
### Session Guide:

- *Discuss the definition of puberty, and the main changes in the male and female bodies.*

### Puberty:

*The World Health Organizations says that this “is a period of life with specific health and developmental needs and rights. It is also a time to develop knowledge and skills, learn to manage emotions and relationships, and acquire attributes and abilities that will be important for enjoying the adolescent years and assuming adult roles.”*

### *What you need to know:*



### **Some Facts about Males During Puberty:**

- Boys usually start to show the physical changes of puberty between the ages of 11 and 14, which is slightly older than when girls start puberty.
- The male sex hormone called testosterone and other hormones cause the physical changes.
- Body hair grows in the pubic area, under the arms, and on the face, and becomes thicker on the legs.
- Vocal cords get thicker and longer and his voice deepens. Sweat and oil glands become more active and his body odor changes.
- Acne can develop.
- Some boys develop small and temporary breast tissue.
- Reproductive system begins to work.
- He is then able to get a girl pregnant.



### **Some Facts about Females During Puberty:**

- Girls usually start to show the physical changes of puberty between the ages of 9 and 13, which is slightly sooner than boys.
- The female sex hormone called estrogen and other hormones cause the physical changes.
- Many girls are fully developed by the age of 16. Some girls will continue to develop through age 18.
- Hair growth begins close to the pubic area and underarms.
- Breast buds appear; nipples become raised and this area may be tender.
- Sweat and oil glands become more active and her body odor changes.
- Acne can develop.
- Ovulation and menstruation (periods) begin.
- She is then able to get pregnant

(Information and Image: <https://www.agelessmedica.com/physical-changes-boys-girls-experience-puberty/> )

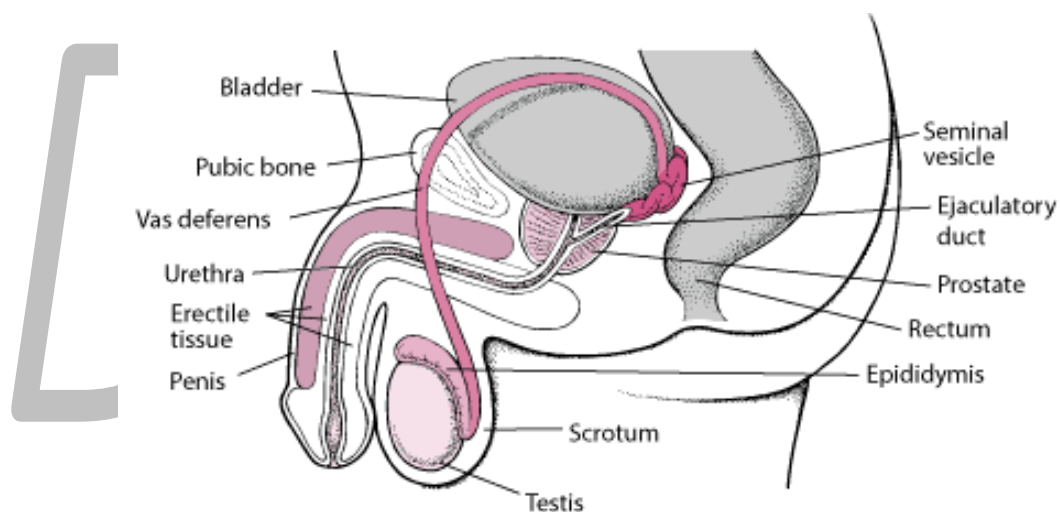
## ***The Reproductive System:***

*The reproductive system has four functions:*

- *To produce egg and sperm cells*
- *To transport and sustain these cells*
- *To nurture the developing offspring*
- *To produce hormones*

## ***Male Reproductive Organ:***

*The male reproductive system, like that of the female, consists of those organs whose function is to produce a new individual, i.e., to accomplish reproduction. This system consists of a pair of testes and a network of excretory ducts (epididymis, ductus deferens (vas deferens), and ejaculatory ducts), seminal vesicles, the prostate, the bulbourethral glands, and the penis.*



Unlike the [female reproductive system](#), most of the male reproductive system is located outside of the body. These external structures include the [penis](#), scrotum, and testicles.

**Penis:** This is the male organ used in sexual intercourse. It has three parts: the root, which attaches to the wall of the [abdomen](#); the body, or shaft; and the glans, which is the cone-shaped part at the end of the penis. The glans, also called the head of the penis, is covered with a loose layer of [skin](#) called foreskin. This skin is sometimes removed in a procedure called [circumcision](#). The opening of the urethra, the tube that transports semen and urine, is at the tip of the penis. The glans of the penis also contains a number of sensitive nerve endings.

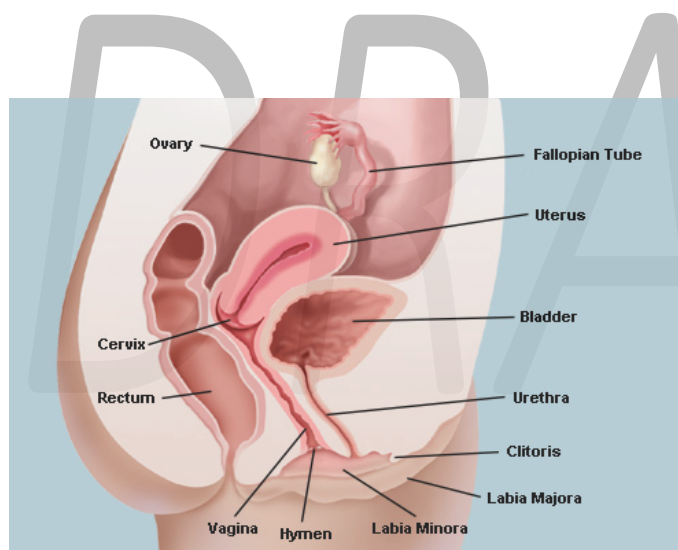
**Scrotum:** This is the loose pouch-like sac of skin that hangs behind and below the penis. It contains the testicles (also called testes), as well as many nerves and blood vessels. The scrotum acts as a "climate control system" for the testes. For normal sperm development, the testes must be at a temperature slightly cooler than [body temperature](#). Special muscles in the wall of the scrotum allow it to contract and relax, moving the testicles closer to the body for warmth or farther away from the body to cool the temperature.

**Testicles (testes):** These are oval organs about the size of large olives that lie in the scrotum, secured at either end by a structure called the spermatic cord. Most men have two testes. The testes are responsible for making **testosterone**, the primary male sex hormone, and for generating sperm. Within the testes are coiled masses of tubes called seminiferous tubules. These tubes are responsible for producing sperm cells. (Source: <https://www.webmd.com/sex-relationships/guide/male-reproductive-system#1> )

### ***Female Reproductive Organ:***

The female reproductive system is designed to carry out several functions. It produces the female egg cells necessary for reproduction, called the ova or oocytes. The system is designed to transport the ova to the site of fertilization. Conception, the fertilization of an egg by a sperm, normally occurs in the fallopian tubes. The next step for the fertilized egg is to implant into the walls of the uterus, beginning the initial stages of pregnancy. If fertilization and/or implantation does not take place, the system is designed to menstruate (the monthly shedding of the uterine lining). In addition, the female reproductive system produces female sex hormones that maintain the reproductive cycle.

The female reproductive anatomy includes parts inside and outside the body.



The function of the external female reproductive structures (the genitals) is twofold: To enable sperm to enter the body and to protect the internal genital organs from infectious organisms. The main external structures of the female reproductive system include:

- **Labia majora:** The labia majora enclose and protect the other external reproductive organs. Literally translated as "large lips," the labia majora are relatively large and fleshy, and are comparable to the scrotum in males. The labia majora contain sweat and oil-secreting glands. After puberty, the labia majora are covered with hair.
- **Labia minora:** Literally translated as "small lips," the labia minora can be very small or up to 2 inches wide. They lie just inside the labia majora, and surround the openings to the vagina (the canal that joins the lower part of the uterus to the outside of the body) and urethra (the tube that carries urine from the bladder to the outside of the body).
- **Bartholin's glands:** These glands are located beside the vaginal opening and produce a fluid (mucus) secretion.
- **Clitoris:** The two labia minora meet at the clitoris, a small, sensitive protrusion that is comparable to the penis in males. The clitoris is covered by a fold of skin, called the prepuce, which is similar to the foreskin at the end of the penis. Like the penis, the clitoris is very sensitive to stimulation and can become erect.

The internal reproductive organs in the female include:

- **Vagina:** The vagina is a canal that joins the cervix (the lower part of uterus) to the outside of the body. It also is known as the birth canal.
- **Uterus (womb):** The uterus is a hollow, pear-shaped organ that is the home to a developing fetus. The uterus is divided into two parts: the cervix, which is the lower part that opens into the vagina, and the main body of the uterus, called the corpus. The corpus can easily expand to hold a developing baby. A channel through the cervix allows sperm to enter and menstrual blood to exit.
- **Ovaries:** The ovaries are small, oval-shaped glands that are located on either side of the uterus. The ovaries produce eggs and hormones.
- **Fallopian tubes:** These are narrow tubes that are attached to the upper part of the uterus and serve as tunnels for the ova (egg cells) to travel from the ovaries to the uterus. Conception, the fertilization of an egg by a sperm, normally occurs in the fallopian tubes. The fertilized egg then moves to the uterus, where it implants into the lining of the uterine wall.

(Source: <https://www.webmd.com/sex-relationships/guide/your-guide-female-reproductive-system#2> )

***Session Guide:***

- Show participants the labeled diagrams of the various reproductive organs.
- Discuss the functions as expressed above:

***After sharing information and discussing then you can share the following quiz with them:***

***Facilitators Note:***

- Here is a helpful video that might make this easier to explain:  
<https://happylearning.tv/en/the-reproductive-system/>

1. Which of the following is not a part of the male reproductive system?
  - (a) Penis
  - (b) Testes
  - (c) Uterus
2. Which of the following is not a part of the female reproductive system?
  - (a) Ovary
  - (b) Vagina
  - (c) Sperm duct
3. What are the male sex cells called?
  - (a) Sperm cells
  - (b) Sperm ducts
  - (c) Scrotum
4. Where are the male sex cells made?
  - (a) In the testes
  - (b) In the sperm ducts
  - (c) In the penis
5. What are the female sex cells called?
  - (a) Cilia
  - (b) Egg cells
  - (c) Cervix
6. About how long does the menstrual cycle take?
  - (a) About 5 days
  - (b) About 14 days
  - (c) About 28 days
7. What is ovulation?
  - (a) The release of a mature egg cell
  - (b) The loss of the lining of the uterus
  - (c) The joining of a male sex cell and a female sex cell
8. What substance passes through the placenta to the baby?
  - (a) Oxygen
  - (b) Carbon dioxide
  - (c) Blood
9. How long is gestation in humans?
  - (a) 28 days
  - (b) 40 weeks
  - (c) 11 year
10. Which change during puberty happens to boys and girls?
  - (a) Hips widen
  - (b) Facial hair grows
  - (c) Underarm hair grows

~~(answers: uterus, sperm duct, sperm cells, sperm, testes, egg cells, 28 days, release of mature egg, 28 days, underarm hairs)~~

(Source: <https://www.bbc.co.uk/bitesize/guides/z9fgr82/test> )



## LESSON 6: "MENTAL HEALTH"

### Lesson Objectives:

- Define Mental Health
- How to help someone who is depressed
- What is anxiety?
- What is depression?
- Coping strategies?
- How can sex affect you emotionally?



### Introduction:

Mental Health in the Caribbean, seems to still be a taboo conversation to be had. Over the past few years, we have made strides in address this and ensuring our generation and the people of this region can have access to mental health care services and information. Mental health is often over looked, but many younger people have become more vocal in speaking out about battling with this and many countries have responded by making guidance counselors and social workers available to in and out of school youth. Let's get to learning!

The World Health Organization, has stated that there are many mental disorders that can affect us. Each of these disorders can manifest themselves differently and can depend on a case by case basis. They are generally characterized by a combination of abnormal thoughts, perceptions, emotions, behavior and relationships with others. Some disorders include: depression, bipolar disorder, schizophrenia and other psychoses, dementia, and developmental disorders including autism. Luckily for us, there are some preventative measures for dealing with issues like depression. Some of these disorders can be treated with professional treatment, care and social support.



### **Definitions:**

“**Mental health** refers to cognitive, behavioral, and emotional well-being. It is all about how people think, feel, and behave. People sometimes use the term “mental health” to mean the absence of a mental disorder.”

**Mental disorders** comprise a broad range of problems, with different symptoms. However, they are generally characterized by some combination of abnormal thoughts, emotions, behavior and relationships with others. Examples are schizophrenia, depression, intellectual disabilities and disorders due to drug abuse. Most of these disorders can be successfully treated. (WHO definition)

**Anxiety** is an emotion characterized by feelings of tension, worried thoughts and physical changes like increased blood pressure. People with anxiety disorders usually have recurring intrusive thoughts or concerns. They may avoid certain situations out of worry. In the Region of the Americas, as many as 7.7% of the female population are estimated to suffer from anxiety disorder (males, 3.6%). Country-specific estimates can be found at <http://ghdx.healthdata.org/gbd-results-tool>.

**Depression** is characterized by sadness, loss of interest or pleasure, feelings of guilt or low self-worth, disturbed sleep or appetite, tiredness, and poor concentration. People with depression may also have multiple physical complaints with no apparent physical cause. Depression can be long-lasting or recurrent, substantially impairing people’s ability to function at work or school and to cope with daily life. At its most severe, depression can lead to suicide. Globally, an estimated 264 million people are affected by depression.<sup>1</sup> More women are affected than men. (WHO definition)

**Bipolar Disorder** consists of both manic and depressive episodes separated by periods of normal mood. Manic episodes involve elevated or irritable mood, over-activity, rapid speech, inflated self-esteem and a decreased need for sleep. People who have manic attacks but do not experience depressive episodes are also classified as having bipolar disorder. This is very common, and affects about 45 million people worldwide. (WHO definition)

**Schizophrenia** is a severe mental disorder, affecting 20 million people worldwide<sup>1</sup>. Psychoses, including schizophrenia, are characterized by distortions in thinking, perception, emotions, language, sense of self and behaviour. Common psychotic experiences include hallucinations (hearing, seeing or feeling things that are not there) and delusions (fixed false beliefs or suspicions that are firmly held even when there is evidence to the contrary). The disorder can make it difficult for people affected to work or study normally. (WHO definition)

As defined by GoodTherapy.org, **coping mechanisms** are “the strategies people often use in the face of stress and/or trauma to help manage painful or difficult emotions. Coping mechanisms can help people adjust to stressful events while helping them maintain their emotional well-being.”



### ***Session Guide:***

- Start the session establishing that this is a safe space and persons can ask any questions and share as much as they are comfortable with.
- Introduce the topic of mental health and establish the learning objectives of this practical session.
- Start by sharing copies of this “Self Esteem Bingo” and have persons fill it by themselves. At the end ask if any of them would like to share about their experience. If they don’t that’s fine. You can share yours if you want.
- See Bingo attached:
- Analyze the activity by recognizing that we all are at different levels with our self-esteem and that’s important that we understand where we stand and accept that there will always be others in better and worse positions that we are at and we must always be mindful of that.
- To achieve our learning Objectives for this session, we will use the following statements and ask persons to stand at different parts of the room if they “Agree, disagree or unsure”
- After reading each statement, and participants would have moved to indicate their views. Give one/two persons the opportunity to share why they would have moved to that spot.
- Before reading the next statement read from the definition where necessary and use information you would have acquired from credible sources like your individual Ministries of Health/ World Health Organization.
- After the activity, thank participants for their honesty and participation. Point them to national resources to access counselling and other mental health interventions.

## BINGO FOR ICEBREAKER:



# Self - Esteem Bingo

LEARN A NEW SKILL	DROP NEGATIVE PEOPLE	STAND AT THE EDGE OF COMFORT ZONE	DO SOMETHING CREATIVE OFTEN	AFFIRM YOURSELF OFTEN
EXPRESS FEELINGS	ACCEPT FAILURES AS PART OF GROWTH	FACE FEARS	MANAGE TIME WELL	MAKE TIME FOR REST
EXERCISE OFTEN	CULTIVATE HOBBIES	<i>Free</i>	LIVE HUMBLY	BE KIND TO YOURSELF
HONOR YOUR WORD TO OTHERS	REMIND YOURSELF YOU ARE ENOUGH	LOVE YOURSELF MORE THAN OTHERS WILL	DREAM BIG AND MAKE IT HAPPEN	CHALLENGE LIMITING BELIEFS
HELP SOMEONE	STOP WORRYING ABOUT WHAT OTHERS THINK	HEAL YOUR PAST	READ SOMETHING INSPIRATIONAL	RECLAIM INTEGRITY

**QUESTIONS/STATEMENTS FOR MAIN DISCOURSE:**

Females are more likely to have a mental illness than are males.

Once you have a mental illness, you have it for life.

People should work out their own mental health problems.

Medication is the best treatment for mental illness.

Coping mechanisms are always positive

Depression and sadness are the same thing

I have a very active support system.

I can discuss mental health with my parents easily.

People who get anxiety attacks are just over dramatic

sex can affect mental health.

People with a mental illness are generally violent and dangerous.

Adults are more likely than teenagers to have a mental illness.

You can tell by looking at people whether they have a mental illness.

People with a mental illness are generally shy and quiet.

Mental illness only happens to certain kinds of people.

Most people will never be affected by mental illness.

Good-looking people always have good mental health.

Mental health and Mental disorder are the same thing.

One person can struggle with multiple mental illnesses.

Everybody with a mental disorder is "crazy" and needs to be institutionalized.

***AGREE, DISAGREE or UNSURE?***

**Facilitators' Note:**

- Please see additional resources on Coping Mechanism below.

## What are Coping Mechanisms?

As defined by **GoodTherapy.org**, coping mechanisms are “the strategies people often use in the face of stress and/or trauma to help manage painful or difficult emotions.

Coping mechanisms can help people adjust to stressful events while helping them maintain their emotional well-being.”



## Can coping mechanisms be negative



**Yes!** Some coping mechanisms can negatively impact your mental and physical health. An example of a commonly practiced negative coping mechanism would be binge drinking or using drugs consistently when a person is dealing with a lot of stress and turmoil. When using either alcohol or drugs, this enables a person to cope with what they are feeling at that particular moment but it doesn't help in making the person or situation better. Instead, it masks the current feeling.

We should always try to motivate persons to use positive coping mechanisms such as writing down your feelings, exercise, listening to music, talking to a person that you trust about what you are going through etc.

*(Photos compliments of ASPIRE Youth Network Guyana- See social media platforms for more)*



## LESSON 7: "PHYSICAL HEALTH"

### Lesson Objectives:

- To importance of having a good Diet
- What is good physical health?
- To understand why Exercise in important for youth.



### Introduction:

Health is defined by The World Health Organization as a state of complete *physical*, mental and social well-being and not merely the absence of disease or infirmity. Thus, a very important step to complete wellness involves the promotion and maintenance of physical health. Physical health is not an exclusive entity, it is directly affected by and has a direct effect on an individual's nutritional intake, physical activity, mental and reproductive health. According to Schmidt, S. C. et al, regular physical activity (PA) can improve physical fitness (PF) and health, assisting in the prevention of diseases such as cardiovascular disease, obesity, cognitive degeneration and hypertension, just to name a few. The benefits of a physically active lifestyle during adolescence range from improved muscular and cardiorespiratory fitness, bone and caedimetic health, promotion of prosocial behavior and positive effects on body mass index.

### Definitions:

**Physical activity:** The World Health Organization WHO defined Physical activity as any bodily movement produced by skeletal muscles that requires energy expenditure.

**Physical fitness:** Physical fitness is a state of health and well-being and, more specifically, the ability to perform aspects of sports, occupations and daily activities. Physical fitness is generally achieved through proper nutrition, moderate-vigorous physical exercise, and sufficient rest.

**Nutrition:** Nutrition is the study of nutrients in food, how the body uses them, and the relationship between diet, health, and disease. Nutritionists use ideas from molecular biology, biochemistry, and genetics to understand how nutrients affect the human body.

**Healthy diet:** A healthy diet is one that helps maintain or improve overall health. A healthy diet provides the body with essential nutrition: fluid, macronutrients, micronutrients, and adequate calories.

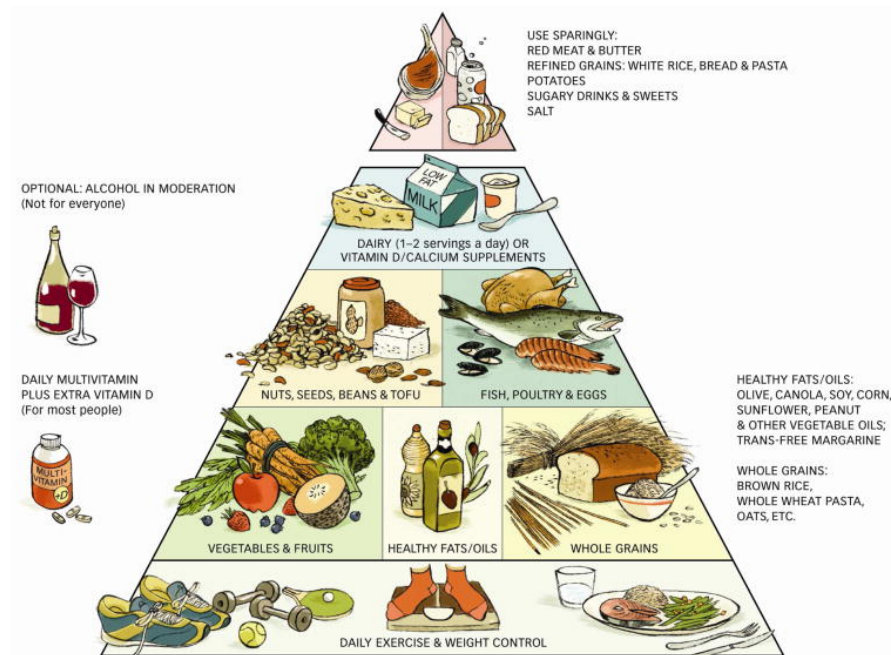
**Body mass index:** The BMI is defined as the body mass divided by the square of the body height, and is universally expressed in units of  $\text{kg/m}^2$ , resulting from mass in kilograms and height in meters

Session Guide:

- Personal introduction to establish a healthy learning environment asking students what their favorite physical activity is.
- Ask questions such as “what do you think physical health is?” and “what affects your physical health?”
- List the learning objective and the
- Introduce physical health in sections:
  - o First a broad overview.
  - o Then a discussion on nutrition and diet.
  - o And lastly, a discussion on physical fitness and physical activity.
- Complete the “*Physical health Jeopardy*” game.
  - o Divide your students up into 5 teams. Ask each teams to choose a name.
  - o Give each team a Jeopardy sheet and prepare your score sheet by adding the name of each team.
  - o Begin by asking Team 1 to choose a question, read the question followed by True or False?
  - o If team 1 answers correctly, they get a point. If they answer incorrectly, no one gets the point.
  - o Proceed to ask team 2 to choose a question and so on until all of the questions are asked.
  - o The team with the highest score wins!
- Thank the students for participating in the activity and declare the winner
- Ask each student what they learnt in this session.

## Facilitators Notes:

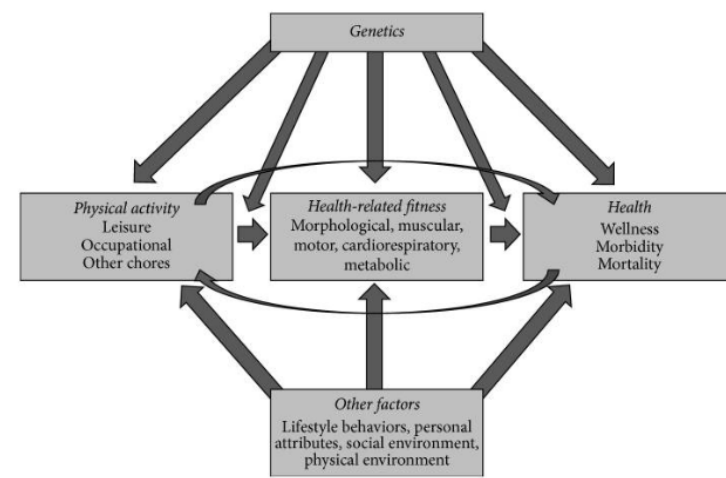
### The role of a healthy diet



Within the Caribbean, young people ages 10 to 24 accounts for 30% of the population. In 2010 the global prevalence of insufficient physical activity among school-going adolescence was 78.4% for boys and 84.4% for girls aged 11-17 years. To decrease these percentages, first nutritional assessments need to be made. Males require an average of 2,800

calories while females require 2,200 calories daily to supply their bodies with the energy they need during the developmental stage. One dietary pattern that may harm long-term health is one rich in red meat, highly processed grains, and sugar, and lacking in fruits, vegetables, whole grains, and fiber. Macro and micro nutrients such as protein, carbohydrates, dietary fat, vitamins and minerals when consumed in the *right* amounts provides the necessary fuel for growth and development.

### The roll of physical fitness and physical activity



The next step is the inclusion of physical fitness and physical activity. The current understanding of the relationship between physical fitness and physical activity is illustrated below. Factors such as personal and social attributes, age, sex and socioeconomic status also influence physical fitness, health status and their relationship. Routine practices such as habitual transportation activity, long time

sports club participation or work related activity are the fundamental building blocks for physical fitness. In addition to these, physical education, cycling and a variety of field activities boost the metabolic system aiding in the maintenance of an adolescent's physical health.



Game template for teams:

<b>PHYSICAL HEALTH JEOPARDY</b>			
<b>Definitions</b>	<b>Nutrition</b>	<b>Exercise</b>	<b>Bonus</b>
<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>
<b>200</b>	<b>200</b>	<b>200</b>	<b>200</b>
<b>300</b>	<b>300</b>	<b>300</b>	<b>300</b>
<b>400</b>	<b>400</b>	<b>400</b>	<b>400</b>
<b>500</b>	<b>500</b>	<b>500</b>	<b>500</b>

Questions:

Section	Question	Answer	Points
<b>Definitions</b>	Health is defined by The World Health Organization as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.	True	100
	Physical health is defined as the condition of your body, taking into consideration everything from the absence of disease to fitness level.	True	200
	Nutrition refers to an individual's ability to eat	False	<b>DOUBLE POINTS</b> <b>600</b>
	A balanced diet is one which consist of red met and processed grains	False	400
	Physical activity is defined as any bodily movement produced by skeletal muscles that requires energy expenditure.	True	500
<b>Nutrition</b>	Meats and Dairy Products are the only source of protein in our foods.	False	100



	Brown sugar is better for blood glucose levels than white sugar.	False	200
	The three nutrients that provide our body with energy are carbohydrates, fats and protein.	True	300
	Healthy fats are found in baked foods, processed mean and butter.	False	400
	Gastroenteritis (gas/wind) can be a result of skipped meals.	True	500
Exercise	Tendons attach muscles to bones.	True	100
	Yoga can boost your cognitive function and lowers stress.	True	<b>DOUBLE POINTS</b> <b>400</b>
	Walking or cycling to school are not forms of routine physical activity	False	300
	The human body has more than 650 muscles.	True	400
	At rest, muscle is three times less efficient at burning calories than fat.	False	500
Bonus	Exercising regularly can increase your lifespan by keeping your DNA healthy and young.	True	100
	Eating oatmeal provides a serotonin boost to calm the brain and improve your mood.	True	200
	Drinking five glasses of water a day can increase your chances of suffering from a heart attack by 40%	False	<b>DOUBLE POINTS</b> <b>600</b>
	Breathing deeply in moments of stress, increases anxiety and reduces blood pressure.	False	400
	Brushing teeth too soon after eating or drinking can soften the tooth enamel, especially after acidic meals.	True	<b>DOUBLE POINTS</b> <b>1000</b>

Score sheet for Facilitator:

	Round 1	Round 2	Question 3	Question 4	Total
Team 1:					
Team 2:					
Team 3:					
Team 4:					
Team 5:					

DRAFT



## LESSON 8: "SEX101-ALL YOU NEED TO KNOW"

### Lesson Objectives:

- How can I be sexually healthy?
- What is sex?
- How do we learn about sex?
- What's the differences between Sex, Gender and Sexuality?



### Introduction:

The UNFPA's Sexual & Reproductive Health Thematic Brief of 2017, suggests that the Caribbean unfortunately has the second highest rate of HIV prevalence globally. The went on to add that the highest recorded rates of HIV prevalence originates from the Bahamas, Jamaica, and Trinidad and Tobago, where young people account for nearly 60 per cent of new infections. <https://caribbean.unfpa.org/en/news/sexual-reproductive-health-thematic-brief>

This means that the region has a far way to go in terms of addressing young people's sexual health. This is further illustrated with the region's high rates of adolescent pregnancies and our alarming numbers of other STD transmission. In this chapter we will be exploring "Sex101" so that young people have more information on how to protect their sexual health and promote healthier sexual health decisions.

### Session Guide:

- Let's Start off by accessing the knowledge of participants about sex and about where we develop our knowledge and attitudes about sex!
- Place participants into groups of 4, each team will be given a topic and they will be asked to write down what are some of the things they learnt about sex from that particular group.
- The topics are; Media (Traditional and Social), Church/ Religious Institution, School/ Academic Institutions and The Family. Give each group 10 minutes to discuss this.
- Each group will have 5 minutes to present and then after each group would have shared their discussion points; we ask the wider group to add anything they think the other groups would have missed.
- Upon conclusion, close the session by analyzing the responses from the group and underscore the importance of deconstructing what we know about sex, how we feel about sex and how important it is we differentiate between fact and fiction.

### ***Facilitators Notes:***

- This is a listening session, the bulk of information to share will be shared in the upcoming sections of chapter.

## ***Learning more about; Sex, Gender and Sexuality***

### ***Definitions:***

**Sex** in it's simplest forms, is indicated by genitalia and traditionally means to be "male or female". The Marriam Webster dictionary defines sex as, "either of the two major forms of individuals that occur in many species and that are distinguished respectively as female or male especially on the basis of their reproductive organs and structures" <https://www.merriam-webster.com/dictionary/sex> Sex is sometimes used to refer to "sexual acts" or sexual activities.

**'Sexuality'** is the part of you expressed through your sexual activities and relationships. It is represented in your feelings, behaviors and your sexual identity. Your sexual identity is how you choose to describe or label your sexuality. There are many different labels that a person can choose, including not choosing a label at all!

Three of the most common aspects used to describe sexuality are:

*Feelings and fantasies:* who we fall in love with, who we are attracted to, who we think about when we are aroused, and who we intimately connect with.

*Behaviors:* include any form of sexual contact (kissing, touching, oral sex, vaginal sex, anal sex etc.), flirting, who we date, and have relationships with.

*Identity:* is the label or description of our sexuality.

### **Sexuality vs. Sexual Orientation**

Sexuality isn't only about "sex" or about the male or female genitalia. Sexuality includes sexual orientation, such as who a person is attracted to and whether the person identifies as heterosexual, homosexual or bisexual, as well as their sexual fantasies and attitudes and values related to sex.

Sexual orientation refers to sexual and romantic feelings for people of the same gender, a different gender, or more than one gender.

**Sexual Preference** is the preference one shows by having a sexual interest in members of the same, opposite, or either sex. It is basically the type of sexual activity someone prefers to engage in. While similar to sexual orientation, they are not the same. I can be a gay woman, but due to the pressures around me, then I prefer to have sex with men so no one finds out about my sexual orientation.

**Sexual activity** are the various acts used to express human sexuality. It involves sexual acts involving the private parts of persons; especially when it comes to exploring pleasure. Interesting point to note is that, sexual activities can be foreplay, vaginal or anal intercourse and even oral sex. Someone's sexual orientation and sexual activity aren't always black and white. I can be a gay man (sexual orientation) and I am interested in having sex with other men (sexual preference) but I recently experimented and had sex with a female (sexual activity).

**Gender** is used to describe the traditional social roles for males and females.

**Gender Identity** describes how someone feels on the inside.

**Gender Expression** describes how someone chooses to present their gender to the world. You know how society tends to announce a baby boy with the colour blue or a baby girl with the colour pink? Or how boys are given trucks and girls are given dolls? And how men are encouraged to play sports and be a tough 'man' and women are encouraged to paint their nails and do their hair and where makeup? These are societal constructs of gender.

**Gender roles** in society means how we're expected to act, speak, dress, groom, and conduct ourselves based upon our assigned sex. For example, girls and women are generally expected to dress in typically feminine ways and be polite, accommodating, and nurturing. Men are generally expected to be strong, aggressive, and bold. (Planned parenthood, definition)

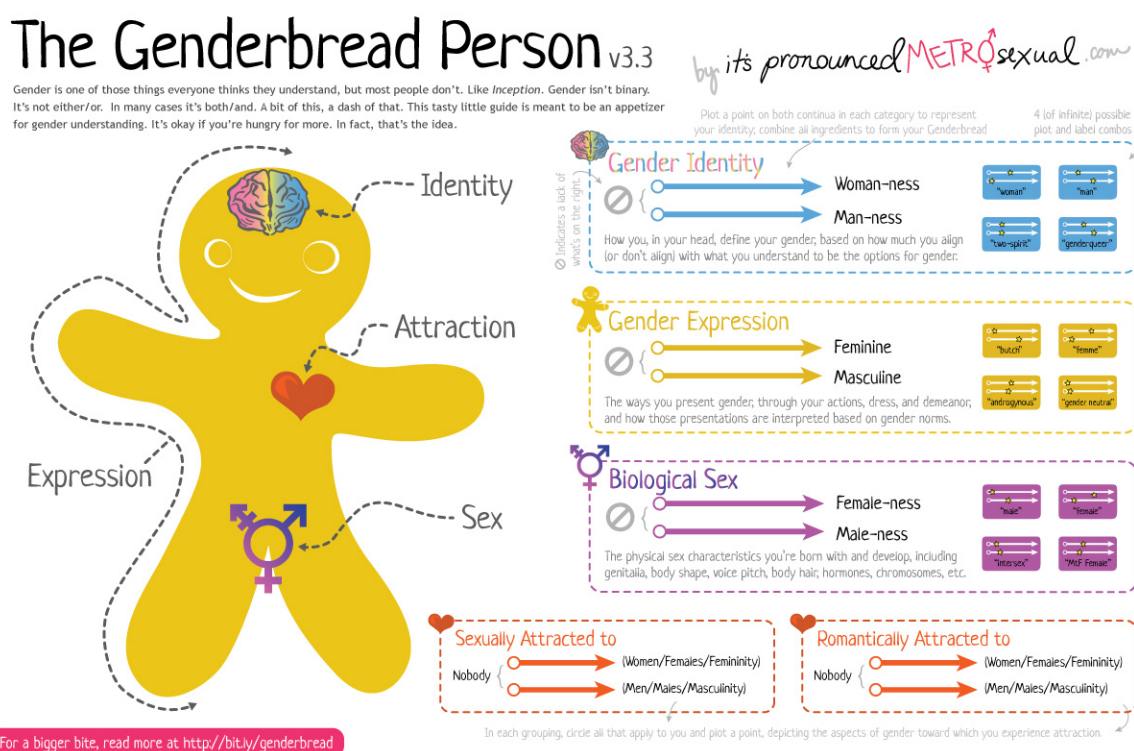
### Session Guide:

- To simplify this lesson, feel free to check the following video and download it for future use. <https://study.com/academy/lesson/sexual-identity-definition-major-components.html>
- This introductory Session to Sex, Gender and Sexuality will be best taught by using "The Genderbread Person". Print copies of the image and share it with participants. Here is a helpful link to get the image and to learn some more.

<https://www.itspronouncedmetrosexual.com/2015/03/the-genderbread-person-v3/>

- Explain the image to them and have them talk about some of their thoughts and experiences with sex and gender.

### The Genderbread Person:



### ***Facilitators Notes:***

Here are some more discussion points to discuss on the subject:

#### ***Common forms of sexual activities:***



#### ***Common forms of sexual orientations:***

*Heterosexual*-Hetero means “other” or “different,” so it classifies those who feel attraction to a sex different from their own.

*Homosexual*-Homo means “same,” so homosexual means liking someone of the same sex.

*Bi-sexual*-Bi means “two” and bisexual individuals feel attraction to those of both the same and different sex or gender. They are attracted to both females *and* males.

*Pansexual*- Pan means “all,” so pansexual people are attracted to all genders. It’s similar to bisexual in that pansexual individuals are attracted to more than one gender; however, they can feel attraction to male, female, intersexual, gender-queer, transsexual and other gender identities.

*Asexual*- people experience no or little sexual attraction. Asexual individuals can, however, feel a romantic and emotional attraction to someone.

*Queer*- is a very ambiguous word. It has many different definitions and uses, but here I will try to define it as simply as possible. Basically, a queer person does not conform to traditional gender or sexuality norms.

(There are many other types of sexual orientations, however these are the more common ones. You may also read about sapiosexual, metrosexual, etc. )

Video Link to help teach this: <https://www.youtube.com/watch?v=P5x5Fo7rMvY> :

---

**Important  
Gender  
Definitions:**

**Cisgender:** people who are assigned female at birth identify as girls or women, and most people who are assigned male at birth identify as boys or men

---

**Transgender:** people who have a gender identity that doesn't match the sex they were given at birth — for example, they were born with a female reproductive organ, but they identify as male. Transexual is someone who may have undergone surgery and/or hermonal therapy.

---

**Intersex:** means you're born with biological traits that are outside the strict male/female gender binary, whether it's your anatomy, chromosomes, and/or hormones.

---

Other Conversation points to stimulate discourse:





## LESSON 9: "SAFE SEX AND PROTECTION"

### Lesson Objectives:

- ABC's of sex
- How can I protect myself during sex?
- Am I ready?
- How do I talk to adults about sex?
- Consent



### Introduction:

It is of paramount importance that we talk to young people about their sexual health and give them factual information on how they can protect themselves, especially as young people in the Caribbean region get exposed to sex early.

Caribbean boys are reported to have generally engaged in their first sexual activity, before girls their age. The WHO's Global School-Based Student Health Survey (GSHS), stated that 56% of girls and 79% of boys on average had sex before the age of 14. This is cause for concern, especially as the legal age of sexual consent in the region is age 16 in many countries. More than 50% of adolescents who have ever had sex report initiating sex before the age of 16. In the report, boys reported to have had their first sexual encounter with someone in their age range; whereas girls would have reported to more likely have an older partner and a larger age difference.

The region's high rate of unintended pregnancies and increase in new HIV infection is further cause for worry, and as such we need to invest now in ensuring that our young people have access to information and services related to bodies. The more educated young people are, the more informed they will be in their decision making.



### ***Session Guide:***

- Introduce this session by establishing that this is a safe space. Open the discussion by asking participants “How can you protect yourself against STD’s and unintended pregnancies?”
- Ask participants if they know what the “ABC’s of Sex” are and guide a discussion surrounding the image below.
- Note that Condoms are not the only “Contraceptive” but it is the only one that serves a dual purpose in preventing the spread of STDs and protects against unintended pregnancies. We will explore more about contraceptives soon.

### ***Facilitators Notes:***

#### *Safe Sex ABC’s:*

*Abstain*

*Be careful/faithful*

*Condom (wear one!)*



## How can I protect myself during sex?

*What do you need to know about Contraceptives:*

### *What are contraceptives?*

*Simply put, contraceptives are methods or devices used to prevent a pregnancy.*

### *What are the most common forms?*

- **Condoms** are the only form of contraceptive that can prevent Sexually Transmitted Infections.  
A **new** condom **must** be used during **every** sexual encounter in order to protect against pregnancies.
- **The pill** is a small tablet containing hormones that needs to be swallowed by the woman at the same time every day.
- The **contraceptive injection** is a shot of hormones either in the muscle or under the skin that lasts for 1 up to 3 months.
- A **patch** that sticks to the skin and releases hormones that are highly effective at stopping pregnancy.
- **Emergency contraceptives** are hormone-based pills that are used in the event of accidental unprotected sex.
- An **IUD** is a small, flexible, often T- shaped device wrapped in copper that is placed inside your womb by your healthcare provider.
- **Implants** are 1 or 2 small hormone releasing silicone rods put under the skin by a healthcare provider. (lasts 3-5 years)

### *Some other contraceptives are:*

- Spermicides
- Diaphragm
- Cervical Caps
- Contraceptive Rings
- Sterilization
- Fertility Awareness
- Withdrawal Method (pull out)

### *Why are contraceptives important?*

Contraceptives can be used to plan when women and couples have children and how many children they have. This includes choosing:

- when they want to begin having children
- how far apart they want their children to be
- when they want to stop having children.

Contraceptives reduce unwanted pregnancies; especially teen pregnancies so girls should start using contraceptives once they are sexually active or as soon as they start menstruating.

Contraceptives reduce pregnancy related risks, especially since it is sometimes unsafe to get pregnant just after delivering. It encourages families to space pregnancies at least two years apart.


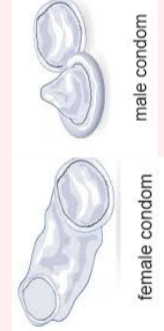
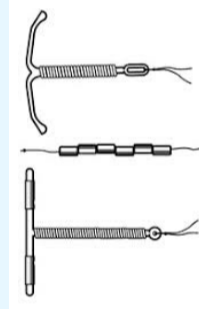
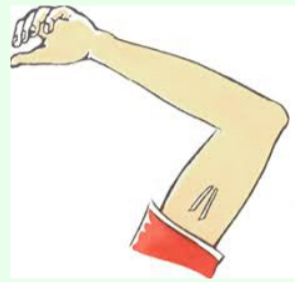

Other key facts according to the World Health Organization:

- 214 million women of reproductive age in developing countries who want to avoid pregnancy are not using a modern contraceptive method.
- Some family planning methods, such as condoms, help prevent the transmission of HIV and other sexually transmitted infections.
- Family planning / contraception reduces the need for abortion, especially unsafe abortion.
- Family planning reinforces people's rights to determine the number and spacing of their children.
- By preventing unintended pregnancy, family planning / contraception prevents deaths of

( Contraceptives Summary Video: <https://youtu.be/KyU880oHSxM> )


DRAFT

# Contraceptives are methods or devices used to prevent a pregnancy or Sexually Transmitted Infection:

<b>Birth Control Pills</b>	<p>Women take the pill by mouth to prevent pregnancy, and, when taken correctly, it is up to 99.9% effective. However, the pill does not protect against sexually transmitted diseases, including HIV (the virus that causes AIDS). The pill is a small tablet containing hormones that needs to be swallowed by the woman at the same time every day.</p>	
<b>Condoms</b>	<p>Condoms are a barrier method of contraception. They stop sperm from reaching an egg by creating a physical barrier between them. Condoms can also protect against STIs if used correctly during vaginal, anal and oral sex. There are two types of condoms, one for males and the other for females.</p>	
<b>Intra Uterine Device (IUD)</b>	<p>An IUD is a small, flexible, often T-shaped device wrapped in copper that is placed inside your womb by your healthcare provider. This can only prevent pregnancies, not STDs. It can last between 5 to 10 years.</p>	
<b>Implants</b>	<p>1 or 2 small hormone releasing silicone rods put under the skin by a healthcare provider. (lasts 3-5 years)</p>	
<b>Injections</b>	<p>The contraceptive injection is a shot of hormones either in the muscle or under the skin that lasts for 1 up to 3 months.</p>	

## Condoms and How to use the:

### How to use a **female condom**

- 

Check the expiry date & take the condom out of the packet carefully.
- 

Squeeze the sides of the inner ring at the closed end of the condom between your fingers.
- 

Find a comfy position – standing with one foot on a chair, squatting or lying – so that you can insert the condom into your vagina with your finger like you would a tampon.
- 

Put the condom in as far back as possible. The outer ring will hang about an inch outside your body.
- 

When you are ready to have sex use your hand to guide your partner's penis into the condom.
- 

Twist the outer ring and pull it out to remove it.

AVERT.org

### How to put on a **condom**

- 

Check the expiry date & take the condom out of the packet carefully. Don't use scissors or your teeth!
- 

Pinch the air out of the top of the condom. Make sure it is not inside out – the rim should be on the outside.
- 

Put the condom on top of the erect penis. Put it on **BEFORE** it touches a partner's mouth or genital area.
- 

Roll the condom down to the base of the penis. Wear it the whole time you are having sex.
- 

Take the condom off once the penis has been withdrawn completely but while it is still erect. Don't wait around too long to pull out as this risks semen spilling out, or the condom slipping off.
- 

Make putting on a condom part of the fun! Ask your partner to put it on for you, and keep stimulating each other as the condom goes on.

AVERT.org

(Compliments of AVERT.com)

## ***How do I talk to adults about sex?***

### ***Introduction:***

Young people all around the world find it challenging to talk about sex with adults. It is often a very uncomfortable discussion to have. Parents in some western societies usually have “The Talk” with their children as soon as they approach a certain age. “The talk” is usually a conversation where parents sit and discuss sex with their children. However, this custom may not be so common in the Caribbean region. Young people therefore rely on their peers and the media, to learn about sex.

We still need to advocate for parents to equip their children with the correct information about their bodies. Some adults are a bit more approachable than others, however, we need to encourage parents and guardians to educate themselves on sex, health, dating and body changes.

### **Tips:**

- Find a trusted adult. This can be a parent/guardian, teacher, guidance counselor, older relative, etc.
- Plan ahead what are some of the questions you want to ask/ what are some of the things you want to know about. Write them down if you need to.
- Give them a heads up on what you want to talk about so that they can prepare as well; recognizing that this conversation may be uncomfortable to them too.
- It's okay to tell them if you feel nervous. You can say something like, “This feels a little awkward for me, but I wanted to talk with you about...”
- It may feel weird asking certain questions, so maybe you can text your questions to them or write them on a notepad.
- Prepare to ask follow up questions if you don't quite understand. Please ask for clarity.

Please note that all adults aren't experts on these things so ensure you trust knowledge of the adult you're asking. Fact check where necessary.

### ***Session Guide:***

- Split the team into three teams and give each of them one of the following scenarios to consider and ask them to discuss the issue and come up with a short skit to illustrate how they would deal with the situation.
- Assign roles to each members, they can create their own characters if they wish. Ensure they incorporate guidance from the storyline and answer the questions posed.
- Give each team 15 minutes to prepare and 5 minutes each to present.

### ***Facilitators Notes:***

- The aim of the activity is for young people to give advice to each other in a creative manner, as peer to peer-guidance can be helpful and it can help them solve their own problems using critical thinking.
- This activity is to test their problem solving skills and to have them develop practical solutions to their issues.

### Role Play 1

July is thirteen (11) years old and lives with her grandmother who is a very religious woman who does not believe in talking to young people about sex. The young girl just started experiencing changes in her body and does not know what is happening. She want to ask her grandmother but dies not know how to. She has an older cousin who lives with her but she does not know if her cousin can help her. What should she do? Who should she talk to?



### Role Play 2

Joey is 15 years old and has 1n 18 year old girl friend who wants to have sex with him. They have been talking about sex and exhanging provocative pictures with each other, however, he has never had sex before. She told him to come over with condoms tomorrow. Joey's dad is his very approachable and he wants to ask him about condoms and about sex. What should he do? What other options are available to him? What advice would you give to him?



### Role Play 3

Alicia just had "The Talk" with her parents and they told her that if she talks to boys then she will get pregnant and possibly die during childbirth. She knows that this isn't true because her friends are sexually active and neither of them are pregnant. The school has a guidance counselor but Alicia does not feel comfortable speaking to her about "sex stuff". What are her options? Who can she talk to?

*Activity: Peer to peer teaching*

DRAFT





## LESSON 10: "CONSEQUENCES OF SEXUAL ACTIVITIES"

### Lesson Objectives:

- To learn more about Pregnancy
- To learn a bit more about Abortions
- What do you need to know about Sexually Transmitted Infections?
- Learn more about Reproductive cancers



### Introduction:

The Caribbean has the second highest HIV prevalence rate in the world. A 2006 UNAIDS Report estimated that 250,000 (range: 190,000 to 320,000) people infected with HIV live in the Caribbean. Haiti and the Dominican Republic, two of the countries in the RHRN Platform; have the greatest numbers of people living with HIV in the region.

Other Caribbean countries continue to make strides in the area of HIV prevention and management; however, we often forget that there are other Sexually Transmitted Infections that can affect us. The Human Papilloma Virus (HPV) is a very common sexually transferred ailment that can cause cervical and other reproductive cancers. In the past few years, many of us have now taken it upon ourselves to increase awareness on these diseases and infections.

Additionally, early and unintended pregnancies continue to be another burden to Caribbean economies and communities and as such; we need to ensure that the young people of the region understand the risks associated with sex; and of course the risks associated with early pregnancies.

### Definitions:

**Sexual activity** are the various acts used to express human sexuality. It involves sexual acts involving the private parts of persons; especially when it comes to exploring pleasure. Interesting point to note is that, sexual activities can be foreplay, vaginal or anal intercourse and even oral sex. Someone's sexual orientation and sexual activity aren't always black and white. I can be a gay man (sexual orientation) and I am interested in having sex with other men (sexual preference) but I recently experimented and had sex with a female (sexual activity).

**ABC's of Safe Sex:** Often used in HIV Prevention conversations globally, the ABC of Safe sex refers to "A" for Abstinence, "B" for "Being faithful" and "C" for Using Condoms.

**Abstinence:** This is when you refrain from having sex. This means that a person is not having sex.

**Virginity:** A virgin is someone who's never had sex. Many people from different communities have their own definition of what constitutes as "sex". Some young people think that having vaginal intercourse for the first time is how you lose your virginity. (This is very limiting as not all people have penis-to-vagina sex) Some people haven't had penis-in-vagina sex, but they've had other kinds of sex (like oral sex or anal sex) — and they may or may not see themselves as virgins. It is truly a complicated subject to discuss.

**Hymen:** It is a thin, fleshy tissue that's located at the opening of your vagina.

**Pregnancy:** Also known as gestation, is the period during which one or more offspring develops inside a woman. This happens after sexual intercourse, or sometimes artificial means of implantation.

**Abortion/Termination of a Pregnancy:** This is the voluntary ending of a pregnancy. There are two main methods of safe abortion: medical abortion, where medication is used to end a pregnancy, and surgical abortion, involving a medical procedure performed by a trained professional. (IPPF Abort Messaging Tool)

**Adoption:** is a process whereby a person assumes the parenting of another, usually a child, from that person's biological or legal parent or parents. Legal adoptions permanently transfer all rights and responsibilities, along with filiation, from the biological parent or parents.

**STD:** Sexually Transmitted Infections are passed from one person to another through sexual activity including vaginal, oral, and anal sex. They can also be passed from one person to another through intimate physical contact, such as heavy petting, though this is not very common.

These include chlamydia, gonorrhea, genital herpes, human papillomavirus (HPV), syphilis, and HIV. Many of these STDs do not show symptoms for a long time. Even without symptoms, they can still be harmful and passed on during sex.

**HIV:** stands for human immunodeficiency virus. It weakens a person's immune system by destroying important cells that fight disease and infection. No effective cure exists for HIV. But with proper medical care, HIV can be controlled.

<https://www.cdc.gov/hiv/basics/index.html>

**AIDS:** This the most severe phase of HIV infection. People with AIDS have such badly damaged immune systems that they get an increasing number of severe illnesses, called opportunistic illnesses. Without treatment, people with AIDS typically survive about 3 years.

<https://www.cdc.gov/hiv/basics/index.html>

**Reproductive Cancers:** are cancers that occur in the reproductive organs. These are cancers in the breast, cervix, uterus, vulva, endometrium or ovaries. Reproductive cancers can also be found in the prostate, testicles and penis.

## Session Guide:

- Start the session by asking Participants, “What are some of the consequences of sexual activity?”
- Split the group into three subgroups and assign one of the following groups; Pregnancy, Abortion Stigma Reduction and STDs.
- Ensure Each team has a notepad and pens/markers.

### **1- Consequences of Sexual Activity – Pregnancy**

- Ask this group to draw a pregnant person and ask them to use either text/drawing to walk you through the stages of a completed pregnancy.
- Ask them to write about some of the side effects of pregnancies that they would have heard about, what are some of the considerations that should be made during a pregnancy & what happens when a young girl gets pregnant?

### **2- What options do you have if get pregnant early? Abortion, Adoption and Parenting.**

- Define abortion and ask participants if they are aware of the different types of abortions.
- Ask them to talk about alternative measures like adoption/ parenting; in the event someone decides against abortions.
- Write the following statements; each on a new page and write what first comes to mind when you read the statement. Identify where persons believe that perception came from; be it the family, church, community or media.



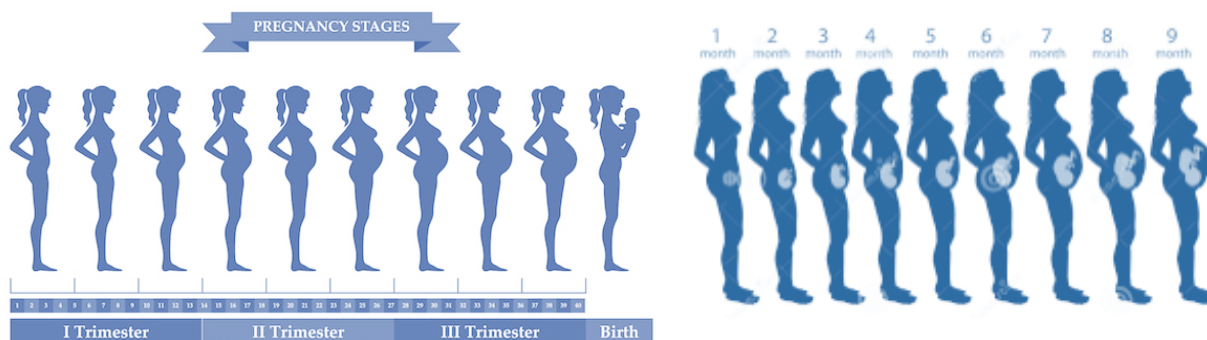
--See Note below for more information about abortions--

### **3- STDS & Reproductive Cancers**

- Ask the group write down all the different STDs that they would have heard about.
- Ask them if they know which STDs are more common.
- Ask them how can they protect from these STDs.
- Which STDS can cause Reproductive Cancers? What are reproductive cancers?

## Facilitators' Note:

- More about pregnancy:



The development of the fetus.

- More about Abortions:

Not recommended	Prefer	Explanation
Keep the baby Keep the child	Choose to move through a full pregnancy Continue the pregnancy	The term 'keep' implies a positive outcome which may not accurately reflect the situation. In addition it is medically inaccurate to describe the pregnancy as a baby or child (see earlier for explanation). It is more accurate to describe the situation as a pregnant woman choosing to continue with the pregnancy.
Late term abortion	Abortion in second/third trimester Abortion at XX weeks gestation	Late term could refer to any time in the second or third trimester – instead, if necessary, use terms that indicate the specific trimester or gestation. Use of 'late' may also imply that a woman is late (and thus irresponsible) in seeking an abortion.
Mother Father Parent	Pregnant woman Partner of a pregnant woman	Use of mother/father/parent during a pregnancy is value laden and assigns roles that the man or woman may not accept. It also implies that the fetus is a child, which is not accurate.
Partial birth abortion	Intact dilation and extraction	Intact dilation and extraction is the accurate description of a medical procedure used for abortions performed at 16 weeks gestation or later.
Prevent abortion Reduce the number of abortions	Prevent unintended pregnancies Reduce the number of unintended pregnancies	People often seek abortion due to the occurrence of an unintended pregnancy, or for health reasons, and there will always be a need for safe and legal abortion. All reproductive choices and care should be available and supported. People should be supported to prevent unintended pregnancies with access to contraception and accurate information.
Pro-life	Anti-choice Anti-abortion Someone who is opposed to abortion	Pro-life implies that those who support legal abortion access are 'anti-life', which is inaccurate. Instead use alternative terms to make it clear that you are referring to individuals opposed to anyone having an abortion.
Services Clients	Healthcare Abortion care Patients	Where possible, our language should reflect the fact that we are charitable organizations with a focus on providing rights-based, quality healthcare and support. In order to dispel myths about organizations that provide abortion care, it might be useful to avoid business-related language.
Repeat abortion Multiple abortion	More than one abortion	'Multiple' and 'repeat' can have negative connotations, such as 'repeat offenders'. Multiple and repeat also imply that each abortion experience for a woman is the same, whereas each abortion is surrounded by a unique set of circumstances.

*Image from International Planned Parenthood Federation's; How to talk about abortion.*

- Thing to consider if you are young and choose to Parent:

Will I be able to raise my child in a loving and healthy home?	Am I ready to be totally responsible for all of my child's needs?	Do I want to start a family now?	Can I afford to raise a child right now?
What kind of support will I have from my family, my friends, and my partner/the father?	Would I consider adoption or abortion?	How do I feel about co-parenting if we break up, or parenting alone?	What would having a baby right now mean for my future?
How would having a baby right now affect my family or other children?	Am I ready to go through pregnancy and childbirth?	Is someone pressuring me to become a parent?	Do my partner and I both feel good about staying together and parenting together?

- 
- Here are some more information about STDs that may be easier to print and share with young people:

Some of the more common STDs are:

**DRAFT**

Chlamydia.	Genital herpes.	Genital warts or human papillomavirus (HPV).	Gonorrhea.	Hepatitis B.
Syphilis.	Trichomoniasis.	Human immunodeficiency virus (HIV), which causes AIDS.	Other STDs: hepatitis A, cytomegalovirus, molluscum contagiosum, Mycoplasma genitalium, hepatitis C, and possibly bacterial vaginosis.	

Learning more about

# SEXUALLY TRANSMITTED DISEASES + INFECTIONS



## How does it spread?

You can get an STD by having vaginal, anal or oral sex with someone who has an STD. Anyone who is sexually active can get an STD. You don't even have to "go all the way" (have anal or vaginal sex) to get an STD. This is because some STDs, like herpes and HPV, are spread by skin-to-skin contact.

## What can I do to protect myself?

- The surest way to protect yourself against STDs is to not have sex.
- If you do decide to have sex, you and your partner should get tested for STDs beforehand.
- Make sure that you and your partner use a condom from start to finish every time you have oral, anal, or vaginal sex.
- Mutual monogamy means that you and your partner both agree to only have sexual contact with each other. This can help protect against STDs, as long as you've both been tested and know you're STD-free.
- Girls and young women may have extra needs to protect their reproductive health. Talk to your doctor or nurse about regular cervical cancer screening, and chlamydia and gonorrhea testing.
- Avoid mixing alcohol and/or recreational drugs with sex. If you use alcohol and drugs, you are more likely to take risks, like not using a condom or having sex with someone you normally wouldn't have sex with.

DRAFT



# Facts on *Chlamydia*

**Chlamydia can affect both men and women.**

*Untreated chlamydia can lead to other health problems:*

## In women:



**Pelvic inflammatory disease (PID)** - infection of the uterus, ovaries and fallopian tubes that causes pelvic pain and fever. PID can lead to long-term pelvic pain, inability to get pregnant, and potentially deadly ectopic pregnancy (pregnancy outside the uterus). PID can be treated with antibiotics.



**Cervicitis** - inflammation of the lower part of the womb (cervix).



**Salpingitis** - inflammation of the fallopian tubes (tubes that carry fertilised eggs from the ovaries to the uterus), preventing an egg from travelling from the ovary to the womb. This can sometimes be treated with surgery.



**Bartholinitis** - swollen Bartholin's glands - chlamydia can cause the glands which produce a woman's lubricating mucus to become blocked and infected, leading to a cyst that can become infected and develop into an abscess. The abscess can be treated with antibiotics.



A pregnant woman with chlamydia can pass it on to her unborn baby, which can affect the baby's eyes and cause pneumonia.

## In men:



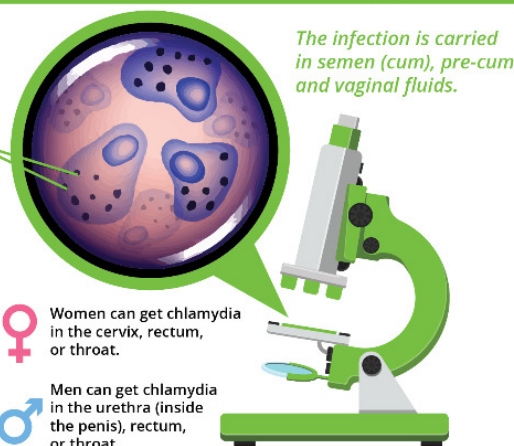
**Epididymitis** - infection of the tubes that carry sperm to the testicles, which can result in fever, scrotal pain and swelling.



**Urethritis** - inflammation of the urethra (the tube that carries urine from your bladder to outside of your body when you pee).



**Prostatitis** - infection of the prostate gland, which can result in pain during or after sex, fever and chills, painful urination, and lower back pain.



Women can get chlamydia in the cervix, rectum, or throat.



Men can get chlamydia in the urethra (inside the penis), rectum, or throat.

## Did You Know?

*Chlamydia can be transmitted through the following ways:*

- 1 > Vaginal sex without a condom or if the condom "breaks" with an infected person(s).
- 2 > Anal sex without a condom or if the condom "breaks" with an infected person(s).
- 3 > Oral sex without a dental dam or incorrect usage of a dental dam with an infected person(s).
- 4 > Mother to child transmission.
- 5 > Sharing sex toys that aren't washed or covered with a new condom with every use.
- 6 > your genitals come into contact with your partner's genitals - this means you can get chlamydia from someone even if there is no penetration, orgasm or ejaculation.
- 7 > you come into contact with infected semen (cum) or vaginal fluid, or get them in your eye.

## How can you reduce your risk of contracting Chlamydia & other STIs?

1. Using a condom correctly and consistently.
2. Getting yourself and your partner(s) tested regularly.
3. Abstinence.



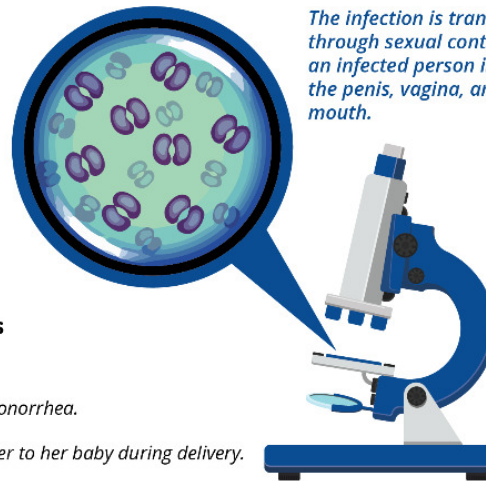
# Facts on *Gonorrhea*

Gonorrhea is an infection caused by the bacterium *Neisseria gonorrhoeae*.

It not only affects the reproductive tract, but can also affect the mucous membranes of the mouth, throat, eyes, and rectum.

**i** Men do not need to ejaculate to transmit or acquire gonorrhea.

**i** Gonorrhea can also be passed from an infected mother to her baby during delivery.



The infection is transmitted through sexual contact with an infected person involving the penis, vagina, anus, or mouth.

## What are the complications of Gonorrhea?



### In women, gonorrhea can lead to:

- ♀ Pelvic inflammatory disease, a condition that can cause abscesses.
- ♀ Chronic pelvic pain.
- ♀ Infertility.
- ♀ **Ectopic pregnancies** - pregnancy where the embryo attaches outside of the uterus.
- ♀ Further complications of a gonorrheal infection can occur in pregnant women during delivery; it is possible to pass the infection to the child.

Gonorrhea passed to an infant can cause joint infection, blindness, or a life-threatening blood infection.

- ♀ Also, infected women are at an increased risk for premature labor or stillbirth if left untreated.



### In men, a gonorrheal infection can lead to:

- ♂ **Epididymitis** - inflammation of the epididymis, which controls the production of sperm
- ♂ Infertility.



**BOTH men and women are at risk of developing a life-threatening disseminated gonococcal infection when gonorrhea is untreated.**

*This type of infection is often characterized by:*

- 1 > Fever.
- 2 > Arthritis.
- 3 > Those infected with gonorrhea are also at a higher risk of contracting HIV or, if already HIV positive, spreading HIV in addition to gonorrhea.
- 4 > **Tenosynovitis** - inflammation & swelling around tendon.
- 5 > Dermatitis.

# Facts on *Trichomoniasis*

Trichomoniasis is caused by a protozoan parasite called *Trichomonas vaginalis*. With antibiotics, Trichomoniasis can be treated and cured.

*Trichomoniasis can be transmitted through the following methods:*



**Unprotected sexual activity** including vaginal, anal and oral sex by an infected partner(s).



**Genital touching.**

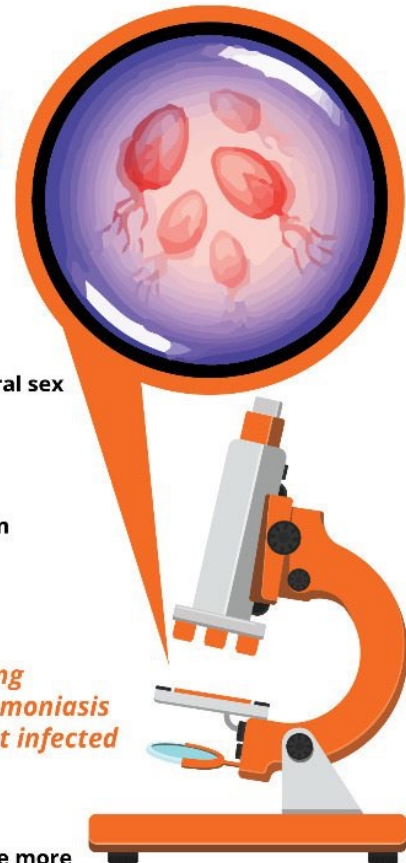
A man does not need to ejaculate (cum) for trichomoniasis to spread. Trichomoniasis can also be passed between women who have sex with women.

## Did You Know?

*Trichomoniasis can increase the risk of getting or spreading other sexually transmitted infections. For example, trichomoniasis can cause genital inflammation that makes it easier to get infected with HIV, or to pass the HIV virus onto a sex partner.*

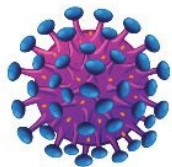


**Pregnant women** with trichomoniasis are more likely to have their babies too early (preterm delivery). Also, babies born to infected mothers are more likely to have a low birth weight (less than 5.5 pounds).

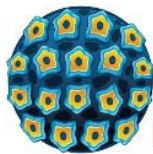


**Sexually Transmitted Diseases** caused by viruses cannot be cured.

However, there are treatment options that can reduce your risk of transmitting the virus onto your partner(s). These STDs include the following:



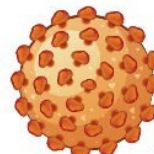
HIV



HPV



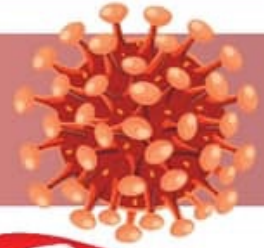
Herpes



Hepatitis B

# Facts on HIV

HIV stands for human immunodeficiency virus, which is the virus that causes HIV infection.



Currently, there is no cure for HIV.

HIV medicines can also reduce the risk of HIV transmission.

## HIV can be transmitted through the following methods:



### Sexual Transmission

It can happen when there is contact with infected sexual secretions. This can happen while having unprotected sex.



### Perinatal Transmission

The mother can pass the infection on to her child during childbirth, pregnancy and also through breastfeeding.



### Blood Transmission

Among drug users, sharing and reusing syringes contaminated with HIV-infected blood is extremely hazardous.

## Did you know?

AIDS stands for acquired immunodeficiency syndrome.  
AIDS is the most advanced stage of HIV infection.

HIV reduces CD4 cells of the immune system. Your CD4 cells protect you from acquiring an illness or infections. When your CD4 count is low or it is decreasing, your body is at risk of becoming sick.

Antiretroviral therapy (ART) is the use of HIV medicines to treat HIV infection. People on ART take a combination of HIV medicines (called an HIV regimen) every day.

An important goal of antiretroviral therapy (ART) is to suppress a person's VL to an undetectable level - a level too low for the virus to be detected by a VL test.

## What You Can Do.



### Don't inject drugs.

But if you do, use only sterile drug injection equipment and water and never share your equipment with others.



### Get tested and treated for STDs.

Insist that your partners get tested and treated too.



### Know your partner(s)

Ensure that you know the status of your partner(s). Limiting your number of sexual partners who are also safe, limits your chances of contraction.



### Use condoms.

Use a condom correctly every time you have vaginal, anal or oral sex.



If a pregnant woman takes HIV medications during pregnancy and provides her infant(s) with the medication, there is a possibility of reducing the risk of transmitting HIV onto the child.



Viral load is referred to as *"the amount of HIV in a sample of blood"*





## Difference between AIDS & HIV?



Acquired Immune deficiency Syndrome (AIDS) is the late stage of HIV. AIDS is a medical condition (immune system is too weak to fight infections).



Human Immunodeficiency Virus (HIV) is a virus which attacks immune system in humans. If a person is diagnosed with HIV, this does not automatically mean that they will contract AIDS.



*Currently, there is no cure for HIV/AIDS.*



When a person takes their HIV medicines as prescribed, they can reduce their chances of acquiring AIDS.



An undetectable viral load occurs in people living with HIV when the virus exists in such small quantities that it can't be detected by standard blood tests.



Viral load is referred to as "the amount of HIV in a sample of blood".

## What's the difference between Pep and Prep?



Post-exposure prophylaxis (PEP) is taken within 72 hours of coming into contact with the virus for it to be effective. It's only recommended following higher risk exposure, particularly where the sexual partner is known to be positive.



PEP is NOT a 'morning after pill' for HIV, and it's not guaranteed to work. It's meant as an emergency measure to be used as a last resort, such as if a condom fails during sex. Taking PEP will not protect you from other sexually transmitted infections or unwanted pregnancy.



Pre-exposure prophylaxis (or PrEP) is a way for people who do not have HIV but who are at very high risk of getting HIV to prevent HIV infection by taking a pill every day.

## How do you get tested for HIV?



HIV tests are typically performed on blood or oral fluid. They may also be performed on urine.



In general, antibody tests that use blood from a vein can detect HIV sooner after infection than tests done with blood from a finger prick or with oral fluid.

The following tests are used to check if someone has a positive or negative diagnosis of HIV/AIDS:

- nucleic acid tests (NAT)
- antigen/antibody tests

A NAT looks for the actual virus in the blood. The test can give either a positive/negative result or an amount of virus present in the blood (known as an HIV viral load test).

An antigen/antibody test looks for both HIV antibodies and antigens. Antibodies are produced by your immune system when you're exposed to bacteria or viruses like HIV. Antigens are foreign substances that cause your immune system to activate. If you have HIV, an antigen called p24 is produced even before antibodies develop.

## Treatment



Antiretroviral treatment (also known as antiretroviral therapy or ART) are the drugs that treat HIV. ART works by keeping the level of HIV in your body low (your viral load). This lets your immune system recover and stay strong.



ASPIRE  
Youth Network Guyana



aspiregy.org



aspireyngy@gmail.com



aspireyngy



Some Reproductive Cancers are caused by STDs like the Human Papilloma Virus (HPV)

## Let's learn about REPRODUCTIVE CANCERS

1

**Breast cancer** is the most common reproductive cancer in many Caribbean countries. It is less common in those aged under 50. It develops in the breast tissues.

2

**Cervical cancer** is one of the most preventable of all cancers. It is caused by certain types of the human papillomavirus (HPV). Having regular cervical smear tests offers the best protection against developing cervical cancer. This test will help find abnormal changes in the cells of the cervix.

3

There are four main types of **ovarian cancer** and 85% of people diagnosed with ovarian cancer are diagnosed in the later stages of disease when treatment options are limited

4

**Prostate cancer** rarely occurs in those younger than 55. Those who develop prostate cancer are mostly over the age of 65. In the very elderly, prostate cancer often grows very slowly and may cause no symptoms.

5

**Testicular cancer** is the most common cancer in those between 15 and 35 years but it can happen at any age. Testicular cancer is almost always curable, particularly if it is diagnosed and treated at an early stage

6

**Penile cancer** is a rare condition which occurs when malignant (cancerous) cells form in the tissue of the penis. If you are over 50 and uncircumcised, you are most at risk of getting penile cancer. If you have a history of genital warts and human papillomavirus (HPV or the wart virus) you are also at higher risk.





## LESSON 11: "RELATIONSHIPS"

### Lesson Objectives:

- To define and further understand relationships. (Interpersonal, intrapersonal, family, friendships, romantic relationships, etc)
- What do healthy relationships look like?



### Introduction:

It is important that we promote the significance of healthy relationships among our young people. It is a common misconception that we only need to invest in our intimate partner relationships, but it is very important that we invest in all of our relationships. Normally, people don't often assume that relationships can also be platonic. Platonic relationships are the ones we share with our friends and families with whom we have no romantic attraction to. This can be relationships with family, friends, workmates, etc.

Interpersonal relationships play an integral part in our lives and in our wholistic development. The relationships we share with those around us, builds our mental health, confidence, self-esteem and even our physical health!

### Definitions:

#### Relationship

This can be defined as a strong, deep, or close association or acquaintance between two or more people that may range in duration from short to long term.

#### Romantic relationships

American psychologist, Robert Sternberg defines "love" in terms of intimacy, passion, and commitment, which he claims exist in varying levels in different romantic relationships.

#### Platonic

This word platonic refers to the writings of Plato, one of the first recorded Greek philosopher who wrote on the interesting subject of love. Platonic love and platonic friendships are marked by the absence of physical or sexual desire. Plato did acknowledge physical desire, but thought that if two people truly inspired each other, their spiritual or ideal love would bring them closer to divinity.

## Friendships

The Britannica Dictionary defines friendship as “a state of enduring affection, esteem, intimacy, and trust between two people. In all cultures, friendships are important relationships throughout a person’s life span.”

## Toxic relationship

“Any relationship [between people who] don’t support each other, where there’s conflict and one seeks to undermine the other, where there’s competition, where there’s disrespect and a lack of cohesiveness

## Respect

Cambridge English Dictionary defines respect as, “the feeling you show when you accept that different customs or cultures are different from your own and behave towards them in a way that would not cause offence.”

## Tolerance

This refers to the, “willingness to accept behavior and beliefs that are different from your own, although you might not agree with or approve of them.”, as described by the Cambridge English Dictionary.

## Acceptance

This is defined as, “general agreement that something is satisfactory or right.”

## Session Guide:

- Introduce the topic of relationships and establish that there are different forms or types of relationships.
- Explain the importance of relationships in our personal lives and development.
- Establish the difference between platonic relationships and romantic relationships.
- Talk about Healthy Relationships vs. Toxic Relationships.
- Split the participants into smaller groups and ask them to place the following relationship qualities into a table (eg. below)

Healthy Relationship:	Toxic Relationship:
Respects my time	Sponges off of me
.....	.....

- Discuss with the group why you’ve decided to place certain qualities in each of the categories. The group has 15 minutes to discuss and can add other qualities to the list if they feel necessary.

Qualities:



Dependent On Partner For Happiness	White Lies	Manipulative	Cheating	Possessive Tendencies	Listens To Other People's Opinions	Insecurities
Open	Honesty	Excellent Team Player	Good Communication	Understanding	Fear	Obsessive
Supportive	Forgiving	Love	Loyal	Vulnerable	Trust	Sex
Very Traditional	Open to Trying new things	Patient	Knows How To Have A Good Time	Respects Boundaries	Takes Advice From Family And Friends	Respects Your Time

- Ask each team to share three toxic and 3 healthy qualities with the wider group, and provide a justification for each response.
- At the end of the presentations, participants can ask questions of other groups about their responses and debate the responses.
- Close by reminding participants that it is important that every relationship that we have is a healthy one.

#### Facilitators' Note:

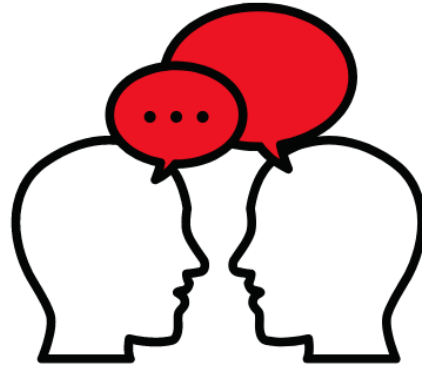
- Reiterate the various dimensions to "Relationships" and underscore that "relationships" can mean different things to different people. Types of Relationships (family, friendship, professional & romantic)
- What is common in most "Healthy relationships"



## LESSON 12: "EFFECTIVE INTERPERSONAL COMMUNICATION"

### Lesson Objectives:

- to better understand what is communication?
- what is interpersonal communication and why is it important?
- The basic elements to Interpersonal Communication



### Introduction:

As young people, and youth leaders specifically; young people need to be able to communicate effectively and share key messages with their peers, parents and other persons in their lives. When it comes to talking about Comprehensive Sexuality Education and other important issues young people are facing in the region, young people need to be able to communicate effectively with the different demographics they out to interact with. It is important that young people understand the importance of developing “key messages” and underscore the pertinence of tailoring these messages to speak to the specific demographic they are communicating with.

Youth use their own jargons and phrases to communicate, so what might work for an Instagram post targeting young people; may not work when you try communicating with politicians and policy makers.

Interpersonal communication is very important, and being aware of how we interact is equally important. It is not just about what is actually said ( or the language used) but how it is said and the non-verbal messages sent through tone of voice, facial expressions, gestures and body language.

Communication Skills are is therefore essential for youth leaders because it allows them to get what they want, by saying exactly WHAT THEY WANT?

### Definitions:

**Communication** is simply the act of transferring information from one place to another. This deals primarily with sharing information from one source to a next. This can be done in many ways.

**Interpersonal communication** is the process by which people exchange information, feelings, and meaning through verbal and non-verbal messages: it is face-to-face communication.

**Intrapersonal Communication** can be defined as communication with one's self, and that may include self-talk, acts of imagination and visualization, and even recall and memory (McLean, 2005).

**Verbal Communication** is most obvious and understood mode of communication, and it is the sharing of information between two individuals using audible/spoken words.

**Non Verbal Communication** is simply, communication without words. We communicate without spoken words by nodding, facial expressions, leaning toward the speaker to show interest and other gestures with our bodies.

A **Message** is the information shared by words (in speech/writing), and/or other signs and symbols. A message could be verbal/nonverbal/ both in the content of the communication process.

#### Session Guide:

- Ask the team “What is Communication?” and then define the concept.
- Depreciate between intrapersonal and interpersonal communication.
- Explain why communicating and effective communication is important to young people; especially as it relates to our autonomy.
- Using the notes below; ask participants “How do you communicate?” and then explain the 4 main categories or means of communication.
- There are elements of communication; these elements are needed to establish “effective communication”. Using the image below; explain these elements and then give them the following activity.
- Using the activity sheet below, split the group into 5 team and give each team 15 minutes to fill the template.
- They will all have “one message to share” but they must decide how they share this message.
- The team will share the following message and repurpose it for the following groups:

Peers

Parents

Teachers

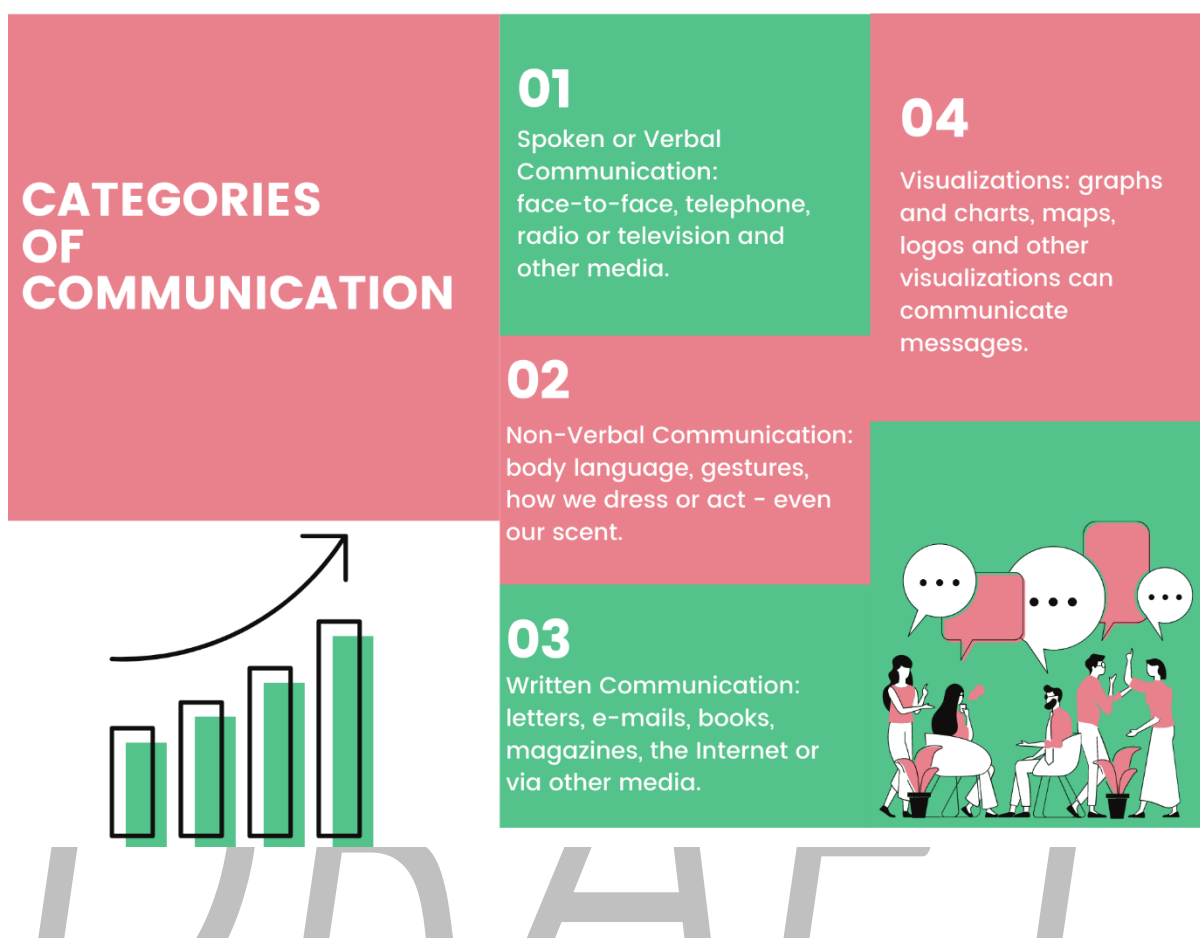
Religious  
Leaders

Politicians

**Message: “Comprehensive Sexuality Education (CSE) is important for all young people in the Caribbean!”**

Facilitators’ Note:

- Using the information below, please share it with participants so that they can better understand other key “communication” processes.



<b>COMMUNICATORS</b> Communication is an interactive process, between Sender and Receiver. They are called the "Communicators".	<b>MESSAGE</b> Message not only means the speech used or information conveyed, but also the non-verbal messages exchanged such as facial expressions, tone of voice, gestures and body language.	<b>CHANNEL</b> The channel refers to the physical means by which the message is transferred from one person to another.
<b>NOISE</b> Anything that distorts the message, so that what is received is different from what is intended by the speaker.	<b>CONTEXT</b> Apart from looking at the physical context, the social context also needs to be considered, for example the roles, responsibilities and relative status of the participants	<b>FEEDBACK</b> Feedback consists of messages the receiver returns, which allows the sender to know how accurately the message has been received, as well as the receiver's reaction.

# Elements of Communication

Name:

---

Date:

---

Communicators:

---

---

---

---

Message:

---

---

---

---

Channel

---

---

---

---

Noise

---

---

---

---

Context

---

---

---

---

Feedback

---

---

---

---

Other:

---

---

---

---



## **LESSON 13:**

# **"GENDER BASED AND OTHER FORMS OF VIOLENCE"**

### **Lesson Objectives:**

- To ascertain what GBV is and how can we stay safe?
- What is Gender Based Violence? -
- What are the forms of GBV? Physical, sexual, psychological & emotional,



### **Introduction:**

Gender Based Violence (GBV) in the Caribbean has traditionally been known largely for Violence against women. However, we know that other genders can also be abused and while men are less likely to come forward and report abuse; this relatively new concept of GBV now encompasses this. Unfortunately, women and girls still account for the tremendous majority of violence survivors.

UN Women has noted that one in every three women is beaten, coerced into sex or otherwise abused by an intimate partner at some point in their lives. The 2001 Caribbean Regional Tribunal on Violence against Women Report found that most women have reported to have experienced violence in their homes; and at the hands of their partners. "Domestic violence" accounts for most femicides in the region, with prevalence in places like Guyana.

The concept of GBV, fortunately, respects and works towards answering questions that can lead to the decline of domestic violence against our women and girls. However, it also speaks towards ending violence against all genders so that includes members of the Lesbian, Gay, Bisexual, Transgender (LGBT) community. This is particularly important as many persons in the LGBT community can share many experiences of a time when they felt powerless or when they were abused. This can range from verbal assault, to even physical and sexual violence.

It is for those reasons and many others that we will be exploring GBV, in a bit more detail so that we can all finish with a better understanding of GBV.

## **Definitions:**

**Gender** is used to describe the traditional social roles for males and females.

**Gender Identity** describes how someone feels on the inside.

**Gender roles** in society means how we're expected to act, speak, dress, groom, and conduct ourselves based upon our assigned sex. For example, girls and women are generally expected to dress in typically feminine ways and be polite, accommodating, and nurturing. Men are generally expected to be strong, aggressive, and bold. (Planned parenthood, definition)

**Gender-based violence** is violence against women based on women's subordinate status in society. It includes any act or threat by men or male dominated institutions that inflict physical, sexual, or psychological harm on a woman or girl because of their gender. In most cultures, traditional beliefs, norms and social institutions legitimize and therefore perpetuate violence against women.

**Domestic Violence** is any form of abuse against an individual, that happens within a home setting.

**Violence Against Women** - The Inter-American Convention on the Prevention, Punishment and Eradication of Violence defines violence against women as 'any act or conduct, based on gender, which causes death or physical, sexual or psychological harm or suffering to women, whether in the public or the private sphere.

**Psychological Abuse** (Emotional abuse) is any act which causes psychological harm to an individual. Psychological violence can take the form of, for example, coercion, defamation, verbal insult or harassment.

**Economic Abuse** (Financial abuse) refers to any act or behavior which causes economic harm to an individual. Economic violence can take the form of, for example, property damage, restricting access to financial resources, education or the labor market, or not complying with economic responsibilities, such as alimony.

**Sexual Abuse** can be deemed as any sexual act performed on an individual without their consent. Sexual violence can take the form of rape or sexual assault.

**Physical Abuse** is any act which causes physical harm as a result of unlawful physical force. Physical violence can take the form of, among others, serious and minor assault, deprivation of liberty and manslaughter.

**Rape** - A person commits the offence of rape if that person engages in sexual penetration with another person without that other person's consent or without reasonably believing that the person consents. The definition of rape is gender-neutral so that both men and women are protected against this offence. (Guyana, Sexual Offences Act of 2010)

**Victim/Survivor** is someone who has been abused.

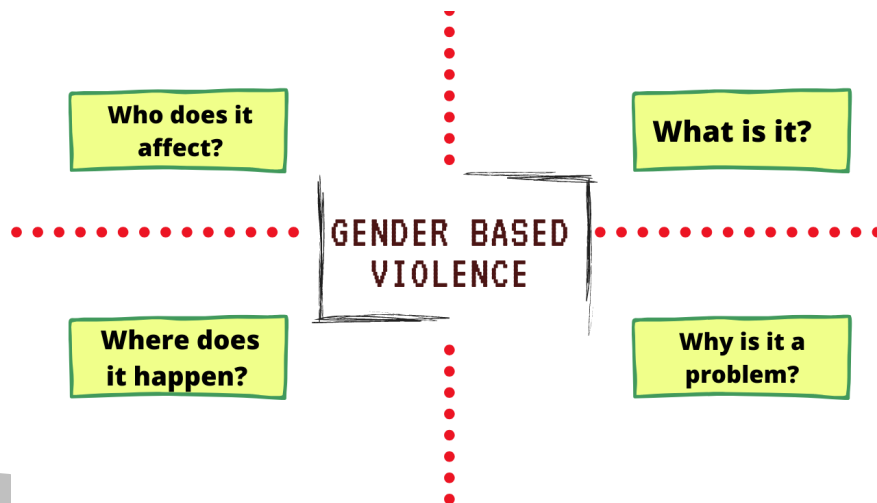
**Perpetrator** is the term used to describe someone who abuses/abused another individual.

**Bystander** in this case refers to someone who would've witnessed someone else being abused.



## Session Guide:

- Establish a safe space, by opening with a trust exercise.
- Introduce and define gender-based violence.
- Place participants into 3-5 groups depending on the size of the group.
- Using the chart below: Identify different types and persons affected by gender-based violence, where it happens and the impact this can have on individuals and societies.



- Discuss what gender-based violence is and why it is a violation of human rights; especially women's rights.
- Ask participants, "What are the connections between social and cultural, economic, legal, and political solutions to gender-based violence?"
- To conclude the session; give the groups 15 minutes and one of the case studies below and have them discuss it then provide an answer to the wider group.

Mark and Susan have been living together for 15 years and have two kids together. Susan has always been emotionally abusive to him and recently she has started to pick fights with him. He doesn't fight back because he's afraid that he might hurt her. Mark has scars about his body from their fight last night and he doesn't know what to do with his partner. What advice do you have for him?

Alex is a trans man & he works within a particular government Ministry. Recently, someone sent a picture of Alex before his transition to one of his workmates. This workmate then sent the photo with a side by side comparison to how he looks now, to the work group chat and then printed copies of it to place around the office. All of his workmates started to treat him differently and some even started calling him names. What should he do?

Kai is 15 years old and has been "involved" with his 28 year old History teacher at school for the past few months. Kai said that he consented to kiss her and wanted to have sexual intercourse with her but she said that they can do it when he turns 16 and finishes school in a few months. What would you say to Kai?

Devi lives with her husband David. He constantly gets drunk and abuses her and their six children. Devi, a housewife wants to leave him but she has no family to run to and has no source of income to move or to take care of her children. What should she do?

**Facilitators' Note:**

- Please see below for further information on GBV.
- Additionally, this can be a very sensitive topic for many so give persons ample time to deal with emotions.

*DRAFT*



## **Other GBV Facts:**

**Gender-based violence includes physical, sexual and psychological violence such as domestic violence; sexual abuse, including rape and sexual abuse of children by family members; forced pregnancy; sexual slavery; traditional practices harmful to women, such as honor killings, burning or acid throwing, female genital mutilation, dowry-related violence; violence in armed conflict, such as murder and rape; and emotional abuse, such as coercion and abusive language. Trafficking of women and girls for prostitution, forced marriage, sexual harassment and intimidation at work are additional examples of violence against women.**

**Gender-based violence is not exclusively a woman's concern. It is both a cause and consequence of gender perceptions. The use of the term 'gender-based violence' provides a new context in which to examine and understand the phenomenon of violence against women. It shifts the focus from women as victims to gender and the unequal power relationships between women and men created and maintained by gender stereotypes as the basic underlying cause of violence against women.**

**Source: UNIFEM Gender Fact Sheet No., available at <http://www.unifem-eseasia.org/Gendiss/downloads/UNIFEMSheet5.pdf>. Let us explore what a gender perspective on violence is.**

Forms of gender-based violence:

Violence against women and girls (VAWG)	Violence against LGBTI people.	Intimate partner violence (IPV)	Domestic violence (DV)
Sexual violence (SV) or Sexual Assault	Indirect (structural) violence.	Child marriage	Female genital mutilation
Honour killings	Trafficking for sex or slavery	Physical punishment	Sexual, emotional or psychological violence

*DRAFT*