



Sexuality Education in  
Life Orientation

# Scripted Lesson Plans

## Grade 10 Educator Guide



**basic education**

Department:  
Basic Education  
REPUBLIC OF SOUTH AFRICA

Sexuality Education  
in Life Orientation

**Scripted Lesson Plans**  
**Grade 10 Educator Guide**



## Foreword

Since 2000, the Department of Basic Education (DBE) has been offering HIV prevention and Sexuality Education (SE) through the Life Orientation (LO) curriculum, HIV and AIDS Life Skills Education Programme and co-curriculum activities. However, the high rates of learner pregnancy and HIV infection indicate that there has been no change in the behaviour of learners and many educators feel uncomfortable teaching sexuality education.



In 2011, the DBE initiated a process to strengthen its SE programme. One of the key steps was a review of the LO curriculum against International Technical Guidance on Sexuality Education (ITGSE); an evidence-informed approach for schools, teachers and health educators (ITGSE, 2009) from the United Nations Educational, Scientific and Cultural Organisation (UNESCO), as well as a meta-analysis of characteristics of effective sexuality education programmes internationally.

The DBE has developed Scripted Lessons Plans (SLPs) for Grades 4 to 12 through a collaborative and consultative process, including a writing team of curriculum and sexuality education experts, as well as a review team from the DBE and provincial structures.

SLPs are designed to assist educators to teach SE within the CAPS Life Skills and Life Orientation curricula in the classroom. This will be complemented by appropriate Learning and Teaching Support Material (LTSM) and teacher training and development programmes to facilitate optimum teaching and learning. An educator's guide is intended to assist educators with the provision of content, effective teaching methods and tools for measuring what learners have absorbed. This guide will ensure that engagement with learners on SE is age-appropriate and relevant to each grade.

The DBE strongly advocates abstinence among young people. As the first defence against teenage pregnancies and sexually transmitted diseases, learners are encouraged to delay engaging in sexual activities. In addition, the Basic Education Sector is committed towards contributing to the prevention and management of HIV, sexually transmitted illnesses (STIs), and Tuberculosis (TB) by ensuring that learners, educators, officials and parents are informed and equipped to decrease risky sexual behaviour and gender-based violence (GBV) among young people.

The DBE is grateful to the United States Agency for International Development (USAID) for providing the financial support that made the development of this guide and the related SLPs possible.

A handwritten signature in black ink, appearing to read 'A M Motshekga'.

**MRS A M MOTSHEKGA, MP**  
**MINISTER: DEPARTMENT OF BASIC EDUCATION**  
**DATE: MAY 2019**

## Acknowledgements

ISBN: 978-1-4315-3317-6

© COPYRIGHT Department of Basic Education

Department of Basic Education, Pretoria. 2019. The Educator Guide on Comprehensive Sexuality Education, aligned to the Curriculum Assessment and Policy Statement (CAPS) – Educator Guide.

This Educator Guide was developed by the Department of Basic Education with the financial support of the United States Agency for International Development (USAID) through Education Development Center, Inc. (EDC).

The Educator Guide will be updated periodically. As such, comments and suggestions are welcome and should be sent to: The Director General, Department of Basic Education, for the attention of the Health Promotion Directorate, Private Bag X895, Pretoria, 0001.

No part of this publication may be reduced or transmitted in any form or by any means without the prior written permission of the Department of Basic Education.

Address:

Department of Basic Education

222 Struben Street

Pretoria

0001

Website: [www.education.gov.za](http://www.education.gov.za)

Facebook: [www.facebook](http://www.facebook)

Twitter: [twitter.com/dbe\\_sa](https://twitter.com/dbe_sa)



This publication was made possible with the generous funding of USAID.

## TABLE OF CONTENTS

<b>FOREWORD</b>	<b>3</b>
<b>ACKNOWLEDGEMENTS</b>	<b>4</b>
<b>GUIDE FOR TEACHING SEXUALITY EDUCATION IN CAPS THROUGH SCRIPTED LESSON PLANS (SLPs)</b>	<b>7</b>
<b>CLASSROOM MANAGEMENT TO SUPPORT IMPLEMENTATION OF THE SLPs</b>	<b>16</b>
 <b>Lesson 10.1</b> Developing my self-confidence	 <b>54</b>
<b>Lesson 10.2</b> Understanding power. Getting to share it.	<b>70</b>
<b>Lesson 10.3</b> Gender, equality and healthier relationships	<b>95</b>
<b>Lesson 10.4</b> Social and environmental justice: we can make a difference	<b>107</b>
<b>Lesson 10.5</b> My changing life roles and life goals	<b>127</b>
<b>Lesson 10.6</b> Understanding sexual interest	<b>155</b>
<b>Lesson 10.7</b> Our choices, our decisions	<b>172</b>
<b>Lesson 10.8</b> I know what I want	<b>185</b>
<b>Lesson 10.9</b> Consent, rape and taking action	<b>201</b>
<b>BIBLIOGRAPHY</b>	<b>220</b>

## NOTE TO THE EDUCATOR

This poem serves as an introduction, to remind you of the important role you are playing in the lives of your learners. You are instrumental to giving your learners the knowledge, skills values and attitudes that will enable them to survive life! You need not share this poem with your learners.

### You taught me<sup>1</sup>

You taught me the names of the cities in the world  
BUT  
I don't know how to survive in the streets in my own city

You taught me about the minerals that are in the earth  
BUT  
I don't know what to do to prevent my world's destruction.

You taught me to speak and write in three languages  
BUT  
I don't know how to say what I feel in my heart.

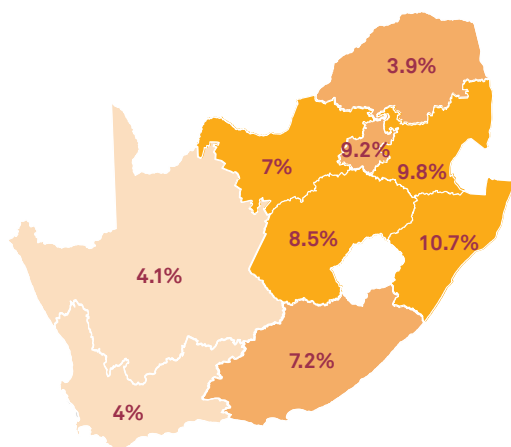
You taught me all about reproduction in rats  
BUT  
I don't know how to avoid pregnancy.

You taught me how to solve math's problems  
BUT  
I don't know how to solve my own problems.

Yes, you taught me many facts, and I thank you,  
I am now quite clever  
BUT  
Why is it that I feel I know nothing?  
Why do I feel I have to leave school to learn about coping with life?

1 Rooth, E. 1999. Introduction of Life Skills. Hands-on approaches to life skills education. Education for life Series. Cape Town. Via Africa

## A. GUIDE FOR TEACHING SEXUALITY EDUCATION IN CAPS THROUGH SCRIPTED LESSON PLANS (SLPS)



**Figure 1:** HIV prevalence by province, 2016

Source: SANAC, accessed January 18, 2019.

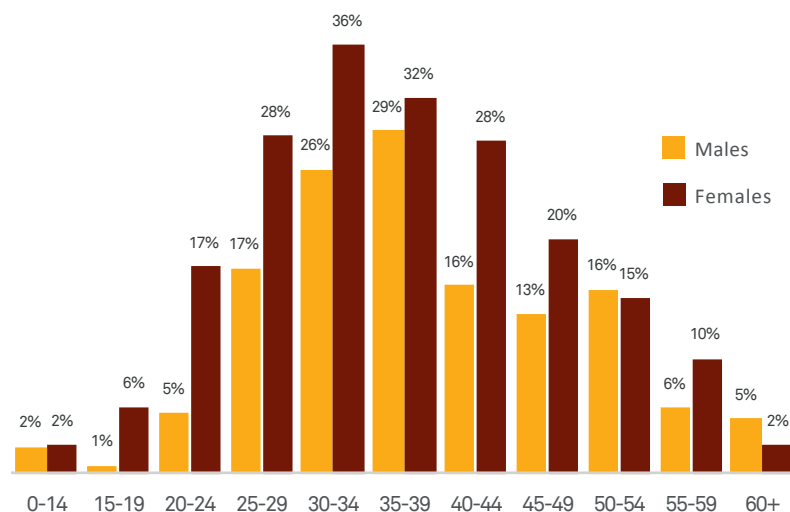
### 1. INTRODUCTION

Young people face many pressures and risks that are different from the risks adults faced when they were young. Risks such as HIV and other infections and early and unintended pregnancy come to mind first. But there are many unhealthy pressures affecting relationships and influences from many sources.

The difficult facts below highlight the need for effective sexual and reproductive health education that will equip young people to deal with today's challenges.

#### HIV is everyone's problem.

No matter where we live in South Africa, everyone is affected or at risk in some way. Working together to break the silence, show compassion, support those on treatment, and address risks, are the only way to stop the epidemic.<sup>2</sup>



**Figure 2 :** HIV infection rate by age

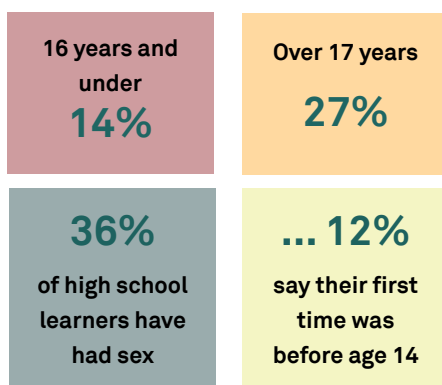
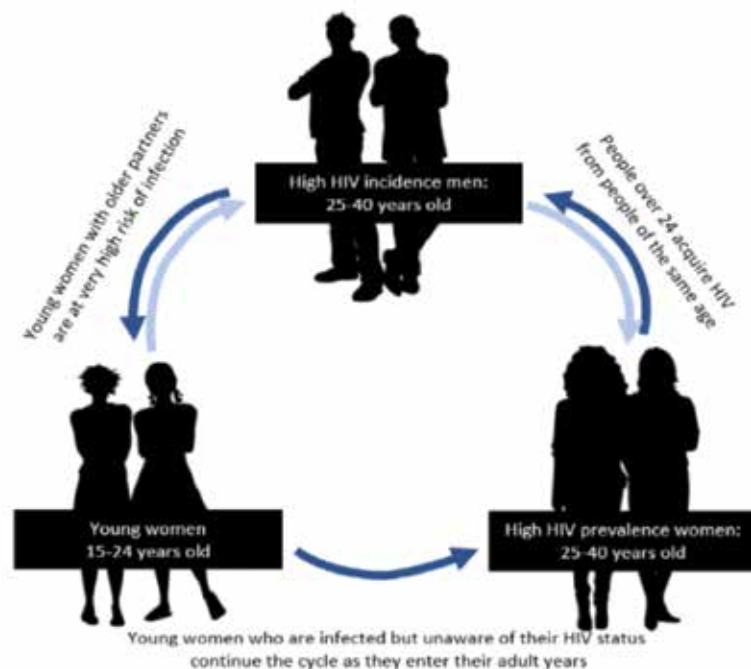
<sup>2</sup> Shisana, O., Rehle, T., Simbayi, L.C., Zuma, K., Jooste, S., Zungu, N., Labadarios, D., and Onoya, D. (2014). South African National HIV Prevalence, Incidence and Behaviour Survey, 2012. Cape Town, South Africa: HSRC Press.



**HIV:<sup>3</sup>**

While all young people are at risk, girls are getting infected with HIV at higher rates than boys. This trend continues through young adulthood. There are many reasons for these differences.

Age difference<sup>4</sup> is a major factor in South Africa – specifically the relationships between older men and young women / girls. Experts agree that understanding and addressing this cycle is critical for stopping the further spread of HIV in South Africa.

**PREGNANCY**

Teen pregnancy is common in South Africa, and can interfere with the ability of young people to achieve their goals.

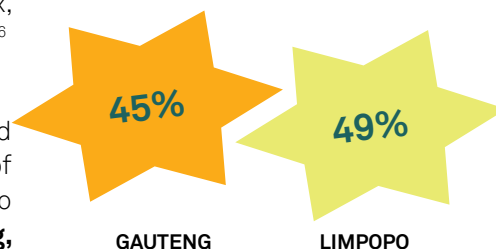
Among youth in school who said they had engaged in sexual activity, pregnancy rates are high.<sup>5</sup>

**SEXUAL INITIATION**

The age of first sex matters. The earlier a young person has sex, the greater their risk of HIV infection and unintended pregnancy.<sup>6</sup>

**PRESSURE, FORCE AND VIOLENCE**

Some sexual relationships are voluntary, some are not. Coerced and forced sexual relations are considered rape, and a form of GBV. Although less common, boys are sometimes forced into unwanted sexual relations. **Forcing anyone to have sex is wrong, and is considered a crime.**

**Percentage of girl learners who say they are forced to have sex**

A study on sexual violence in schools was conducted in Gauteng and Limpopo by Action Aid in 2015.<sup>7</sup> The study found that 45% of female learners in Gauteng and 49% in Limpopo reported being forced to have sex.

In response to these facts, the DBE's Policy on HIV, STIs and TB (2017)<sup>8</sup> addresses HIV, STIs, TB and teenage pregnancy as major barriers to achieving equality in education. HIV and TB have reached epidemic

<sup>3</sup> *ibid.*

<sup>4</sup> de Oliveira, T., Kharsany, A.B., Graf, T., Cawood, C., Khanyile, D., Grobler, A., Puren, A... Karim SSA. (2017). Transmission networks and risk of HIV infection in KwaZulu-Natal, South Africa: a community-wide phylogenetic study. *Lancet HIV*, 4, e41–50. Doi: 10.1016/S2352-3018(16)30186-2.

<sup>5</sup> Reddy, P., Sewpaul, R., Jonas, K. (2016) Adolescent pregnancy. (HSRC Policy Brief 15) Retrieved from [http://www.hsrc.ac.za/uploads/pageContent/7562/HSRC%20Policy%20Brief%2015%20-%20Adolescent%20pregnancy\\_PRESS%20\(3\).pdf](http://www.hsrc.ac.za/uploads/pageContent/7562/HSRC%20Policy%20Brief%2015%20-%20Adolescent%20pregnancy_PRESS%20(3).pdf)

<sup>6</sup> Reddy, S.P., James, S., Sewpaul, R., Sifunda, S., Ellahebokus, A., Kambaran, N.S., Omdardien, R.G. (2013). Umthente Uhlaba Usamila – The 3rd South African National Youth Risk Behaviour Survey 2011. Cape Town, South Africa: South African Medical Research Council.

<sup>7</sup> Action Aid. (2015) *ActionTalk Newsletter (August)*. Retrieved on March 14, 2016 from [http://www.actionaid.org/sites/files/actionaid/actiontalk\\_august\\_newsletter\\_aasa\\_2.pdf](http://www.actionaid.org/sites/files/actionaid/actiontalk_august_newsletter_aasa_2.pdf).

<sup>8</sup> The full name of the policy is the "National Policy on HIV, STIs, TB for Learners, Educators, School Support Staff and Officials in all Primary and Secondary Schools in the Basic Education Sector".

proportions in the country. Recent data tells us that 7.1 million people are HIV positive with an approximate 270 000 new HIV infections<sup>9</sup> and 450 000 new TB infections annually.<sup>10</sup> The rate of teen pregnancy in South Africa has become a major challenge because learner pregnancy does not only affect completion of schooling for individuals, in particular the girl learners, but whole families and communities within which schools and educational institutions function.

Together with the policy, the DBE has developed the Integrated Strategy on HIV, STIs and TB, 2012–2016, in response to the National Strategic Plan on HIV, STIs and TB, 2012–2016, as well as global and local thinking on HIV, STIs and TB. One of the key components of the strategy is to increase HIV, STIs and TB knowledge and skills among learners, educators and officials; to decrease risky sexual behaviour among learners, educators and officials, and decrease barriers to retention in schools, particularly for vulnerable learners.

The Curriculum and Assessment Policy Statement (CAPS) for Life Orientation (LO) for Grades 10 to 12 aims to guide learners to make informed and responsible decisions about their own health and well-being and the health and well-being of others. The SLPs exposes learners to their constitutional rights and responsibilities and to the rights of others, and should equip them with the knowledge, skills and values to make informed decisions, and develop life skills to equip them to take care of their sexual and reproductive health as they move into young adulthood. The SLPs provide opportunities for learners to build their confidence to avoid risky relationships and behaviour; to protect themselves if having sexual relations, and to manage their choices so that they can have a healthy, safe, sexual life.

The SLPs include well-structured, detailed activities to support teachers with the delivery of content specifically related to sexuality education (SE) guided by the CAPS. The SLPs focus on behavioural change and provide core messages for learners to remember when thinking about their sexual health. The core messages are included below.

## 2. PURPOSE OF THE SLPs (GRADES 10 TO 12)

The SLPs have been aligned to the Life Orientation (LO) CAPS outcomes, topics and subtopics, and the content needed to teach Grades 10 to 12 for the year. Relevant SE topics and concepts are linked to the LO CAPS concepts to make the teaching, learning and assessment of SE appropriate. Learners in these grades may already be confronted with decisions about relationships and how relationships influence their well-being and their choices about their life roles.

Learners are made more aware of more prepared to make decisions regarding their sexuality and healthy lifestyle choices.

With greater awareness, life skills and positive peer support, learners are more likely to be able to can delay sexual debut, resist unwanted sexual advances, and protect themselves from pregnancy and STIs if and when they chose to be sexually active. These lessons aim to decrease risky sexual behaviour among learners and to support them to make good decisions in relation to their sexual health.

In the lower grades, often as early as age 10 for girls and age 12 for boys, learners typically go through physical and emotional changes related to puberty. Puberty is new and challenging to both boys and girls, and the timing is individual and unpredictable. The transition from puberty into early adolescence typically happens in this phase between Grade 10 and 12, and alongside physical and emotional changes there are often associated issues like substance use and misuse, which can be further linked to topics like depression, behavioural problems, poor grades, early drop-out, and others.<sup>11</sup>

<sup>9</sup> UNAIDS. Ending AIDS Progress towards the 90–90–90 targets (2017) Retrieved on June 18, 2018 from [http://www.unaids.org/sites/default/files/media\\_asset/Global\\_AIDS\\_update\\_2017\\_en.pdf](http://www.unaids.org/sites/default/files/media_asset/Global_AIDS_update_2017_en.pdf)

<sup>10</sup> South Africa National AIDS Council (2017) Let our actions count: South Africa's National Strategic Plan for HIV, TB and STIs 2017–2022. Retrieved June 18, 2018 from [http://sanac.org.za/wp-content/uploads/2017/05/NSP\\_FullDocument\\_FINAL.pdf](http://sanac.org.za/wp-content/uploads/2017/05/NSP_FullDocument_FINAL.pdf)

<sup>11</sup> Adolescent drug use and psychological health. A longitudinal inquiry. Shedler J, Block J. Am Psychol. 1990 May; 45(5):612–30.

The SLPs raise related lifestyle issues as well as media and other factors that can influence our health, and helps learners to identify actions they can take and options for support as they prepare for this stage of development towards sexual maturity. The scope of activities is determined by linking content to the core knowledge, skills and values included in the topics and sub-topics in the LO CAPS.

The SLPs have been designed for step-by-step implementation. All the lesson planning and much of the preparation has been done for you, to support you in teaching CSE content. The SLPs are comprehensive lessons with activities and assessment tasks that help you to teach in line with your Life Orientation Annual Teaching Plans (ATPs). In order to deliver these effectively, your responsibility will be to become familiar with the lessons, and practice them as needed, before you teach them.

Activities are detailed, practical and time-bound; they include suggested forms of assessments and provide you with the relevant illustrations, readings and worksheets for your learners. This is to facilitate discussions and consolidate knowledge in a practical, structured way. Some content may be considered sensitive to teach and learn about. The activities are age-appropriate, engaging, and encourage learners to think about the new content they have to learn. They provide opportunities for learners to think critically and build their own values about SE topics that would otherwise be avoided. There are activities that ask learners to talk about the topics at home or with those they live with. This will allow your learners to internalise what they have learned, take home new ideas, and share the importance of behaviour change and good decision-making regarding their sexual health. A necessary part of your preparation will be planning ahead for time management and dividing learners into small groups for groupwork.

An overview of the lessons for each grade, their topics and concepts as well as how they fit into the ATP is provided at the end of this section.

### 3. OUTCOMES

The SLPs are not a stand-alone curriculum. They have been mapped against and aligned to the LO learning outcomes and content. The CSE content in the SLPs has been aligned to the LO CAPS topics.

There are 22 SLPs provided for Grades 10, 11 and 12, i.e. a breakdown of 9 + 9 + 4 SLPs respectively. The activities for each grade show how concepts are developed across the three grades in the FET Phase. The planning for the SLPs ensures that activities focus on what learner performance is expected at the end of each grade and by the end of the phase. **See Appendix 1: SLPS at a glance.**

The SLPs are not taught consecutively but they will be taught across the whole year, where they can be taught appropriately within the overall content of the LO CAPS. Ideally the LO CAPS should be taught in sequence, in order to build on the knowledge and skills learned in previous lessons.

The assessment provided will form part of the informal assessment programme for each grade except where a recommendation is made for you to use an assessment task as part of your formally recorded assessment. You have a choice to include these tasks if you think they show accurate learner performance for specific content in CAPS. No additional time for teaching is expected when using the SLPs as the lessons can be taught within the ATP. The assessment types (e.g. peer- individual- teacher- and group-assessments) and assessment forms (e.g. quizzes, role-plays, etc.) used in the activities have been written to model the kind of assessment that is most useful for assessing the knowledge, skills, values and attitudes covered in CSE.

Many activities encourage learners to carry out their own reflections and discussions outside the classroom. This encourages positive peer relationships, communication in the home, and the building of healthy friendships. They are intended to build a safe environment in which learners will feel open to positive influences.

## 4. STRUCTURE OF THE SLPs

The SLPs use a format that facilitates the planning and preparation of teaching, learning and assessment against the topics and subtopics in the CAPS. The structure is as follows:

### 4.1 CAPS TOPICS AND SUBTOPICS

All the SLPs have been aligned to and link to the topics and subtopics in the CAPS. Some activities deal with more than one topic and subtopic. If so, these topics and sub topics are indicated in the lesson plan of that SLP. There are natural links between the CAPS concepts and the SE content to be taught.

### 4.2 CONCEPTS

All the relevant, specific content knowledge and concepts for CSE and reproductive health have been provided in the activities. The concepts have been selected to ensure that age-appropriate learning and application of knowledge happens for all learners. The concepts are directly linked to what you need to teach, and what your learners will know at the end of the activity.

The concepts are listed for each SLP, and included with definitions in the glossary so that you can use them to consolidate your teaching and check your learners' understanding of the concepts at the end.

For each grade, a detailed overview of the topics and concepts is provided. See the table showing *SLPs At-a-Glance* for each grade. The topics for the CAPS are linked to the concepts for CSE for all the SLPs.

### 4.3 KNOWLEDGE, VALUES AND ATTITUDES

The SLPs are designed to increase knowledge as well as to change and promote healthy behaviour. In order for learners to build their confidence and ability to make healthy decisions and act on them, it is important that knowledge is acquired together with positive values, attitudes and life skills. On a personal level, your learners will be challenged to make positive life choices. Learners are given the opportunity to reflect on their behavior and make new decisions about how they behave and what they choose for themselves. Behaviour change is a process and it is not expected that change is seen after just one set of lessons. The activities ask learners to talk about behavior with their peers. There is a chance that together they will continue to discuss and be aware of changing their behavior and making good choices for themselves.

The implicit outcome of getting learners to engage in the class on relevant issues, healthy choices and behaviour is that those healthy choices find their way back into their homes and communities, where choices regarding sexual behaviour are both necessary and challenging. The intention is to build a critical mass of learners in school and in the community who are able to model healthy behaviour and choices for their peers.

#### 4.4 TIME ALLOCATION

Each SLP has been written to cover one hour (1hr). This has been done to accommodate a variety of time – tabling used across schools for each period. For example, timetables structured on a thirty minute period can be accommodated by teaching one SLP over two periods. You can fit the SLPs into your own timetables.

In some lessons, there is an indication of a “natural break” where the content is split to allow you to teach it over two 30-minute periods.

In the Grade 12.1 lesson the same topic and subtopic have been used to develop two activities so the time allocation shows 1 hour + 1 hour. This lesson allows for preparation of the lesson by learners in one term and then the execution of their planning in the following term.

Although the time allocated is 1 hour, as with any lesson you teach, some activities may take longer depending on how well learners grasp content being taught. Many of the activities ask that learners take tasks home and engage on their own with them. This is to give them time and space to reflect and respond individually to what they are learning.

The SLPs do not cover all the time allocated for Life Orientation per week. That is because there are more topics and subtopics that are not about CSE that still need to be taught in CAPS.

**Remember that the SLPs are done across the four terms and are taught in different weeks across all the terms.**

#### 4.5 TEACHING METHODOLOGIES

Recommended teaching approaches and methods are included in all the activities found in the SLPs. The activities should be taught as they have been scripted. The methods and approaches have been selected to ensure that discussion and practical engagement can happen in the time allocated to each SLP. Some teachers are more confident of teaching some methods than others. The methods used aim to ensure that your learners are familiar with the suggested teaching approaches. You must first explain what they are expected to do, know or show, using the particular technique recommended.

Some methods and approaches can be time-consuming if not managed well. It is important that you plan ahead and feel comfortable using the suggested method. If you do not feel comfortable, it is preferable for you to use an approach you are comfortable with, as long as it still encourages participatory learning and allows your learners to engage fully.

Learners may sometimes find it difficult to divulge sensitive information in front of their peers in the class. No one should feel forced to share information they do not wish to disclose to others. A suggestion is that an “**Inbox**” is made available in the classroom, where learners may then post their questions or comments confidentially. The higher the level of confidentiality, the more protected learners will feel

about what they are experiencing and need to share. Selected posts can be dealt with in the classroom when feasible and appropriate during the day or during the week.

#### 4.6 RESOURCES

A list of the resources is provided. These are **suggested** resources. The resources consist of materials that can be found in any functional classroom. Mostly, activities ask learners to participate in the making of some of the learning resources, like game boards, body outlines, etc. Learners can make these resources during the Creative Arts period or conduct a survey data analysis in their Mathematics lesson.

Schools and classrooms are resourced differently and educators may have other resources available to assist them. The SLPs are there help educators **to facilitate and guide discussions**.

A perceived lack of resources should not be a barrier to effective teaching using the SLPs. The resources required have been suggested because they are easily obtainable. Where resources like models are used, a note has been included to ask the local clinic to assist by loaning models for use in the classroom.

Additional resources have also been included in some of the activities to provide educators with support information. Some of these are links to websites or educational articles. If the educators do not have access to these, they will still be able to teach the lesson with the resources provided in the activities.

#### 4.7 BRIEF LESSON SUMMARY

The brief lesson summary gives you a synopsis of what is contained in the lesson, its activities and teaching methods. It provides description of what the SLP deals with, and the main aims of that lesson. Brief summaries of each SLP for each grade are provided in a table at the end of this section. This will give you a snap shot of the content for each lesson. **See Appendix 2: Brief Lesson Summaries.**

#### 4.8 KEY POINTS

The key points give a summary of the main points in the lesson and the core knowledge being targeted, and emphasise what is essential to the SLP.

#### 4.9 ASSESSMENT

Assessment tasks have been designed for each SLP. They are used for self-, peer- or group-assessment, as indicated. Each SLP shows all the types of assessments and tasks being used in that SLP. Keep evidence of learner performance in the SLP as an assessment record of what your learners have learned; how well they have internalised the content; how their behaviour and attitudes have been influenced, and what content has been most challenging for them. Many assessment tasks ask learners to do the task collectively and to write it up individually. This is to give them time for discussion on difficult topics and to share ideas before doing personal reflection.

Behaviour change happens over time, and may not be evident immediately in the classroom. In some activities, learners might show some adjustments to their behaviour, such as using more respectful language, showing more sensitivity to gender dynamics, or being able to talk more openly about their feelings, etc. The SLPs aim to provide opportunities for learners to reflect on their own behaviour and how their behaviour influences their ability to achieve their life goals. Behaviour change, developing healthy attitudes and acquiring good values is a long-term process. Learners are encouraged to engage

in personal reflection in the different activities provided.

#### 4.9.1 Informal assessment

The approach to the new content and knowledge for CSE encourages learners to apply what they learn, re-apply the knowledge in different situations, internalise what they have learned and adjust their behaviour. This is a **formative or developmental** process. Informal assessment is not recorded for learner performance purposes.

Formal assessment is meant to be recorded and to form part of a learner's portfolio. The activities in the SLPs are not stated as formal assessment tasks, but suggestions are made about which assessments you may want to record for formal assessment purposes.

Assessment tasks are formative when they focus on developing skills consolidating learning.

An overview of all the assessments in activities for each grade is included in **Appendix 3: Overview of Assessments in Grades 10-12.**

#### 4.9.2 Learner assessment

For tasks that learners are expected to do on their own, encourage them to share their answers and experiences. This need not be classroom-bound or dealt with only in LO in the classroom. What is learnt in LO can be appropriately linked to other subjects. Learners in these grades are able to work more independently and are encouraged to reflect on what they have learnt across each activity. Assessment tasks are structured for peer engagement and discussion as well as for self-reflection activities. An overview of learner assessment tasks for each grade is included **See Appendix 4: Overview of Learners Assessment Tasks.**

#### 4.10 NOTES TO THE EDUCATOR

##### NOTE TO THE EDUCATOR

The SLPs ask for a high level of engagement from you. The notes may alert you to important aspects of the activity, and flag ways in which the activity can be improved. The aim is to support you to teach content that may be difficult or unfamiliar.

The SLPs introduce concepts progressively to your learners. Knowledge is built up across all the activities and often, prior learning is used to introduce new concepts or skills. In many of the SLPs, the Note to educator will make reference to what has already been taught as well as what is still to follow. You need to go through both the preceding and the follow-up activities when preparing to teach an activity so that all the links are understood.

The scripting of the lessons means that a higher level of engagement happens with you through the SLPs on what must be taught, what learners must learn and how to assess learners. The notes may prompt and alert you to important aspects of the activity, and may flag issues related to how the activity can be improved. The expectation is that you will feel supported as you teach content that may be difficult or unfamiliar.



The SLPs have been designed to introduce concepts progressively to learners. Knowledge is built up across all the activities and often, prior learning is used to introduce new concepts or skills. In many of the SLPs, the note to the educator will make reference to what has already been taught as well as what is still to follow. You need to go through both the preceding and the follow-up activities when preparing to teach an activity so that all the links are understood.

#### **4.11 TEACHING AND LEARNING RESOURCES**

Readings, resources and worksheets are included in the Learner Book for the SLPs. They are structured to encourage independent learning and the consolidation of knowledge. The focus is on raising awareness about behaviour as a first step to behaviour change. Peer support and an enabling environment important elements. Encourage your learners to work individually and where necessary, to practice the changes encouraged in the SLPs with their peers.

#### **4.12 GLOSSARY**

A glossary of terms has been developed for each SLP and is found at the end of the lesson. The terms are explained as they have been used in the activities in the SLP. This will ensure a common understanding of concepts that may be less familiar or completely new to both you and your learners. With a glossary at hand, your learners will feel more comfortable to learn and use the terms. Use the glossary to build vocabulary with learners and to get them to use the terms with confidence and understanding.

#### **4.13 BIBLIOGRAPHIES**

All resource material used for the SLPs is referenced. You might want to follow up some of the references to broaden your own understanding and knowledge in a structured and directed way. Some learner activities give links to content that learners can research for themselves.

### **5. THE CORE MESSAGES TO BE INTEGRATED THROUGHOUT THE CURRICULUM**

Core messages have been written for Grades 10 to 12, spelling out the value statements that will be reinforced in all the activities in the SLPs. The messages are simple “I-messages” for learners to use and share with each other and beyond the classroom.

Use the messages; put them up in the classroom; insert them in newsletters to parents etc., so that your learners hear and see them constantly.



### CORE MESSAGES (10, 11 AND 12)

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

## B. CLASSROOM MANAGEMENT TO SUPPORT IMPLEMENTATION OF THE SLPS

This section describes measures you can take to manage your classroom and your learners well, and to create an environment conducive to learning. The main focus is on facilitating the new content for Sexuality Education and strengthening how you will teach and assess each of the activities. Learners in Grades 10 to 12 have varied levels of experience with relationships, are able to better understand issues of risk and risky behaviour, and can be encouraged to be more self-regulating than learners in earlier grades.

### 1. MAINTAINING YOUR ROLE AS EDUCATOR

Your role, as the educator, is critical in the delivery of the SLP content and in creating an environment conducive to learning.

Here are some tips:

1. Help your learners feel comfortable to talk about difficult and sometimes embarrassing topics.
2. Build trust amongst your learners so that they keep the confidences of their peers.
3. Ensure that discussions do not cross boundaries to issues that may be overly personal or feel unsafe to individual learners. No one should be pushed to disclose personal information about themselves, their sexuality, or their families. Decide how much complexity, related to CSE, your learners are ready to talk about to one another.
4. Respect diversity – these SLPs and the LO CAPS recognise that not all learners (or educators) will be heterosexual, or identify with their assigned gender identity. The needs of all learners must be respected throughout all lessons.
5. Initiate and end topics of conversation in a respectful, open but trusting manner.

6. Maintain professionalism even when challenged by learners who may not have relevant and appropriate information to make good decisions regarding their sexual and reproductive health.
7. Remind yourself to be non-judgmental, unbiased, caringly critical and open to the difficulties that your learners experience regarding sex, sexuality and the adoption of safe behaviour that will reduce their risk of acquiring HIV. Model empathy and compassion in the way that you communicate. Some of your learners and/or their family members may be HIV-positive, affected by sexual violence, or early pregnancy. Take care to ensure discussions are respectful of those already affected by the problems we are trying to prevent and address.
8. Most importantly, when a learner does share sensitive information or experiences with you, and it is clear that they are emotionally and psychologically distressed, take time to debrief the learner about how he/she is feeling. Make the learners comfortable about the confidentiality of the information shared. If necessary refer a learner for professional support.

## 2. CREATE A SAFE, CONDUCTIVE CLASSROOM ENVIRONMENT

Your role in fostering an open, safe and trusting-inspiring environment in which healthy discussions and relationships can thrive - in the classroom, on the playground and even at home- can't be stressed enough. In each of these settings, your learners will be dealing with issues that arise in CSE. The CSE material aims to help your learners to make informed choices and adopt healthy behaviours related to content presented in the SLPs.

### 2.1 FEELING CHALLENGED BY NEW SE CONTENT

The SLPs for each grade will be taught across the four terms. An indication of where the SLPs can be taught **throughout the year** within the ATP is given for each SLP. You may want to find your own appropriate links to the LO learning outcomes in the work schedule. Use the table referred to above to guide your planning.

To increase your confidence in teaching the new content found in the SLPs, be as thoroughly prepared for each activity in the SLP as possible.

The content in the SLPs is reliable, age-appropriate and linked to the content in the Life Orientation CAPS. If information that is not in the CAPS has been included in the SLPs, the content is well-researched, simply presented and explained clearly.

It may help to discuss your lessons beforehand with your colleagues and share with each other what activities and approaches are to be followed for the week.

You are not expected to deal with issues and concerns that your learners raise that should be referred to more professional practitioners like nurses, counsellors or your district-based support team (DBST). The activities suggest where professionals may be consulted to deal with content which you may not be equipped to handle.

### 2.2 SAFE LEARNING SPACES

Building good values and attitudes can be more challenging than teaching new or unfamiliar content or topics.

Teaching and learning aids used to convey relevant lesson content may include models of the human anatomy or explicit posters of harmful diseases. You may feel culturally, religiously or ethically challenged

when teaching some of the content using these teaching and learning aids. Your learners may have similar feelings. The most important consideration **must** be how important it is for your learners to know and understand the content, and how they are likely to be more disadvantaged from not being exposed to the specific content. Again, you are encouraged to share your concerns and seek advice from your colleagues, local clinic or professional resources to get the support you need to teach the material effectively.

Values and attitudes are intangible qualities which can be observed and measured. You may consider allowing your learners to express what they would like to see happening in the classroom. Don't feel threatened by strong opinions or views from your learners. If activities are set up to do this, let your learners work together to find their comfort zones. There are no right or wrong responses. What is most important is to pitch the content at a level at which learners can internalise it so that they are able to show a change in behaviour. Activities and messages are given to create a positive experience in the classroom.

### **The classroom often extends into the home**

To ensure that positive learning is reinforced at home, it is important that parents or care-givers understand what is being taught and why. You will know when parents or care-givers should be included in what is being shared with your learners in the classroom. Parents or care-givers can be kept abreast of what is being taught. The school management team (SMT) and School Governing Body (SGB) have a crucial role in communicating with the parent body about why the content is included in the school curriculum. Make parents and care-givers feel comfortable and trusting of what you are teaching in the classroom.

## **2.3 MANAGING DISCUSSION IN THE CLASSROOM**

Classroom discussions are contextualised in the activities; they are controlled, stimulated and encouraged through activities. There is no reason for you to feel unsupported or at a loss about what needs to be taught. All relevant and appropriate content is provided. For some activities, learners will be expected to do their own research. Some learner activities encourage learners to do their own research or find out more about certain content. You need to provide a sense of safety in the classroom, so that discussions are valuable, healthy and beneficial to all learners.

### **Use group activities, practical approaches and self-reflection to facilitate discussion**

Some activities ask learners to keep a journal of their experiences, decisions, challenges, fears and strengths in relation to what is being learned. This will assist you in monitoring learners' responses.

In large classes it is not possible for every group to give feedback back on every activity. The time allocated will only allow for only some groups to give feedback on their group discussions. Manage group report backs in a way that all learners hear all the feedback and can make notes on what they have not discussed in their group.

Also, find a way to rotate group feedback over all activities so that by the end of the SLPs all learners have had a chance to feedback on their discussions.

## **2.4 MONITORING PEER DISCUSSIONS AND ENGAGEMENTS**

In the SLPs, you are supported to **facilitate and guide discussions** and to understand how learners relate to and with each other. You are encouraged to be unobtrusive and unimposing while peer discussions are happening. In these discussions, peers are building relationships and trust with each other. Allow this to

happen in an unthreatening manner.

The activities require that learners complete tasks that reflect what and how discussions have taken place. You can intervene in or support these tasks based on what is picked up from learners' responses to tasks. Where necessary, make referrals to relevant professional services.

## **2.5 BUILDING THE CONFIDENCE OF LEARNERS**

Learners in this age group typically go through various stages of development at different times, which means that in any class levels of maturity and associated behaviour are diverse. Here are some useful characteristics to consider for this developmental stage.<sup>12</sup>

---

12 The numerous research articles used to compile these lists of characteristics are provided in the Bibliography.

## INTELLECTUAL

- Abstract thinking becomes more common with older teenagers. They are able to identify right from wrong and good from bad but will often move in the grey areas between the two extremes.
- They are more open to dealing with content on issues they have an interest in. They will engage with learning opportunities that expand their logic and reasoning abilities, although they may still struggle to match their thinking abilities with their actions. This manifests in them being able to talk intelligently on some issues but having trouble with planning or executing decisions or instructions.
- Their thinking is more future-orientated. They are likely to have visions of what would make the world a better place, especially their immediate environment.
- Learners in this stage of development are better able to understand different points of views and are open to other perspectives and ideas.
- Many older teenagers will use their new intellectual capacity to challenge parents' thinking and their rules. This is to do with them separating from their parents and becoming independent.

## EMOTIONAL

- They experience a range of - often exaggerated - emotions.
- Teenagers don't typically like physical affection from their parents. Many do, however, like a lot of physical affection from their friends.
- They tend to seek privacy and time alone. Concerns about physical and sexual attractiveness surface in this developmental stage.
- They begin to integrate both physical and emotional intimacy in relationships.
- They may start dabbling in serious risk behaviour, such as self-harm, drinking alcohol, trying drugs, and having unprotected sex.
- They see what their peers are going through and may be influenced to imitate them. Some are struggling with difficult issues.
- They may feel a lot of sadness or depression, which can lead to poor grades at school, alcohol or drug use, unsafe sex, and other problems.
- They show more independence from parents but still need parental guidance and support.
- Self-esteem is affected by success in school, sports, and friendships. Teens tend to compare themselves with others, and they might form false ideas about their body image. The influence of TV, magazines, and the Internet can add to a teen's poor body image.

## PHYSICAL

Physical development can be very different across ages in this phase. Physical maturity happens at different rates. Older teenagers typically look physically older than they are and can be mistaken for people much older than their actual ages. For this reason some teenagers find themselves in troubling situations, especially when forming relationships.

Biologically, teenagers experience difficulties with managing their "awake" time and have trouble waking up in the morning, mostly because they stay up later. This often hinders their development.

Physical development between boys and girls is different. Most girls will be physically mature by now, and most will have completed puberty. Boys might still be maturing physically during this time. Girls in particular have strong perceptions about their body size, shape, or weight which, if not monitored, can manifest as eating disorders.

### **SOCIAL**

- At this age, there is less emphasis on groups of friends or cliques, and friendships and romance become more important.
- Older teenagers are less influenced by peer pressure and they seek advice from older, more experienced persons. They are more likely to seek advice from experts than from their parents when they want to know or do something.
- There is a strong influence from friends regarding clothing, styles, music, and fads in this phase of development.
- Many teenagers pair off into couples. They have a deeper capacity for caring and sharing and for developing more intimate relationships. Dating becomes more pervasive, and for some there is greater comfort with developing intense romantic relationships.
- This means that they spend less time with parents and more time with friends.

### **MORAL**

- At this age they are more able to think about and understand abstract ideas such as morality.
- During this time, the individual is developing his or her unique personality and opinions. Relationships with friends are still important, yet other interests emerge as they develop a clearer sense of who they are. There are higher levels of independence and more readiness to assume responsibility. There may be heightened confidence in making a success in the world of work and many are already thinking about or preparing to leave home soon after high school. It is also a time of extreme frustration for young people who are not or cannot be economically and financially independent.

## 2.6 FACTORS THAT IMPACT ON LEARNER PARTICIPATION

Use the following mind map to think about and be guided by factors that impact on learner participation.



This graphic will help you make links between the factors you find in your classroom and/or school and what possible measures you can put in place to address those factors.

For example:

- If educators' attitudes aren't open-minded, learners might struggle to participate fully because they feel judged.
- A teacher who is well-prepared and who provides good feedback to learners during class discussions will increase the confidence of learners to discuss difficult SE content.
- Learners come from different cultural and religious backgrounds, and will interpret the discussion on SE issues against those backgrounds. The teacher's role is to facilitate the different opinions that emerge during discussion with learners. This builds confidence, facilitates participation from learners, and builds mutual tolerance and respect between learners from different backgrounds or contexts.

### 3. MANAGING DIVERSITY

The SLPs take an inclusive approach to strengthening teaching, learning and assessment for Sexuality Education. This is done by modelling good teaching approaches for new content and providing model assessment tasks. The SLPs also support educators to motivate for behaviour change and good decision-making about sex, sexuality, HIV and other STIs, and reproductive health.

There are a number of considerations that should be taken into account when accommodating and responding to barriers to teaching and learning encountered by educators in the classroom:

#### 3.1 INCLUSIVE CLASSROOMS

Your classroom must be accepting of all learners. As an educator, ask yourself the following questions:

- a. Will learning and engaging with each other in activities build social skills, encourage respect and tolerance of different views, and foster empathy?
- b. Does the learning context promoting interaction equally for all learners?
- c. Is learning promoting effective communication, including assertiveness and informed decision-making?
- d. What can be done to ensure empathy for those who are affected by the issues covered by the SLPs?
- e. Do activities foster collaboration and learning together?
- f. Are the backgrounds, cultural views and experiences of all learners valued?
- g. Are opportunities provided for learners with barriers (emotional, intellectual, social, physical, etc.) to participate fully?
- h. Do all learners participate equally in group activities?
- i. Is the report back on group discussions shared by all learners?

#### 3.2 DIFFERENT AGES AND EXPERIENCES

The SLPs have been designed to gradually introduce the content at a level that is appropriate for each grade, taking into consideration the diverse individual experiences between learners.

- a. All teaching and learning needs to be age-appropriate, and given at the level that learners are ready to receive it. You will be able to use the SLPs within and across the three grades to assist with correct pitching of the content.
- b. Your learners' experiences and knowledge about CSE will influence your teaching and discussions.
- c. Home influences impact on experiences and perceptions of learners about sexuality. The SLPs can



be used to create a safe context for learners to deal with challenging sexuality education concepts. In older learners, peer influences play an important role in decision-making.

- d. There is room for diverging points of view; as an educator, you need to ensure that the environment remains respectful and safe for open discussion.
- e. Parents/care-givers need to feel confident that you are able to teach these difficult concepts and are dealing with the divergent feelings of learners.
- f. The practical approach to teaching taken in the SLPs will help you bring learners of different ages and experience into a common learning space. The practical approach aims to address the needs who are at varying stages of maturity and readiness.

### 3.3 LANGUAGE

- a. The activities in the SLPs have been written in a style that is appropriate to the level of understanding of your learner. Information is presented in a variety of different forms. Some learners may find it easier to interpret texts that are given in visual formats, such as comic strips, graphic representations, etc. Learners may also present their thoughts visually, by, for example, using pictures, drawings, etc.
- b. Keep in mind that for many learners, English language competence may affect their readiness or ability to express their thoughts, feelings or decisions and influence their confidence to engage difficult topics.
- c. It is not possible to cater for the language levels of individual learners. The language competency levels of your learners are too diverse to allow for this. You will need to facilitate these activities as you would do all other subject lessons, so that your learners participate fully.
- d. Many of the SLPs have included suggestions for linkages to other subjects.
- e. What your learners write and the journals they are encouraged to keep may be used as part of the language written work.

## 4. PARENTAL INVOLVEMENT AND CONSENT

- a. In the context of learning about the effects of HIV and AIDS and other STIs, it is necessary to consider that many homes may have no parents and that child-headed- homes are a reality in many of our communities. The household situation of each learner is an important consideration when planning to teach CSE.
- b. Some activities require that learners engage with their siblings and/or parents and/or caregivers at home or in their communities. Many family members may have their own views or prejudices about their children dealing with some of the content in the SLPs. For this reason, the SLPs have been linked, very clearly, to the content of the LO CAPS. A separate outreach to parents and community members has been planned as part of the roll-out of the CSE SLPs.
- c. The school management team (SMT) plays a crucial role in sharing what the SLPs are about and what their purpose within the LO CAPS is with parents and other stakeholders in the school. Use the eight core messages to share what learners will be taught about Sexuality Education when doing the SLPs.
- d. All educators and learners should treat discussions as confidential. If any points of discussion are shared beyond the classroom, this should be with permission, and without disclosing who said what. The exception to this is when a learner may be in danger and in the best interest of the child action needs to be taken.

### **NOTE TO EDUCATOR**

- Below is a breakdown of the CAPS topics with the associated content from the SLPs, and how each topic and its content can be taught across the year in an integrated manner.
- Each SLP has been developed to be covered in ONE HOUR, with the exception of two lessons in Grade 10 that are allocated 90 minutes, for extended learner application. Schools have different timetable allocations for LO, e.g. 30 minutes, 45 minutes or 60 minutes. The indication of time given here for the SLPs will allow you to fit the SLPs into the total amount of time allocated for LO in the CAPS.
- Remember the SLPs are to be taught across all four terms, as part of the CAPS content dealing with the specific content included in the SLPs.

## Appendix 1: SLPS at a glance

## GRADE 10

CAPS topic	CAPS sub-topic	SLP lesson	Content	Time allocated	Work schedule term
Development of the self	<ul style="list-style-type: none"> <li>Strategies to <b>enhance self-awareness, self-esteem and self-development: factors influencing self-awareness and self-esteem including media</b> <ul style="list-style-type: none"> <li>Strategies to build confidence in self and others: communication, successful completion of tasks or projects, participation in community organisation or life, making good decisions and affirmation of others</li> <li>Acknowledge and respect the uniqueness of self and others and respect differences (race, gender and ability)</li> <li><b>Value of participation in exercise programmes</b> that promote fitness: cardiovascular fitness, muscular strength, endurance and flexibility</li> </ul> </li> <li>Relationship between physical and mental health</li> </ul>	<b>10.1 Developing my self-confidence</b>	<ul style="list-style-type: none"> <li>Revisit SMART goals</li> <li>Identify important elements that contribute to self-confidence</li> <li>Recognise the impact different forms of media can have on self-confidence, self-awareness, and self-esteem</li> <li>Identify ways the media can positively or negatively influence teenagers' self-confidence</li> <li>Describe what it means for us to respect differences and the uniqueness of each person, including race, sex, sexual orientation, gender and abilities</li> <li>Create constructive self-esteem messages for teenagers</li> <li>Create strategies that strengthen your own and others' self-confidence</li> <li>Identify the positive effects on our overall well-being when we do physical activities regularly</li> <li>Reflect on your own level of self-confidence and how to strengthen it</li> </ul>	1.5 hr	Term 1 Week 1-3

CAPS topic	CAPS sub-topic	SLP lesson	Content	Time allocated	Work schedule term
<b>Development of the self</b>	<ul style="list-style-type: none"> <li>Definition of concepts: power, power relations, masculinity, femininity and gender               <ul style="list-style-type: none"> <li>Differences between a man and a woman: reproduction and roles in the community, <b>stereotypical views of gender roles and responsibilities</b>, gender differences when participating in physical activities</li> </ul> </li> </ul>	<b>10.2 Understanding power. Getting to share it.</b>	<ul style="list-style-type: none"> <li>Understand and apply to concrete examples these concepts: power, power relations, masculinity, femininity and gender, with particular emphasis on looking at: Differences between a man and a woman:               <ul style="list-style-type: none"> <li>Reproduction and roles in the community</li> <li>Stereotypical views of gender roles and responsibilities</li> <li>Gender differences in participation in physical activities</li> </ul> </li> </ul>	1 hr	Term 1 Week 1-3
<b>Development of the self in society</b>	<ul style="list-style-type: none"> <li>Definition of concepts: <b>power, power relations</b>, masculinity, femininity and gender               <ul style="list-style-type: none"> <li><b>Influence of gender inequality on relationships</b> and general well-being: sexual abuse, teenage pregnancy, violence, STIs including HIV and AIDS</li> </ul> </li> </ul>	<b>10.3 Gender, equality and healthier relationships</b>	<ul style="list-style-type: none"> <li>Recognise how gender inequality can lead to more people being sexually abusive and violent, more unintended teenage pregnancy, and to acquiring HIV and other sexually transmitted infections (STIs).</li> <li>Recognise how gender equality in relationships leads to more happiness and peace</li> <li>Identify the positive effects on our overall well-being when we do physical activities regularly</li> </ul>	1 hr	Term 1 Week 1-3

CAPS topic	CAPS sub-topic	SLP lesson	Content	Time allocated	Work schedule term
<b>Social and environmental responsibility</b>	<ul style="list-style-type: none"> <li>Contemporary social issues that impact negatively on local and global communities:</li> <li>Concepts: <b>social justice</b> and environmental justice               <ul style="list-style-type: none"> <li>- <b>Social issues: poverty, food security, violence, HIV and AIDS</b>, safety, unequal access to basic resources, lack of basic services (health services)</li> <li>- Harmful effects of these issues on personal and community health</li> </ul> </li> </ul>	<b>10.4 Social and environmental justice: we can make a difference</b>	<ul style="list-style-type: none"> <li>Identify HIV and AIDS as a contemporary social justice issue that has local and global impacts</li> <li>Identify ways in which HIV and AIDS impacts negatively on well-being – and identify what needs to be done to turn this around</li> <li>Recognise that those of us living with HIV and AIDS can live fulfilling lives if there is no stigma and we have proper treatment, care and support</li> <li>Identify how the following factors affect those of us living with HIV and AIDS:               <ul style="list-style-type: none"> <li>poverty</li> <li>food security</li> <li>violence</li> <li>safety</li> <li>unequal access to basic resources</li> <li>lack of health services</li> </ul> </li> </ul>	1 hr	Term 2 Week 4 - 7

CAPS topic	CAPS sub-topic	SLP lesson	Content	Time allocated	Work schedule term
Development of the self in society	<ul style="list-style-type: none"> <li><b>Life roles:</b> child, student, adult, role in family, partner, mother, father, grandparent, breadwinner, employee, employer, leader and follower               <ul style="list-style-type: none"> <li>Evolving nature of and responsibilities inherent in each role; how roles change and affect relationships</li> <li>Handling each role effectively: influence of society and culture</li> <li>Changes associated with development towards adulthood: adolescence to adulthood</li> </ul> </li> </ul>	<b>10.5 My changing life roles and life goals</b>	<ul style="list-style-type: none"> <li>Identify our different roles in life since birth and into the future, and reflect on each role's responsibilities</li> <li>Reflect on how our changing roles affect our relationships – with ourselves and with others</li> <li>Strategies to manage the influence of society and culture, with a particular emphasis on romantic/intimate relationships</li> </ul>	1 hr	Term 3 Week 1–5
Development of self in society	<ul style="list-style-type: none"> <li><b>Physical changes: hormonal, increased growth rates, bodily proportions, secondary sex/gender characteristics, primary changes in the body (menstruation, ovulation and seed formation), and skin problems</b> <ul style="list-style-type: none"> <li><b>Emotional changes:</b> maturing personality, depth and control of emotions, feelings of insecurity, changing needs, interests, feelings, beliefs, values and <b>sexual interest</b></li> <li>Social changes: relationship with family, interaction with social groups, need for acceptance by and dependence on peer group, moving into the workforce and increased responsibilities</li> </ul> </li> </ul>	<b>10.6 Understanding sexual interest</b>	<ul style="list-style-type: none"> <li>Review physical, emotional and social changes typically present in transition from adolescence to adulthood</li> <li>Describe how the female and male reproductive systems work</li> <li>Explore physical, emotional and social changes learners experience at their age</li> <li>Differentiate between misconceptions and facts related to sexual interest and safer sex</li> </ul>	1 hr	Term 3 Week 1–5

CAPS topic	CAPS sub-topic	SLP lesson	Content	Time allocated	Work schedule term
<b>Development of self in society</b>	<ul style="list-style-type: none"> <li>Values and strategies to make responsible decisions regarding sexuality and lifestyle choices to optimise personal potential               <ul style="list-style-type: none"> <li><b>Behaviour that could lead to sexual intercourse and teenage pregnancy, sexual abuse and rape</b></li> <li><b>Skills such as self-awareness, critical thinking, decision-making, problem solving, assertiveness, negotiations, communication, refusal, goal setting and information gathering relating to sexuality and lifestyle choices</b></li> </ul> </li> </ul> <p><b>Where to find help regarding sexuality and lifestyle choices</b></p>	<b>10.7 Our choices, our decisions</b>	<ul style="list-style-type: none"> <li>Develop skills and strategies to help you think ahead about, plan around, avoid, and be able to do your best to respond to risky situations, including in romantic and sexual relationships</li> <li>Make responsible and protective decisions regarding sexuality and lifestyle choices so you can try the best you can to fulfill your personal potential</li> <li>Identify where you can find help about your sexuality, lifestyle choices, and sexual and reproductive health needs</li> </ul>	1 hr	Term 3 Week 1-5

CAPS topic	CAPS sub-topic	SLP lesson	Content	Time allocated	Work schedule term
Development of self in society	<ul style="list-style-type: none"> <li>Values and strategies to make responsible decisions regarding sexuality and lifestyle choices to optimise personal potential               <ul style="list-style-type: none"> <li>Behaviour that could lead to sexual intercourse and teenage pregnancy, sexual abuse and rape</li> <li>Values such as respect for self and others, abstinence, self-control, right to privacy, right to protect oneself, right to say 'No' and taking responsibility for own actions</li> <li>Skills such as self-awareness, critical thinking, decision-making, <b>problem-solving, assertiveness, negotiations, communication</b>, refusal, goal-setting and information gathering relating to sexuality and lifestyle choices</li> <li>Where to find help regarding sexuality and lifestyle choices</li> </ul> </li> </ul>	<b>10.8 / know what I want</b>	<ul style="list-style-type: none"> <li>Define assertive communication</li> <li>Identify the steps of assertive communication</li> <li>Apply assertive communication steps to situations related to sexual and reproductive health</li> <li>Differentiate between assertive, passive and aggressive communication</li> </ul>	1.5 hr	Term 3 Week 1-5



CAPS topic	CAPS sub-topic	SLP lesson	Content	Time allocated	Work schedule term
Development of self in society	<ul style="list-style-type: none"> <li>Values and strategies to make responsible decisions regarding sexuality and lifestyle choices to optimise personal potential               <ul style="list-style-type: none"> <li>Behaviour that could lead to sexual intercourse and teenage pregnancy, sexual abuse and rape</li> <li><b>Values such as respect for self and others, abstinence, self-control, right to privacy, right to protect oneself, right to say 'No' and taking responsibility for own actions</b> <ul style="list-style-type: none"> <li>Where to find help regarding sexuality and lifestyle choices</li> </ul> </li> </ul> </li> </ul>	<b>10.9 Consent, rape and taking action.</b>	<ul style="list-style-type: none"> <li>Define consent</li> <li>Recognise the importance of assertive communication in discussions related to consent</li> <li>Define rape</li> <li>Identify the issues related to rape and steps that can be taken to prevent it</li> <li>Identify the steps one should take after being raped to get the proper care, support and protection</li> </ul>	1 hr	Term 3 Week 1-5

## GRADE 11

CAPS topic	CAPS sub-topic	SLP lesson	Content	Time allocated	Work schedule term
Development of the self	<ul style="list-style-type: none"> <li>Plan and achieve life goals: apply various life skills as evidence of ability               <ul style="list-style-type: none"> <li>Types of goals: short term, medium and long term; steps in planning and goal-setting; problem-solving skills, perseverance and persistence</li> </ul> </li> <li>Important life goals and prioritising: family, marriage, parenting, career choices and relationships               <ul style="list-style-type: none"> <li>Relationship between personal values, choices and goal-setting</li> </ul> </li> </ul>	<b>11.1 My priorities and life goals</b>	<ul style="list-style-type: none"> <li>Identify interests and values that are important to oneself regarding academic, professional development and personal/sexual and reproductive health (SRH), and life choices</li> <li>Develop short, medium and long term goals based on priorities</li> <li>Identify how to allocate time and balance interests in order to achieve personal and professional/academic goals</li> <li>Write an action plan to be able to achieve goals, including steps, timeline, resources needed and challenges to overcome</li> <li>Identify how relationships, pregnancy and marriage impact short-, medium- and long-term goals, and how to strategise and plan accordingly</li> </ul>	1 hr	Term 1 Weeks 1-3
Development of the self	<ul style="list-style-type: none"> <li>Relationships and their influence on our well-being: different types of relationships with different people/groups, and their changing nature               <ul style="list-style-type: none"> <li>Relationships that contribute to or are detrimental to our well-being:                   <ul style="list-style-type: none"> <li>rights and responsibilities in relationships</li> <li>social and cultural views that influence and/or affect relationships</li> <li>qualities sought in different relationships, and</li> <li>individuality in relationships</li> </ul> </li> </ul> </li> <li>Impact of the media on values and beliefs about relationships</li> </ul>	<b>11.2 Healthy relationships: choosing the right influences</b>	<ul style="list-style-type: none"> <li>Identify a range of categories of important relationships and unpack what makes them healthy relationships</li> <li>Discuss what constitutes healthy relationships</li> <li>Read about relationships and the HIV epidemic in South Africa</li> <li>Think critically about relationships that are particularly risky</li> <li>Analyse risky relationships in groups</li> </ul>	1 hr	Term 1 Week 1-3

CAPS topic	CAPS sub-topic	SLP lesson	Content	Time allocated	Work schedule term
Development of the self	<ul style="list-style-type: none"> <li>Relationships and their influence on our well-being: different types of relationships with different people/ groups, and the changing nature of relationships               <ul style="list-style-type: none"> <li>Relationships that contribute to or are detrimental to : rights and responsibilities in relationships, social and cultural attitudes and norms that influence and/or affect relationships, qualities sought in different relationships, and individuality in relationships</li> </ul> </li> <li>Impact of the media on values and beliefs about relationships</li> </ul>	<b>11.3 Healthy and Unhealthy Relationships and the media</b>	<ul style="list-style-type: none"> <li>Explore the impact of the media on values and beliefs about relationships</li> <li>Reflect on how media influences our values and beliefs about relationships</li> <li>Discuss both the constructive and harmful ways the media and use of social media can impact on our relationships</li> <li>Examine risks associated with meeting an intimate partner over social media</li> <li>Reflect on the risks of becoming involved with transactional relationships</li> </ul>	1 hr	Term 1 Week 1-3
Development of the self	<ul style="list-style-type: none"> <li>Healthy and balanced lifestyle choices:               <ul style="list-style-type: none"> <li>Characteristics of a healthy and balanced lifestyle: physical, psychological, social, emotional and spiritual facets</li> <li>Factors that impact negatively on lifestyle choices</li> </ul> </li> </ul>	<b>11.4 Living a balanced lifestyle, staying in control</b>	<ul style="list-style-type: none"> <li>Apply a basic tool to current lifestyle choices: understanding the different facets that go into a healthy and balanced lifestyle</li> <li>Understand that pressure from peers and romantic partners can positively or negatively affect healthy lifestyle choices</li> <li>Understand the human sexual response cycle</li> <li>Analyse situations regarding decision-making around sexual and reproductive health</li> </ul>	1 hr	Term 3 Weeks 1-5

CAPS topic	CAPS sub-topic	SLP lesson	Content	Time allocated	Work schedule term
Development of the self	<ul style="list-style-type: none"> <li>Healthy and balanced life style choices:               <ul style="list-style-type: none"> <li>lack of knowledge and skills; unsafe attitudes and behaviour; unsafe environments and emotional factors</li> </ul> </li> <li>Risky behaviour and situations: personal safety, road use, substance use and abuse, <b>sexual behaviour, risk of pregnancy, teenage suicides, hygiene and dietary behaviour, sexually-transmitted infections (STIs), HIV and AIDS and peer pressure</b></li> </ul>	<b>11.5 Understanding the consequences of risky behaviour</b>	<ul style="list-style-type: none"> <li>Understand risk in the context of sexual well-being</li> <li>Understand what constitutes risky behaviour and how this will affect healthy and balanced lifestyle choices</li> <li>Understand that you are responsible for your choices and actions; victims must not be blamed</li> <li>Identify level of risk within sexual and reproductive health context</li> <li>Identify risk avoidance strategies</li> </ul>	1 hr	Term 3 Week 1-5
Development of the self	<ul style="list-style-type: none"> <li><b>Positive role models; parents and peers; personal values; belief system; religion; media, social and cultural influences; economic conditions:</b> <ul style="list-style-type: none"> <li>Impact of unsafe practices on self and others: physical, emotional, spiritual, social, economic, political and environmental</li> <li>Individual responsibility for making informed decisions and choices: coping with and overcoming barriers regarding behaviour and seeking support, advice and assistance</li> </ul> </li> </ul>	<b>11.6 Positive role models</b>	<p><b>Healthy and balanced lifestyle choices:</b></p> <ul style="list-style-type: none"> <li>Characteristics of a healthy and balanced lifestyle: physical, psychological, social, emotional and spiritual facets</li> </ul> <p><b>Risky behaviour and situations:</b></p> <ul style="list-style-type: none"> <li>personal safety, road use, substance use and abuse, <b>sexual behaviour, risk of pregnancy,</b></li> <li>teenage suicides, hygiene and dietary behaviour, sexually-transmitted infections (STIs), <b>HIV and AIDS, and peer pressure</b></li> </ul>	1 hr	Term 3 Week 1-5

CAPS topic	CAPS sub-topic	SLP lesson	Content	Time allocated	Work schedule term
Development of the self	<ul style="list-style-type: none"> <li>Gender roles and their effects on health and well-being: self, family and society               <ul style="list-style-type: none"> <li>Unequal power relations, power inequality, power balance and power struggle between genders: abuse of power towards an individual (physical abuse), in family (incest), cultural (different mourning periods for males and females), social (domestic violence and sexual violence/rape) and work settings (sexual harassment)                   <ul style="list-style-type: none"> <li>Negative effects on health and well-being</li> <li>Addressing unequal power relations and power inequality between genders</li> </ul> </li> </ul> </li> </ul>	<b>11.7 Gender, power and violence</b>	<ul style="list-style-type: none"> <li>Review ideas related to power and gender relations</li> <li>Identify different types of violence, abuse and gender-based harm</li> <li>Analyse situations of inequality, abuse of power, gender-based harm and violence</li> <li>Recognise situations of abuse, and identify actions to take and where to get help</li> <li>Understand we need to take responsibility for our actions</li> <li>Be part of a community that stops gender harm and violence and creates safety and peace in its place</li> </ul>	1 hr	Term 4 Week 1-3

CAPS topic	CAPS sub-topic	SLP lesson	Content	Time allocated	Work schedule term
Development of the self	<ul style="list-style-type: none"> <li>Gender roles and their effects on health and well-being: self, family and society               <ul style="list-style-type: none"> <li>Unequal power relations, power inequality, power balance and power struggles between genders: abuse of power towards an individual (physical abuse), in family (incest), cultural (different mourning periods for males and females), social (domestic violence and sexual violence/rape) and work settings (sexual harassment)</li> <li>Negative effects on health and well-being</li> <li>Addressing unequal power relations and power inequality between genders</li> </ul> </li> </ul>	<b>11.8 Rape – Prevention, Support and Change</b>	<ul style="list-style-type: none"> <li>Understand what rape and sexual assault are</li> <li>Recognise rape as an act of violence and abuse of power</li> <li>Clarify misconceptions about rape, with attention to gender</li> <li>Describe the help that survivors of sexual assault need and how to find it</li> <li>Reject victim blaming under any circumstances</li> <li>Demonstrate compassion and understanding for those who have been affected by sexual violence</li> </ul>	1 hr	Term 4 Week 1-3
Development of the self	<ul style="list-style-type: none"> <li>Gender roles and their effects on health and well-being: self, family and society               <ul style="list-style-type: none"> <li>Unequal power relations, power inequality, power balance and power struggle between genders: abuse of power towards an individual (physical abuse), in family (incest), cultural (different mourning periods for males and females), social (domestic violence and sexual violence/rape) and work settings (sexual harassment)</li> <li>Negative effects on health and well-being</li> <li>Addressing unequal power relationships and power inequality between genders</li> </ul> </li> </ul>	<b>11.9 Taking action against abuse</b>	<ul style="list-style-type: none"> <li>Deepen knowledge about gender-based harm and violence and activities to prevent it</li> <li>Identification of personal actions that we can all take in our personal lives and in our communities to end violence</li> <li>Develop group plans for action that contributes to the 16 Days of Activism for No Violence Against Women and Children campaign</li> </ul>	1 hr	Term 4 Week 1-3

## GRADE 12

CAPS topic	CAPS sub-topic	SLP lesson	Content	Time allocated	Work schedule term
<b>Democracy and Human Rights</b>	<ul style="list-style-type: none"> <li>Responsible citizenship:               <ul style="list-style-type: none"> <li>Evaluating own position when dealing with discrimination and human rights violations, taking into account the Bill of Rights; participation in discussions, projects, campaigns and events which address discrimination and human rights violations</li> <li>Evaluation regarding outcomes of campaigns and events</li> </ul> </li> </ul>	<b>12.1 Our Needs and Our Rights, Taking Action</b>	<ul style="list-style-type: none"> <li>Understand responsible citizenship, and active citizenship in the context of the Bill of Rights</li> <li>Explore your values in relation to discrimination and human rights violations</li> <li>Analyse and evaluate what made the South African campaign to ensure the human right of pregnant women living with HIV to receive antiretroviral treatment to prevent mother-to-child transmission (PMTCT) successful</li> <li>Create ideas for a school-based sexual and reproductive health rights campaign topic linked to the Bill of Rights</li> </ul>	1 hr and 1 hr	Term 1 & 2 Week 1-4

CAPS topic	CAPS sub-topic	SLP lesson	Content	Time allocated	Work schedule term
Development of the self	<ul style="list-style-type: none"> <li>Human factors that cause ill-health, accidents, crises and disasters: psychological, social, religious, cultural practices and different knowledge perspectives:               <ul style="list-style-type: none"> <li>Lifestyle diseases as a result of poverty and gender imbalances: cancer, hypertension, diseases of the heart and circulatory system, tuberculosis, sexually transmitted infections including HIV and AIDS</li> <li>Contributing factors: eating habits, lack of exercise, smoking, substance abuse and unsafe sexual behaviour</li> <li>Intervention strategies: prevention and control, early detection, treatment, care and support</li> </ul> </li> </ul>	<b>12.2 Human factors affecting our health – and what we can do about them</b>	<ul style="list-style-type: none"> <li>Understand and analyse how human factors can cause ill-health, crises and disasters</li> <li>Identify risk and protective factors.</li> <li>Create intervention strategies as part of protecting our well-being – happiness being part of this</li> </ul>	1 hr	Term 3 Week 1-3
Development of the self	<ul style="list-style-type: none"> <li><b>Human factors that cause ill-health, accidents, crises and disasters: psychological, social, religious, cultural practices and different knowledge perspectives</b> <ul style="list-style-type: none"> <li><b>Sexually transmitted infections including HIV and AIDS</b></li> </ul> </li> <li>Contributing factors: eating habits, lack of exercise, smoking, substance abuse <b>and unsafe sexual behaviour</b></li> <li><b>Intervention strategies: prevention and control, early detection, treatment, care and support</b></li> </ul>	<b>12.3 STIs: protecting ourselves, protecting our future</b>	<ul style="list-style-type: none"> <li>Recall and expand knowledge of sexually transmitted infections (STIs) and how to prevent sexually transmitted infections</li> <li>Identify barriers that make it harder to adopt safe sexual health practices</li> <li>Identify enablers that make it easier to adopt safe sexual health practices</li> <li>Identify strategies and actions for prevention and control, early detection, treatment, care and support for STIs as part of sexual and reproductive health</li> </ul>	1 hr	Term 3 Week 1-3



CAPS topic	CAPS sub-topic	SLP lesson	Content	Time allocated	Work schedule term
Development of the self	<ul style="list-style-type: none"> <li>Human factors that cause ill-health, accidents, crises and disasters: psychological, social, religious, cultural practices and different knowledge perspectives               <ul style="list-style-type: none"> <li>Intervention strategies: prevention and control, early detection, treatment, care and support</li> </ul> </li> </ul>	<b>12.4 Looking ahead: my personal protection plan</b>	<ul style="list-style-type: none"> <li>Review of personal goals and how romantic and how intimate relationships fit in with personal goals</li> <li>Conduct a self-assessment of confidence in being able to take protective measures for the range of topics covered in the SLPs</li> </ul> <p>Development of a personal plan based on needs identified in self-assessment and review of barriers and supportive conditions that influence one's ability to take protective measures</p>	1 hr	Term 3 Week 1-3

## APPENDIX 2: BRIEF LESSON SUMMARIES

### Grade 10 Brief summaries

Grade 10 lessons	Brief summary
<b>10.1 Developing my self-confidence</b>	The lesson will begin with a brief review of Grade 9 SMART goal-setting, sexual and reproductive health and well-being. During the lesson learners will develop a more in-depth understanding of self-confidence and what may weaken or strengthen their self-confidence. Learners will identify media messages around race, sex, sexual orientation, gender and abilities linked to romantic/sexual relationships, and how they can affect self-confidence, self-esteem and self-awareness. Learners will make up their own media messages to show that equality can result in healthy and satisfying romantic/sexual relationships. Finally, learners will identify strategies for building self-confidence, well-being and happiness in their transition from puberty to adolescence and young adulthood. The spotlight will turn to promoting healthy romantic relationships through good self-confidence.
<b>10.2 Understanding power. Getting to share it</b>	In this lesson, learners will explore how power inequality in romantic and sexual relationships can harm people's physical and emotional well-being. The activities are designed to encourage critical thinking around power: the abuse of power and the democratic use of power. They will explore why people in unequal relationships have a higher risk of getting or passing on, STIs, including HIV; and are exposed to an increased risk of unintended pregnancy, and violence and abuse – or being a victim of it. They will see that equality in relationships is important for happy relationships
<b>10.3 Gender, equality and healthier relationships</b>	Learners will explore ways to practice gender equality in relationships, starting with their families. They will move on to discuss romantic relationships. Next they will analyse how both equal and unequal gender power relations contribute to the risk of STIs, including HIV, unintended teenage pregnancy, and gender-based harm. They will work in groups to come up with some ideas that promote gender equality in romantic relationships, which they will present to the class. They will also go out and interview people at home and in their communities to get their views on gender relations.
<b>10.4 Social and environmental justice: we can make a difference</b>	<p>The lesson will present a young woman's true story for learners to analyse in the bigger picture of HIV as a social justice and environment justice issue. The story teller has a cousin and aunt who are living with HIV. The story will help us to understand many of the challenges those of us who are living with HIV face, including stigma and self-stigma.</p> <p>HIV and AIDS is a local and global issue. It is everyone's issue. It affects families, school, our economy, our leaders, our people, and our everyday lives. It is also a global issue, affecting millions of people around the world. The activities in this lesson will encourage learners to think about what they can do at a personal level to stop stigma, and support friends and loved ones living with HIV.</p> <p>It will also explain why it is important that we know our HIV status.</p> <p>Finally, learners will gain a critical thinking tool to apply to their sexual and reproductive health (SRH) in order to promote their own well-being and encourage good decision-making around their SRH.</p>

Grade 10 lessons	Brief summary
<b>10.5 My changing life roles and life goals</b>	<p>In this lesson, learners will identify the various roles they have played from birth until now. They will reflect on how their roles and responsibilities might change in the future, and how relationships change too. Learners will examine how with sexual relationships they are responsible for protection, and how to prevent pregnancy and sexually transmitted infections (STIs), including HIV. They will identify different pressures in their lives and come up with strategies for making choices that are conducive to their own well-being.</p>
<b>10.6 Understanding sexual interest</b>	<p>Learners will review the physical, emotional and social changes that take place in puberty, and the changes most experience in their transition through adolescence to young adulthood. They will have an opportunity to reflect on the changes they have experienced so far, and how these have made them feel, as well as the influence these changes have had on them. They will also get more information on reproductive health, including fertility awareness.</p> <p>Learners will focus on sexual feelings, and clarify some common myths and misconceptions about sexual interest. They will apply their learning by creating a comic to illustrate points related to misconceptions, and to provide correct information about sexual feelings and interest.</p>
<b>10.7 Our choices, our decisions</b>	<p>This lesson encourages positive decision-making strategies during the learner's natural time of experimentation and striving for independence. The learners will work with a story to help them think about their values and strategies, in order to make responsible decisions for their well-being.</p> <p>The lesson focuses on responsible and protective decision-making in regard to sexuality and lifestyle choices, so that learners can try their best to fulfil their personal potential. The story scenarios implicitly highlight and acknowledge how learners, as adolescents, have to cope with change. It focuses on the importance of making decisions regarding sex before it happens spontaneously, and the importance of effective communication about sex. The lesson stresses the importance of having friends who share common values, rather than friends who exert negative peer pressure.</p> <p>It is critical that you make it clear throughout the class discussions that everyone has the right to their own sexual orientation. Sexual orientation is not a decision or choice that one makes. One makes choices and decisions about sex.</p>
<b>10.8 I know what I want</b>	<p>Learners will begin the lesson by deepening their understanding of different styles of communication; for example passive, assertive and aggressive communication. They will examine the differences between these styles of communication. They will come to see the benefits of using assertive communication in different situations. Learners will be introduced to a tool on how to communicate assertively and will put it into practice by applying it to different sexual and reproductive health situations.</p>

Grade 10 lessons	Brief summary
<b>10.9 Consent, rape and taking action.</b>	Building on the previous lesson on assertive communication, learners will consider the definition of rape and explore aspects of consent from several perspectives (their own perspective, the perspective of the opposite sex, and what the law says about young people and consent). The lesson also looks at victim blaming and challenges the attitudes that enable this to occur. The lesson offers learners an opportunity to change their attitudes and behaviour and to appreciate that everyone can play a part in reducing the harmful impact of rape. Finally, the lesson offers practical information, such as what to do if someone is raped.

### Grade 11 Brief summaries

Grade 11 lessons	Brief summary
<b>11.1 My priorities and life goals</b>	During this lesson, learners will link their priorities and goals to the choices they make now and for the future, with particular attention to their values around sexual and reproductive health (SRH). Activities will help learners to consolidate and deepen their reflection on their goals and how to achieve them. They will do this both on their own and with peers, family and friends.
<b>11.2 Healthy relationships: choosing the right influences</b>	<p>In this lesson, learners will think critically about the ingredients of healthy relationships and relationships that are harmful to their well-being. Learners will examine relationships across five main categories of relationships, and discuss the rights and responsibilities that are part of healthy relationships.</p> <p>Learners will reflect on and identify relationships that are potentially harmful to their well-being. They will work with their peers to examine what makes these relationships unhealthy or risky. There is a particular focus on relationships with a big age difference between partners, and the power dynamics that occur when gifts and other benefits are expected (transactional relationships) in exchange for sex. These ideas are directly linked to South Africa's current HIV epidemic, and the factors that place young people, and particularly young women, at risk.</p> <p>For homework, learners will identify what they personally want for their relationships, and set limits for firm expectations from romantic relationships. These could be applied to different types of relationships but the focus in this lesson is on romantic/sexual relationships.</p>

Grade 11 lessons	Brief summary
<b>11.3 Healthy and unhealthy relationships and the media</b>	<p>In this lesson, learners will be encouraged to think critically about the way that the media influences their values and beliefs about relationships. The lesson begins with an activity that explores the influence of media in general on personal relationships, and continues in the next activity to consider the positive and negative effects of social media in learners' lives and relationships. In the final activity, learners will reflect on an example of a personal advertisement for a transactional relationship, found on social media. They will consider the possibility of negative consequences that could result in engaging in that type of relationship.</p> <p>Finally, learners will continue to reflect on what they want for their own relationships in a homework assignment that encourages them to evaluate the positive and the potentially negative side effects of social media on their relationships, and ways in which they can protect themselves and others while using social media.</p>
<b>11.4 Living a balanced lifestyle, staying in control</b>	<p>This lesson has two themes. First, learners will identify the characteristics of a healthy and balanced lifestyle. They are building on prior knowledge that being happy and healthy includes paying attention to all of the interlinked aspects of their unique selves: their physical, psychological, social, emotional and spiritual dimensions. As part of this, learners will also explore factors like negative peer pressure that could impact negatively on their lifestyle choices, and possibly affect their ability to achieve their goals and dreams.</p> <p>This lesson also provides learners with the opportunity to understand how their body responds to feelings and touch (human sexual response), to be better prepared for decisions about sexual activity, and to protect themselves. Learners will discuss the importance of <b>freezing the moment</b> before and during sexual activity so they can choose protective behavior.</p> <p>Stories, photographs and drawings are used to prompt and assist learners to work out their own unique choices and decisions.</p>
<b>11.5 Understanding the consequences of risky behaviour</b>	<p>This lesson will examine the definition of risk and the types of behaviour and situations that put one at risk. After analysing a dialogue about a risky situation and its consequences, learners will develop their own dialogues/role-plays on risky behaviour. The lesson will provide learners with the opportunity to reflect on their own behaviour that could be risky and identify ways to reduce this risk.</p>

Grade 11 lessons	Brief summary
<b>11.6 Positive role models</b>	This lesson deals with the importance of having positive role models in our lives and how they influence us. Learners will explore the qualities of a good role model, and the importance of having positive role models in life. They will learn from activists, many of whom are involved with HIV and AIDS activism, or have influenced our perception about gender roles. These activists have overcome their own barriers. Learners will also explore their personal potential to become role models, and identify their barriers and ways to overcome them. This includes identifying the kind of support, advice and assistance they need, and where they might get it. This lesson wraps up by discussing the important role mentors can play in our lives.
<b>11.7 Gender, power and violence</b>	This lesson will focus on the abuse of power that can result from unequal gender power relations and unequal power relations more generally. The class will first review an important thread of concepts related to gender, power, and violence that they have covered in grades 10 and 11, in order to build on the ideas presented in those lessons. They will then consider forms of gender based violence (GBV) and harm that they are aware of. Based on this reflection, learners will work in groups to respond to common scenarios, while simulating a community radio talk show. The exercise will highlight a range of abuses of power, with particular attention to sexual harassment and other forms of abuse, gender-based harm and violence.
<b>11.8 Rape – prevention, support and change</b>	The lesson will focus on what rape is, how to prevent rape, and what to do if you or someone close to you is raped. It will look at some of the causes of gender-based harm in our country and mechanisms to try and prevent it. The key message that learners should take away is that under all and any circumstances, rape is wrong. Do not rape.
<b>11.9 Taking action against abuse</b>	This lesson will focus on both personal action as well as collective action to end gender based violence (GBV). Applying the knowledge and awareness developed in the previous lessons and using their own creativity, learners will plan actions for the campaign of <i>16 Days of Activism for No Violence Against Women and Children</i> . In doing this, they will increase their knowledge, have an opportunity to examine their values, beliefs and attitudes around GBV, enhance their skills for creating effective messages, and plan for the execution of group action. In Lesson 11.8 homework and assessment tasks, learners began to identify ways of taking action against any form of GBV - with a particular focus on rape. The activity in this lesson builds on ideas generated by learners during and after Lesson 11.8, but focuses on planning for participation in an actual campaign.

## Grade 12 Brief summaries

Grade 12 lessons	Brief summary
<b>12.1 Our needs and our rights, taking action</b>	<p>In this lesson, learners will explore concepts related to sexual and reproductive health rights (SRHR). They will be exposed to a very successful South African human rights campaign. They will then develop their own campaign.</p> <p>The lesson takes place in three parts. <b>Part 1: Introduction to a Health Campaign</b> will take place in this lesson. <b>Part 2: Presentation Day</b> can take place at any time appropriate, when learners have developed their campaigns. <b>Part 3: Delivery of campaign activities</b> will be an extra-mural activity, unless special arrangements have been made.</p> <p>The time allocation is indicated as 1 hour + 1 hour (2 hours) across Terms 1 and 2 so that enough time is given to learners to evaluate a campaign, plan their own campaigns and then present their plans.</p> <p><b>Part 1: Introduction to a Health Campaign:</b> Learners will discuss concepts and examples of responsible citizenship, discrimination and related rights, under the South Africa Bill of Rights, starting with their own experiences. To motivate and inspire active and responsible citizenship, learners will evaluate an advocacy campaign that was taken all the way to the Constitutional Court, where all pregnant women living with HIV, won the right, under the Bill of Rights, to receive antiretroviral treatment to prevent mother-to-child transmission (PMTCT) of HIV.</p> <p>Learners will then begin to plan their own campaign, beginning with the identification of a problem or need related to sexual and reproductive health (SRH). They will apply a planning process to define their activities, audience, messages, and mode of delivery. Tools are provided in their Learner Books to support the planning process. Learners may need time outside of the classroom to plan and prepare their campaign strategies.</p> <p><b>Part 2: Presentation Day:</b> On a date set by the educator as part of the Annual Teaching Plan (ATP), a class session will be held, in order for each group to present their campaign designs and plans. During this session, learners will listen to each other's presentations on what they plan to do, and provide feedback to each other. Based on the feedback, they will revise their plans to implement their campaign, if needed.</p> <p><b>Part 3: Delivery of campaign activities:</b> This will not take place during class time. Learners are provided with an opportunity to organise their own presentation day, which could be a special school activity, where the learners' campaigns are presented to their peers in other classes, or even to the whole school learner body. Groups will have an opportunity to evaluate their team work and the effectiveness of their campaign activities using the self-assessment tool provided in their Learner Books. As a motivation to work on their presentations, the best campaign could become the school's activity towards <i>Worlds Aids Day</i> celebrated on 1<sup>st</sup> December as part of the schools' calendar.</p>

Grade 12 lessons	Brief summary
<b>12.2 Human factors affecting our health – and what we can do about them</b>	<p>This lesson will explore a range of human factors that influence our health in both positive and harmful ways. Learners will have the opportunity to think critically about the roles that gender inequality/equality, poverty, as well as social, cultural and religious factors, play either as risk or protective factors for their well-being.</p> <p>Learners will identify lifestyle issues and habits that can affect their well-being both positively and negatively. They will analyse scenarios related to SRH, and all aspects of well-being. This will include identification of positive intervention strategies (protective actions).</p>
<b>12.3 STIs: protecting ourselves, protecting our future</b>	<p>In this lesson learners will learn more about sexually transmitted infections (STIs), their signs and symptoms, and what to do if they suspect they have an STI, including HIV. They will have the opportunity to test their knowledge and engage in an interactive session on the topic. The content covers specific infections, prevention, and care seeking for early detection and treatment. It also covers the importance of partner treatment, and specific information related to HIV testing and STI treatment.</p> <p>Learners will have the opportunity to:</p> <ul style="list-style-type: none"> <li>Consider the barriers and enabling conditions that are currently in place for their well-being.</li> <li>Assess their personal actions and intervention strategies to prevent getting STIs, including HIV.</li> <li>Look at strategies for early detection of STIs if they have been sexually active, in order to get treatment, care and support.</li> </ul>
<b>12.4 Looking ahead: my personal protection plan</b>	<p>This is the final session in this series of comprehensive sexuality education (CSE) lesson plans. Learners will have the opportunity for a final reflection on their life goals, and how romantic and intimate relationships fit in. Learners will conduct a self-assessment exercise, reviewing all of the areas of protective practice that have been covered throughout the lessons, related to healthy relationships, prevention of STIs and unintended pregnancy, HIV prevention and testing, and harmful, coercive and abusive relationships. They will identify areas where they feel strong, and areas where they will need to take additional steps, as well as other support they might need. To do this they will reflect on barriers and enabling or supportive conditions, building on the process they began in lesson 12.3. Based on this self-assessment process, each will complete a personal protection plan, which they can draw upon in years to come.</p>



## APPENDIX 3: OVERVIEW OF ASSESSMENTS – GRADES 10-12

### Grade 10

Lesson	Title of SLP	Type of assessment	Form of assessment
10.1	<b>Developing my self-confidence</b>	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Peer, Informal</li> <li>• Educator, Informal</li> <li>• Self, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Question and Answer: recall of information</li> <li>• Test your knowledge</li> <li>• Presentations</li> <li>• Practical engagement in groups</li> <li>• Written task</li> </ul>
10.2	<b>Understanding power. Getting to share it.</b>	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Self, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Class discussion</li> <li>• Pair work</li> <li>• Small group work</li> <li>• Pair/group discussion</li> <li>• Written tasks</li> <li>• Individual tasks</li> </ul>
10.3	<b>Gender, equality and healthier relationships</b>	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Peer, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Group discussion/ brainstorm</li> <li>• Written task</li> <li>• Groupwork</li> <li>• Presentations</li> <li>• Activity log</li> <li>• Survey</li> </ul>
10.4	<b>Social and environmental justice: we can make a difference</b>	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Peer, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Brainstorm</li> <li>• Interpretation of visuals</li> <li>• Group discussion</li> <li>• Pair work</li> <li>• Mind map</li> <li>• Written task</li> </ul>
10.5	<b>My changing life roles and life goals</b>	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Peer, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Individual work</li> <li>• Group discussion</li> <li>• Pair work – Interviews</li> <li>• Written task</li> <li>• Groupwork</li> <li>• Brainstorm</li> <li>• Mind map</li> <li>• Practical task – leaflet design</li> </ul>

Lesson	Title of SLP	Type of assessment	Form of assessment
10.6	Understanding sexual interest	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Peer, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Discussion on tasks related to reproductive health</li> <li>• Written task</li> <li>• Interpretation of visual</li> <li>• Visual presentation (cartoon)</li> </ul>
10.7	Our choices, our decisions	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Peer, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Group discussion</li> <li>• Group work</li> <li>• Written task</li> </ul>
10.8	I know what I want	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Peer, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Brainstorm</li> <li>• Written task</li> <li>• Group role play</li> </ul>
10.9	Consent, rape and taking action.	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Peer, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Visual presentation using video</li> <li>• Class discussion on content of video</li> <li>• Whole group discussion</li> <li>• Passage analysis - understanding concepts</li> <li>• Brainstorm</li> </ul>

## Grade 11

Lesson	Title of SLP	Type of assessment	Form of assessment
11.1	My priorities and life goals	<ul style="list-style-type: none"> <li>• Educator, informal</li> <li>• Peer, informal</li> </ul>	<ul style="list-style-type: none"> <li>• Class discussion</li> <li>• Written task</li> <li>• Pair discussions</li> <li>• Class discussion (on homework task)</li> <li>• Written task</li> </ul>
11.2	Healthy relationships: choosing the right influences	<ul style="list-style-type: none"> <li>• Educator, informal</li> <li>• Peer, Informal</li> <li>• Self, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Class discussion</li> <li>• Group work brainstorm</li> <li>• Work in pairs</li> <li>• Written task</li> <li>• Peer feedback</li> </ul>
11.3	Healthy and unhealthy relationships and the media	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Peer, Informal</li> <li>• Self, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Class discussion</li> <li>• Group discussions</li> <li>• Written task</li> <li>• Presentations</li> </ul>

Lesson	Title of SLP	Type of assessment	Form of assessment
11.4	<b>Living a balanced lifestyle, staying in control</b>	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Peers Informal</li> <li>• Self, Informal</li> <li>• Individual, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Group discussion</li> <li>• Written task</li> <li>• Pair work</li> <li>• Class discussion</li> <li>• Groupwork</li> </ul>
11.5	<b>Understanding the consequences of risky behaviour</b>	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Peer, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Pair work</li> <li>• Class discussion</li> <li>• Written task</li> <li>• Pair discussions</li> <li>• Role play</li> <li>• Presentations</li> </ul>
11.6	<b>Positive role models</b>	<ul style="list-style-type: none"> <li>• Peer, Informal</li> <li>• Educator, Informal</li> <li>• Self, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Class discussion</li> <li>• Written task</li> <li>• Research task</li> <li>• Project</li> </ul>
11.7	<b>Gender, power and violence</b>	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Peer, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Class discussion</li> <li>• Group work</li> <li>• Role play</li> <li>• Written task</li> </ul>
11.8	<b>Rape – prevention, support and change</b>	<ul style="list-style-type: none"> <li>• Educator, informal</li> <li>• Peer, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Question and answer task</li> <li>• Class discussion</li> <li>• Oral presentation</li> <li>• Brainstorm</li> <li>• Written task</li> </ul>
11.9	<b>Taking action against abuse</b>	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Peer, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Class discussion</li> <li>• Written task</li> <li>• Group work</li> </ul>

## Grade 12

Lesson	Title of SLP	Type of assessment	Form of assessment
12.1	<b>Our needs and our rights, taking action</b>	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Peer, Informal</li> <li>• Self, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Question and answer task</li> <li>• Written task</li> <li>• Group discussions</li> <li>• Evaluation of research</li> <li>• Design and planning campaigns</li> <li>• Presentations of campaign design and planning</li> </ul>

Lesson	Title of SLP	Type of assessment	Form of assessment
12.2	<b>Human factors affecting our health – and what we can do about them</b>	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Peer, Informal</li> <li>• Individual, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Class discussion, groupwork and presentations</li> <li>• Groupwork.</li> <li>• Written task – analysis of text</li> </ul>
12.3	<b>STIs: protecting ourselves, protecting our future</b>	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Self, Informal</li> <li>• Peer, Informal</li> </ul>	<ul style="list-style-type: none"> <li>• Recall and knowledge check</li> <li>• Knowledge recall test</li> <li>• Question and answer</li> <li>• Written task – text analysis and response</li> </ul>
12.4	<b>Looking ahead: my personal protection plan</b>	<ul style="list-style-type: none"> <li>• Educator, Informal</li> <li>• Self, Informal</li> <li>• Peer, Informal</li> </ul>	<p>Written self-reflection task</p> <p>Class discussion</p> <p>Written task: developing health action plans</p>

## APPENDIX 4: OVERVIEW OF LEARNER ASSESSMENT TASKS

### Grade 10

Lesson	Assessment tasks
<b>10.1</b>	Class discussion on SMART GOALS
	Written test: Test your knowledge – consolidation of content
<b>10.2</b>	Activity A: Consolidation of terms and concepts
	Written task: Dealing with stereotypes
<b>10.3</b>	Activities A and B: Responses to questions and use of group presentations
	Homework: Individual task – conducting a survey and group discussion on concepts
<b>10.4</b>	Individual activity: Dealing with concepts and understanding terms
	Written task: Application of critical thinking tool and supporting own views
<b>10.5</b>	Written task: Comprehension test on key concepts
	Written test: Test your knowledge – consolidation of concepts
<b>10.6</b>	Written task and presentation: Use the cartoon speech bubbles to test conceptual understanding. Presentation of responses.
<b>10.7</b>	Activity B: Written task – testing understanding and application of concepts and strategies.
<b>10.8</b>	Activity A: Group discussion - brainstorm on assertive communication and comprehensive summary of content and concepts across all activities
	Activity B: Written task - use of assertive communication tools and use of rubric to assess group presentations.
<b>10.9</b>	Written test: Test your knowledge - understanding of concepts

## Grade 11

Lesson	Assessment tasks
11.1	Written task: <b>Worksheet 11.1.3: Goals and action plans</b> - Develop short, medium and long term goals and action plans for your goals
11.2	Written task: <b>Homework 11.2.1: Relationships, getting what you want, knowing what you need.</b>
11.3	Written task: Complete and submit the table in the <b>Homework Assignment</b> .
11.4	Written task: <b>Worksheet 11.4.3: Test your knowledge.</b>
11.5	Presentation: Role play in Activity B - prepare a dialogue on a selected topic to be presented to the other groups.
	Written task: Complete the risky behaviour assessment activity given in Activity C on risky behaviour.
11.6	Written task: <b>Worksheet 11.6.1: Role models and their contribution.</b>
	Reading task: <b>Reading 11.6.1: Heroes today, role models tomorrow!</b> Assessing reading comprehension reflection on values and attitudes.
11.7	Presentation: Role play in Activity B on the radio talk show.
11.8	Practical task: Develop a slogan that could be used in your school's programme for the national <i>16 Days of Activism for No Violence Against Women and Children</i> campaign.
	Research: Find one example taken from the media of how victims are often blamed for rape. Written task: Draft your own status statement about what you would want to say to correct this way of thinking about people who are raped.
11.9	Written task: Planning activities for an anti-violence campaign

## Grade 12

Lesson	Assessment tasks
12.1	Group task: Presentations - planning campaigns.
	Written task: <b>Worksheet 12.1.5</b> as a self-assessment tool for campaign presentations.
	Individual task: Self-reflection" opportunity for own understanding and internalising of concepts
12.2	Activity B : Group activity – presentation on understanding of key concepts
	Individual consolidation task: Written task – consolidation and explanation of key content and concepts learnt
12.3	Activity A: Written task - recall of knowledge dealt with in the activity
	Activity A Part 2: Written task - uses of questions and answers to consolidate concepts
	Written task: <b>Worksheet 12.3.1: Tool for analysing</b> , understanding of content and measuring learners' reflection on their own personal barriers and enablers.
12.4	Written task: Activity A as a self-assessment task – individual reflection of goals, intimate relationships and personal plans
	Written task : <b>Worksheet 12.4.2: My personal protection plan</b> – consolidation of concepts and personal development across previous activities



## **Lesson 10.1**

Developing my self-confidence

<b>Lesson 10.1</b>	<b>Developing my self-confidence</b>
<b>Grade</b>	<b>10</b>
<b>Term</b>	<b>1</b>
<b>Weeks</b>	<b>1-3</b>
<b>CAPS Topic(s)</b>	<b>Development of the self</b>
<b>CAPS Subtopic(s)</b>	<ul style="list-style-type: none"> <li>Strategies to <b>enhance self-awareness, self-esteem and self-development: factors influencing self-awareness and self-esteem including media</b> <ul style="list-style-type: none"> <li>Strategies to build confidence in self and others: communication, successful completion of tasks or projects, participation in community organisation or life, making good decisions and affirmation of others</li> <li>Acknowledge and respect the uniqueness of self and others and respect differences (race, gender and ability)</li> </ul> </li> <li><b>Value of participation in exercise programmes</b> that promote fitness: cardiovascular fitness, muscular strength, endurance and flexibility <ul style="list-style-type: none"> <li>Relationship between physical and mental health</li> </ul> </li> </ul>
<b>Link to other subtopics in CAPS LO</b>	<ul style="list-style-type: none"> <li>Definition of concepts: power, power relations, masculinity, femininity and gender <ul style="list-style-type: none"> <li>Differences between a man and a woman: reproduction and roles in the community, <b>stereotypical views of gender roles and responsibilities, gender differences</b> in participation in physical activities</li> </ul> </li> </ul>
<b>This lesson will deal with the following</b>	<ul style="list-style-type: none"> <li>Revisit SMART goals</li> <li>Identify important elements that contribute to self-confidence</li> <li>Recognise the impact different forms of media can have on self-confidence, self-awareness, and self-esteem</li> <li>Identify ways the media can positively or negatively influence teenagers' self-confidence</li> <li>Describe what it means for us to respect differences and the uniqueness of each person, including race, sex, sexual orientation, gender and abilities</li> <li>Create constructive self-esteem messages for teenagers</li> <li>Create strategies that strengthen your own and others' self-confidence</li> <li>Identify the positive effects on our overall well-being when we do physical activities regularly</li> <li>Reflect on your own level of self-confidence and how to strengthen it</li> </ul>
<b>Concepts</b>	<ul style="list-style-type: none"> <li>appreciation</li> <li>consequence</li> <li>respect, self-respect</li> <li>respect for uniqueness of self and others</li> <li>self-awareness, self-confidence, self-esteem</li> <li>self-development</li> <li>strategy</li> <li>well-being</li> </ul>
<b>Teaching methodologies</b>	<ul style="list-style-type: none"> <li>Knowledge check-in</li> <li>Class discussion and application of learning concepts</li> <li>Pair share ideas: share insights with the class</li> <li>Group discussions and presenting insights in the class</li> <li>Group work: creating media messages</li> </ul>
<b>Time</b>	90 minutes



## BRIEF LESSON SUMMARY

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

## KEY POINTS

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



## RESOURCES/MATERIALS

Refer to **Reading 10.1.1: Factors that can affect self-confidence**



## PREPARATION FOR THE LESSON

This lesson has been given 90 minutes. Depending on your timetable, you will break the 90 minutes down to fit the time you have available. More time has been allocated to this lesson so that you can recap on the Grade 9 content on SMART goals. If learners have not gone through the Grade 9 lesson before, then recap on what SMART goals are and have the learners write up the goals they have for themselves.

Review all materials for this lesson. Also read **Grade 9 SLPs: 9.1 and 9.11 Life Orientation topic: Development of the self in society**. Go through all the activities, and think about how you might allocate time so that you cover the most important elements of the lesson.

Assessment: Lesson 10.1			
Activity	Time	Type of assessment	Form of assessment
Activity A: Self-confidence and achieving our goals	25	Educator, Informal	<ul style="list-style-type: none"> <li>Question and answer: recall of information</li> <li>Test your knowledge</li> </ul>
Activity B: Media and its messages: what's cool, what's not?	30	Educator, Informal Peer, Informal	<ul style="list-style-type: none"> <li>Presentations</li> </ul>
Activity C: Strategies for self-confidence	35	Educator, Informal	<ul style="list-style-type: none"> <li>Practical engagement in groups</li> </ul>
Homework		Self, Informal Peer, Informal	<ul style="list-style-type: none"> <li>Written task</li> </ul>
Time	90		

## TEACHING THE LESSON

Welcome the class to the Grade 10 LO series of lessons on CSE. Explain that they will be building on the previous year's lessons and continue to enhance their knowledge and skills in sexual and reproductive health and general well-being. Although there are links to Grade 9 SLPs in some of the lessons for Grade 10, learners who have not been through the Grade 9 lessons will not be disadvantaged. All relevant content for the Grade 10 lesson is included in the activities.



## ACTIVITIES

### Activity A: Self-confidence and achieving our goals

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

- Tell your learners that we will start by having a quick check-in on the goal-setting they did in Grade 9.
  - What is a SMART goal? (**Answer: SMART goals are:** Specific. Measurable. Action-oriented. Realistic. Time-bound)
  - What goals did you set last year? Were you able to achieve them? Did you have to re-set any goals because things changed (changes are part of daily life)?
  - How have you used SMART goal-setting since you learnt about it?
  - What sexuality education messages from Grade 9 do you remember? Refer learners to the end of the lesson if they do not recall the core messages.

**NOTE TO THE EDUCATOR****Recapping Grade 9**

If learners have not dealt with SMART goals in Grade 9, then do a quick explanation of the acronym. Refer them to **Reading 10.1.2: Core messages**. Post the SMART label in the classroom to remind learners of its meaning.

These are the **Core messages for Senior Phase** and should be familiar to the learners who have been through any of the grade 7-9 sexuality education SLPs.

- The safest choice is not to have sex.
- You have the right to say no to sex in any situation.
- If you choose to have sex, use a condom every time.
- Stay faithful to one partner at a time to protect yourself, your partner and your community.
- If you are having sex, get tested for HIV and other STIs regularly.
- Both men and women are responsible for preventing pregnancy, HIV and other STIs.

An assessment task in the **Assessment** section will help learners consolidate information if they do not remember doing SMART goals in Grade 9

2. Conclude this review by emphasising that in Grade 9 learners were taught that anyone involved in sexual relationships should use condoms correctly, every time they have sex, to protect themselves and their partners from sexually transmitted infections (STIs) including, HIV, and unintended pregnancy.
3. Explain that in this lesson the class will explore how self-respect as well as respect for others affects our romantic and intimate relationships and our ability to reach goals that we set for ourselves. Ask learners to:
  - a. Explain what they think it means to have good self-confidence by giving examples from their own lives. Affirm responses that convey an understanding of self-confidence.
  - b. Give examples of how we have the power to influence each other's self-confidence in either a positive or negative way. Highlight that our relationships at school, at home and in the community, have the power to influence how we feel about ourselves. This happens through what we say, what we do, and what we communicate through our body language. Different relationships may affect us in different ways, and influence our ability to reach our potential.
  - c. Ask learners to think about their own lives and what may affect their self-confidence. Give some examples, such as somebody commenting positively or negatively on their physical appearance or character. Refer to **Resource 10.1.1: Factors that can affect self-confidence** for supplementary information. Have learners share their reflections with a partner.
  - d. Work in pairs. Use the easiest and quickest way to divide the types of relationships listed below amongst the pairs (one per pair).

**Different types of relationships:**

- **In romantic relationships** – whether the relationship includes sex or not
- **At home** – with siblings, cousins, parent figures or elders
- **At school** – with friends, peers, teachers, or in extra-mural activities
- **In their community** – in clubs, choirs, volunteer groups or religious organisations.

Each pair must give examples of the relationship they are assigned by using these questions to guide them:

- In what ways do other people influence their self-confidence? In what way do they influence other people's self-confidence?
  - In what way does each of these types of relationships influence their ability to achieve their goals?
- e. Ask a few volunteers to share their responses with the class, starting with romantic relationships. Discuss both why self-confidence is important and how people influence one another's self-confidence.
- Put up a flash card or write the terms on the chalkboard: **self-esteem**; **self-awareness** and **self-development**. Ask learners to brainstorm the meaning of each term (without looking at the possible definitions in the table).
  - Refer your learners to **Worksheet 10.1.1: Things to help you in life**. Ask them to match each term with its definition. They will find the three new terms they have learnt, as well as 'self-confidence'. When they are done, review their responses together as a class.

Explain that in the next activity, learners will identify ways in which they can build their own, and others' self-confidence.

**WORKSHEET 10.1.1: Things to help you in life (answers)**

1. Self-confidence	2. Self-esteem	3. Self-awareness	4. Self-development
(a) When, little by little, you develop and strengthen your character, values and abilities	(b) When you know and understand your own character and feelings	(c) A feeling of trust in your own abilities, qualities, and judgement of people and situations	(d) Confidence in your own worth or abilities; self-respect
Answers			
1=c	2=d	3=b	4=a

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



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

1. Use the illustration to get learners to identify as many of the icons for the different social media that they are familiar with and use.
2. Ask your learners how they think the media can influence their self-awareness, self-esteem and self-confidence. Ask for concrete examples that (a) have a positive influence or (b) have a negative influence.

They should consider different media platforms:

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

Take several responses, ensuring that they give concrete examples that their peers are likely to know about and relate to.

3. Form groups and instruct each to choose a specific programme, advert or type of social media they would like to work with. Have learners turn to **Worksheet 10.1.2: Messages we get from the media: group activity**. Go through the activity and try to make sure everyone understands what to do.

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

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

Ask each group to briefly share the main points discussed in their group on negative media messaging. They should also share the message/slogan they have developed to help all teenagers feel good about themselves.

**Activity C: Our strategies for self-confidence**

1. Invite learners to say what things they do, or experience, that makes them feel self-confident. Write their responses on the board.
2. Ask learners to turn to **Worksheet 10.1.3: Three important self-confidence boosters**. Explain that three important requirements to boost our self-confidence include feeling appreciated, having skills and being responsible. Point out some responses in step 1 above that illustrate each of the three categories.
3. Read the questions in each box of the worksheet. Have learners form groups to answer the questions. Assign each group one of the following: (a) having skills, (b) feeling appreciated, or (c) taking responsibility in romantic or sexual relationships. Groups should take notes of their ideas. After there has been sufficient time to discuss, review responses of those who focused on (a), then (b), then (c). Note any important similarities and differences. You will be able to assess their understanding from their responses.

### NOTE TO THE EDUCATOR

When you read the questions in the boxes, make sure learners understand what a consequence is, and what a strategy is. Both words are glossary terms.

4. Explain that we are also responsible for taking care of ourselves, both physically and mentally. Ask learners how regular physical activity and exercise might affect one's:
  - a. body
  - b. self-esteem
  - c. self-confidence
  - d. ability to communicate assertively
  - e. emotions
  - f. school work
  - g. energy
  - h. ability to manage and control our sexual feelings
5. Ask learners what other actions they could take to positively impact on the above list. For example, what else could they do to improve their energy, etc.? Possible answers are: sleep well, avoid alcohol and drugs, think before you act, stick to your goals, etc.



### CONSOLIDATION

Consolidate the lesson by going through the key points. Remind learners that they have looked at how self-confidence, self-awareness and self-esteem affect our decisions and well-being, and how the media impacts on how we see ourselves and relationships.

Ask learners to think about how what they have learned relates to the core messages below:

#### Core messages:

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



### HOMEWORK

#### 1) Reflection: You and self-confidence

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

## 2) Physical activity log for one week

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

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



### 3) Start a private journal

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



#### NOTE TO THE EDUCATOR

##### Journal Writing

Journal writing is a useful skill to develop in learners. Liaise with the language teacher(s) about opportunities for learners to use journal writing in their class.

Emphasise to all learners that writing in a journal about feelings, thoughts and experiences is personal and needs to be respected.



## ASSESSMENT

Do this assessment task after the discussion in Activity A.

1. Ask learners to make their own notes on the class discussion on what SMART goals are so that they record their own goals. Their SMART goals are referred to again in later SLPs.

Learners should make their notes on the following:

- Do you remember what SMART stands for? Write down one of the goals you set for yourself.
- Did you achieve it or did you have to re-set your goal?
- Have you used SMART goal-setting since you learnt about it?
- Have you set one or two goals **this year** to make sure you develop yourself?

Use the peer-assessment method after the class discussion on SMART goals. In this way learners get to discuss or recap their goals with a peer.

2. Use the following questions as recall questions to consolidate content in this SLP.
  - How would you define self-confidence?
  - There are three very important parts to self-confidence. What are they?
  - Will poor self-confidence impact on how you achieve your goals? Give a reason for your answer.
  - How is self-confidence linked to making good decisions? Give a reason for your answer.



## RESOURCES

### READING 10.1.1: Factors that can affect self-confidence

#### Some suggestions on what affects self-confidence

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

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

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

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

**READING 10.1.2: Core messages**

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

**WORKSHEET 10.1.1: Things to help you in life**

1. Self-confidence	2. Self-esteem	3. Self-awareness	4. Self-development
(a) When, little by little, you develop and strengthen your character, values and abilities	(b) When you know and understand your own character and feelings	(c) A feeling of trust in your own abilities, qualities, and judgement of people and situations	(d) Confidence in your own worth or abilities; self-respect
Answer			
1=c	2=d	3=b	4=a

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

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

## WORKSHEET 10.1.3: Three important self-confidence boosters

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



### 1. Develop your skills

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

### 3. Take responsibility

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

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

### 2. Feel appreciated

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

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

- Think of a time when you felt appreciated. What did feeling appreciated do for your self-confidence?
- What can happen (the **consequences**) if you don't feel appreciated?
- If you are in a romantic relationship, or would like to be in one in the future, what appreciation would you want shown to you?

What strategies can you use to strengthen your own appreciation of yourself, your peers, and friends in your life?



## GLOSSARY

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

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

**Respect:** To admire someone for their abilities, qualities or achievements or because of their status in our family or our community.

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

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

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

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

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

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

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

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

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



## Lesson 10.2

Understanding power. Getting  
to share it.

Lesson 10.2	Understanding power. Getting to share it.
Grade	10
Term	1
Weeks	1-3
CAPS Topic	Development of the self in society
CAPS Subtopic(s)	<ul style="list-style-type: none"> <li>Definition of concepts: power, power relations, masculinity, femininity and gender               <ul style="list-style-type: none"> <li>Differences between a man and a woman: reproduction and roles in the community, <b>stereotypical views of gender roles and responsibilities</b>, <b>gender differences</b> when participating</li> <li>in physical activities</li> </ul> </li> </ul>
Link to other subtopics in LO CAPS	<ul style="list-style-type: none"> <li>Strategies to enhance self-awareness, self-esteem and self-development: factors influencing self-awareness and self-esteem, including media</li> <li>Value of participation in exercise programmes that promote fitness: cardiovascular fitness, muscular strength, endurance and flexibility               <ul style="list-style-type: none"> <li>Relationship between physical and mental health</li> <li>Influence of gender inequality on relationships and general well-being: sexual abuse, teenage pregnancy, violence, STIs including HIV and AIDS</li> </ul> </li> </ul>
This lesson will deal with the following:	<ul style="list-style-type: none"> <li>Understand and apply to concrete examples these concepts: power, power relations, masculinity, femininity and gender, with particular emphasis on looking at:               <ul style="list-style-type: none"> <li>Differences between a man and a woman:                   <ul style="list-style-type: none"> <li>Reproduction and roles in the community</li> <li>Stereotypical views of gender roles and responsibilities</li> <li>Gender differences in participation in physical activities</li> </ul> </li> </ul> </li> </ul>
Concepts	<ul style="list-style-type: none"> <li>femininity</li> <li>gender</li> <li>gender equality</li> <li>gender inequality</li> <li>gender norms</li> <li>gender socialisation</li> <li>LGBTQIA (lesbian, gay, bisexual, transgender, queer/questioning, intersex, asexual)</li> <li>masculinity</li> <li>patriarchy</li> <li>power relations</li> <li>power in relationships</li> <li>sex, gender and sexual orientation</li> <li>stereotypes</li> <li>stereotypical views of gender roles and responsibilities</li> </ul>
Teaching methodologies	<ul style="list-style-type: none"> <li>Educator knowledge input, learner knowledge and reflection check-in</li> <li>Class discussion</li> <li>Snap chat (quick, informal discussion with one or more people)</li> <li>Pair discussion</li> <li>Group discussion</li> </ul>
Time	60 minutes



## BRIEF LESSON SUMMARY

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

## KEY POINTS

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



## RESOURCES/MATERIALS

This additional reading will be useful for both 10.2 and 10.3:

- **Educator resource 10.2.1: Put on a gender lens**



## PREPARATION FOR THE LESSON

Read through **Lesson 10.2** so that you can plan how you want to allocate time for the various activities. As you read, take time to consider how you will draw linkages between gender equality and healthy actions to help eliminate abuse in relationships. This will include unintended teenage pregnancy, violence, and STIs, including HIV and AIDS. Also consider your own feelings and attitudes you may encounter related to sexuality and gender identity, so that you can maintain a respectful and supportive environment for all learners.

Take a moment to reflect on the positive examples of boys and men who have been champions for gender equality and positive change for women and girls. During this session, and in other session that follow, you will want to be sure to reinforce any positive comments and actions on the part of young men who

want positive change as well as the young women among your learners. Overall it will be important to reinforce the idea that gender equality benefits boys and men as much as it benefits girls and women.

Read **Educator resource 10.2.1: Put on a gender lens**, and think through your responses to the questions.

### Activity A: Gender socialization: – How we are learn what society expects of us as males and females

- Review the exercises for this activity so you are prepared to keep the pace moving. Practice reading the personal reflection aloud to be sure you build in pauses to allow learners time to consider the information.

### Activity B: Challenging gender stereotypes

- Gather traditional gender stereotypical sayings you know of to supplement the discussion. For example: “Boys are supposed to be tough and they don’t cry!” Use examples from different languages, traditional practices and cultures that your learners are familiar with.

Assessment: Lesson 10.2			
Activity	Time	Type of assessment	Form of assessment
<b>Activity A: Gender socialisation – How we are learn what society expects of us as males and females</b>	30	Educator, Informal	<ul style="list-style-type: none"> <li>Class discussion</li> <li>Pair work</li> <li>Small group work</li> </ul>
<b>Activity B: Challenging gender stereotypes</b>	30	Educator, Informal	<ul style="list-style-type: none"> <li>Pair/ group discussion</li> <li>Written task</li> </ul>
<b>Homework</b>		Self, Informal	<ul style="list-style-type: none"> <li>Individual tasks</li> </ul>
<b>Total</b>	60		

## TEACHING THE LESSON

Emphasise that having self-confidence helps us handle power in relationships in a confident, equal and fair way. When we have self-confidence, we feel secure and don’t need to wield power over other people. Gender Power relations are explored in the next activity.



### ACTIVITIES

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

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

## The Road of Life. My Personal Journey

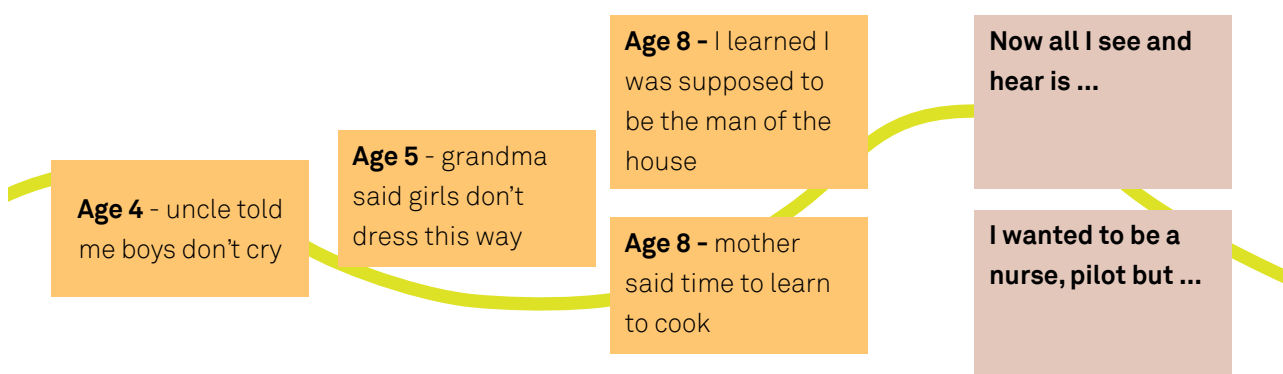
1. Explain to the learners that we are going to do a personal reflection together, called **The Road of Life: My Personal Journey**. The aim of this reflection is to identify how and when we have been influenced in the way we see our roles as boys and girls, and then young men and women. Read the following passage slowly, pausing for a few seconds when you see this (...).

*Everyone close your eyes and think about your earliest memories as I speak. (If someone is uncomfortable with their eyes closed, they can do the exercise with eyes open).*

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

2. Ask the learners to turn to **Worksheet 10.2.1: The Road of Life: My Personal Journey**. Use the space provided or extra paper and quickly write down as many things as you can remember. Look at your list and number them in the order that they happened. Use the example below to explain what is meant by the *road of life* and how to identify important milestones and influences, or when significant changes occur in one's life.
3. Then, instruct the learners to write on their **Road of Life** worksheet, write or draw the things that they feel had the most influence on their understanding and what is expected of them as a boy or girl, and later as a young man or young woman.

On a time line like the one below, show what memories you have, and approximately when they took place. Here are some examples:



4. When the learners have completed the activity, ask them to turn to their neighbour and discuss what they discovered for a few minutes. Ask them: Did you note things that you have in common? What was different? Was there anything that was difficult or challenging for you when you did that reflection?
5. Ask the class to think for a minute about what might be difficult for a person who does not identify as the sex which they were born as. Acknowledge that while we experience things differently as males and females, there are people who were identified as male but feel that they are female or they may be female and feel that they are male; or they may feel that they are both male and female. For them, the personal journey may have more conflicts between what people tell them and how they actually feel. Explain that you will come back to this.

### **Stereotypes and gender equality**

6. Refer your learners to **Learner Reading 10.2.1: Gender stereotypes: why they are important to understand** and the images that go with it. Discuss each concept as you review the material, asking for concrete examples when it will help the discussion. This will help you know if the learners understand the concepts.

Afterwards, ask them how they think gender stereotypes affect gender equality and inequality.

Point out that gender roles are changing. Ask learners to give examples of how they have experienced changes in gender roles: Are men the only providers and protectors? What non-traditional roles are women playing?

Talk about the fact that both men and women face new challenges. For example, there are many different family structures in our country. Engage learners about the various family structures we have, and ask how this impacts on the notion of gender norms in the home?

### **Sex and gender: Understanding the difference**

7. Explain that we use words like gender, gender power relations, gender roles and gender equality often. But many people, even experts, mix up the meaning of sex and gender. Ask the learners for their understanding of the difference between sex and gender? Take a few responses, then refer them to the information in **Reading 10.2.3: What is the difference between sex and gender?**

Ask learners to recall what they were thinking after the **Road of Life** exercise – How does society impose certain norms and behaviour on us? Note that people who have a different sexual or gender identity might feel uncomfortable with social expectations and stereotypes related to gender roles. Then ask: how can we be supportive of those around us who may not fit the stereotype?

## NOTE TO THE EDUCATOR

Make sure that everyone understands the need to be supportive of their peers, regardless of their gender identity or sexual orientation.

Some learners may not feel confident enough to admit their feelings about their gender identity or sexual orientation. Having this discussion in class may make them feel that they would like talk to somebody who can listen to them and advise them. If you are not able to provide support, consult your referral directory to find out which services are able to address special needs of LGBTQIA youth. There are professional services with the necessary experience and skills to help young people who are questioning their gender and sexual identities.

If there is a learner who is questioning their gender identity, take care to respect the privacy of the person. No one should be forced to disclose their sexual orientation or their questioning of their gender identity in public. This can be unsafe, especially in some school and community environments.

Note that when someone shares information on their sexuality or gender identity (or any other sensitive issue related to sexual health), their need for privacy must be respected. Whatever is shared must not be repeated outside the classroom.

### Activity B: Challenging gender stereotypes

#### Gender, stereotypes and power: some terms and definitions

1. Ask learners to remain in their same pairs and turn to **Worksheet 10.2.3: Gender, stereotypes and power: some terms and definitions**. Their task is to match the definitions in column on the right to the correct terms in the column on the left.
2. Review the correct answers with the whole class, and ask whether there are any questions.
3. Ask your learners to note their ideas in their Learner Books as you discuss the following as a class:
  - What do you think of when you hear the words *masculine* or *masculinity*?
  - What do you think of when you hear the words *feminine* or *femininity*?
  - Has it put pressure on you to behave in a particular way?

#### Power and gender in relationships

- Ask for a volunteer to read the text in **Reading 10.2.2: What is power?** Encourage learners to take notes in their Learner Books during the discussion on the topic: How might power in a relationship affect our ability to achieve our goals?

Ask learners to think of people they know, and discuss the following, without naming any names:

- Describe a romantic or sexual relationship with unequal power.
- Describe a romantic or sexual relationship with equal power.

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

If needed, use these questions as prompts: What would the results be if someone convinces their partner to only practice safe sex? To get tested for HIV and share results? To use a method of family planning? To

feel safe?

4. Wrap up the activity with the brief exercise found in **Worksheet 10.2.5 Challenging stereotypes and rigid gender norms.**

Ask learners to do the personal reflection activity in the assessment section.



## CONSOLIDATION

Consolidate the lesson by asking learners what they have learnt and whether any of their beliefs or attitudes have been challenged. Ask them what they view differently as a result of this lesson? Summarise the key points covered at the beginning of the lesson. Then ask the class to identify which of the core messages are particularly relevant for this lesson.

### Core messages

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



## HOMEWORK

Ask learners to turn to **Worksheet 10.2.6 Gender roles and activities.** Learners should complete this exercise at home with members of their households. They could use the activity to start discussions at home about gender stereotypes and how understanding gender stereotyping can help us to have more gender equality and protect us in our personal relationships.

**NOTE TO THE EDUCATOR****Refer your learners for help**

If you sense any learners are experiencing gender-based harm and violence or suffering from depression, you should refer them to organisations that can help them. Do some research or speak to colleagues for advice about services in the community. There may be a local clinic where learners can be assisted. The local South African Police Services (SAPS) should have a Victim Empowerment Officer. There is also the Stop Gender Violence Helpline 0800 150 150, Gender-based Violence Call Centre 0800 428 428 (or \*120\*7867#), LifeLine 0861-322-322, or the South African Depression and Anxiety Group (SADAG) 0800 12 13 14.

**ASSESSMENT**

Ask learners to make notes on the following terms discussed in **Activity A: power, power relations, masculinity, femininity and gender**.

Use the following activity to consolidate discussion on stereotypes. Learners can do this activity in pairs.

**Stereotype → (generalising)<sup>13</sup>**

When you stereotype, you say that all people who belong to a particular group look or behave in the same way.

Give an example of stereotypes of:

- a. teenage boys
- b. teenage girls

What can we do to promote gender equality for teenagers?

If we have gender equality for teenagers, do you think it will help to reduce unintended pregnancies, sexual abuse, violence, and STIs, including HIV? Why? (or) Why not

**Possible answers**

**Stereotype → (generalising about a group of people)**

**When you stereotype, you say that all people who belong to a particular group look the same or behave in the same way.**

Example: All teenagers are rebels.

**1. Give some examples of stereotypes of (a) teenage boys and (b) teenage girls:**

- a. Boys are messy and unclean.

Boys who wear pink, or cry when they are emotional are effeminate

- b. Girls are only concerned about their physical appearances.

Only girls can participate in netball trials

**2. What can we do to promote gender equality for teenagers?**

**Promote activities that defy stereotypes:** Encourage boys to learn how to cook or contribute in other ways at home. Encourage girls to try tasks often assigned to boys. Encourage both boys and girls to consider careers outside of what is expected of them as boys or girls. It is important to participate and not limit choices to what society has historically claimed to be gender specific activities.

**3. Ask learners to give their responses and reasons for their decisions.**

**Possible answers**

**Stereotype → (generalising about a group of people)**

**When you stereotype, you say that all people who belong to a particular group look the same or behave in the same way.**

Example: All teenagers are rebels.

**4. Give some examples of stereotypes of (a) teenage boys and (b) teenage girls:**

- a. Boys are messy and unclean.

Boys who wear pink, or cry when they are emotional are effeminate

- b. Girls are only concerned about their physical appearances.

Only girls can participate in netball trials

**5. What can we do to promote gender equality for teenagers?**

**Promote activities that defy stereotypes:** Encourage boys to learn how to cook or contribute in other ways at home. Encourage girls to try tasks often assigned to boys. Encourage both boys and girls to consider careers outside of what is expected of them as boys or girls. It is important to participate and not limit choices to what society has historically claimed to be gender specific activities.

**6. Ask learners to give their responses and reasons for their Learners give their decisions.**



Use the peer-assessment method to correct the written responses from learners.

The school-based assessment in Grade 10 includes **summative** assessment (tests or examinations). Here is an assessment task you may want to use as an item for a test or exam.

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

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

**Possible responses**

	<b>Biological factors (to do with the sex you are born with)</b>	<b>Social influences on the role you are expected to play in your family, school, community and society</b>	<b>The cultural or traditional beliefs and attitudes we are taught that influence our lives</b>
Man	Penis, testicles	Provider, protector	Initiation
Woman	Clitoris, vagina, womb	Care-giver, nurturer, producing babies, cooking, cleaning the home, responsibility for children	Women are expected to have a longer mourning period than men Lobola
Intersex	Have both male and female sex organs but one set is less clearly visible	The role depends on how society sees the individual as either a man or a woman	Depends on how society sees the individual

### Personal reflection activity

Inform the class that the personal reflection activity is a wrap up activity:

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



## RESOURCES

### EDUCATOR RESOURCE 10.2.1: Put on a gender lens

Think of your own life at home, at school and in the community. You could keep a journal for a few days, noting the things that people say and do that promote gender equality and the things they say and do that promote inequality, negative stereotypes and are harmful to the well-being of others.

Apply a gender equality lens to what you observe, and to what you do. Here are some questions:

- What do you and others expect of men and boys, and what do you and others expect of women and girls? What behaviour and goals are expected from each gender?
- What is the same, and what is different?
- What stops boys and men, and girls and women, from being able to share different types of work fairly and equally so that everyone gets enough time to play and relax?
- Do your expectations regarding gender roles promote equality or do they reinforce traditional gender norms?
- Does anyone lose their freedom to be who they want to be, or suffer in other ways?
- Is different behaviour expected or accepted from girls and boys, and women and men? For example, do girls and women do most of the cooking, laundry and ironing? Do boys get to have more recreational time outside playing than their girl siblings or cousins?
- How does all of the above affect a sizeable portion of our population: lesbian, gay, bisexual, transgender, queer/questioning, intersex, and asexual (LGBTQIA) people?

Note that achieving gender equality is not just about the empowerment of girls and women. It also requires positive change for boys and men. We should avoid situations that create boys versus girls. Gender equality benefits men and boys as well as women and girls. There are many young men who are aware of the unfairness of gender inequality and who want the best for the girls and women in their lives. These young men want to contribute to family and social life in ways that may not be seen as *masculine*. There is a term for these males– Gender Equitable Males (GEMS!).

During this session, and others to follow, you will want to reinforce any positive comments and actions on the part of young men (GEMS) who want positive change as well as the young women among your learners. Overall it will be important to reinforce the idea that gender equality benefits boys and men as much as it benefits girls and women.

Think about having formal or informal discussions about your thoughts and insights with other LO educators as well as educators in other subjects. Imagine if your whole school promoted gender equality

and respected people of all sexual orientations. What would be different? Would it be a better way of life?

Find out which services for LGBTQIA can assist young people who are questioning their sexual or gender identities. Have the phone number available for learners who may need the information.

## **WORKSHEET 10.2.1: The road of life: My personal journey**

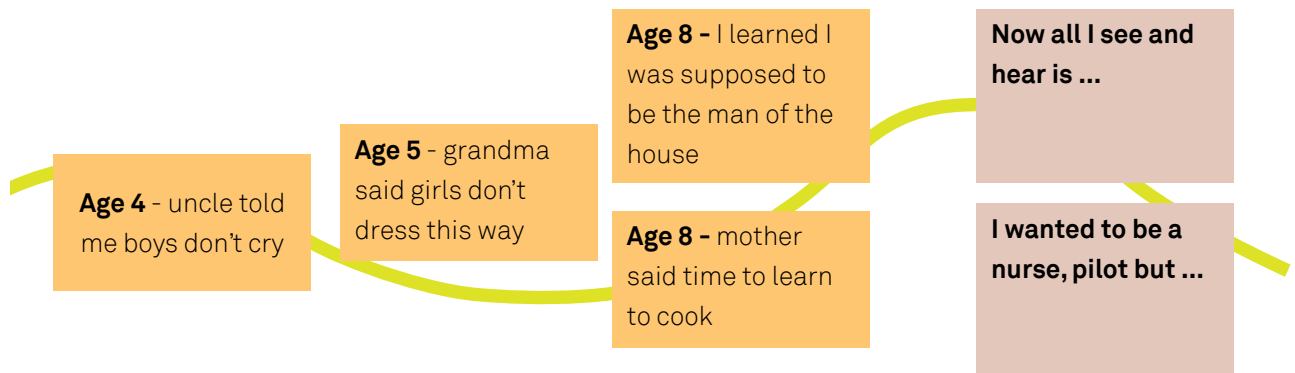
Listen to your educator read the following passage.

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

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

Things that have or have had an influence on me	

2. Write or draw the things that happened to you that you feel had the most influence on your understanding of what was expected of you as a boy or girl, and later as a young man or young woman. On a timeline like the one below, list your memories and indicate approximately when they took place. Here are some examples:



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

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



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

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

### WORKSHEET 10.2.2: Notes on masculinity and femininity

Make notes here as your class discusses the following ideas:

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

## READING and DISCUSSION 10.2.2: What is power?

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

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

**Write some examples here:**

[illegible]

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

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

COLUMN A	Answer	COLUMN B
1. Femininity		a. Generalised statements, which can often hurt and cause harm, about a particular group of people.
2. Gender equality		b. Society teaches boys attitudes and behaviour that are considered appropriate for boys and men. These are traditional expectations of how boys and men should behave.
3. Gender norms		c. How power can be used positively or negatively between people, such as in relationships between rich and poor people, bosses and workers, educators and learners, parents/ caregivers and children, leaders and the people who voted for them.
4. Masculinity		d. A system that goes back to ancient times in most societies. It is a set of taught and learnt values in which it is accepted that boys and men can and should hold more power and control than girls and women. Power is held in different ways, including because of one's social status, ownership, economic or financial influence, traditional rights and responsibilities, decision-making and having emotional control of another or others.
5. Patriarchy		e. Girls are taught what society expects of them. This includes the attributes, behaviour and roles that society values and expects of girls and women. This is reinforced by the media.
6. Power relations		f. Socially constructed characteristics of women and men – such as norms, roles and relationships of and between groups of women and men
7. Types of power in relationships		g. Families, schools and society- including the media -, teach us from birth to death how we are expected to behave and what we are expected to do, depending on whether we are boys or girls, or men or women. Some people, who do not meet these expectations, may identify themselves as LGBTQIA, and they are often stigmatised.
8. Sex		h. Generalised statements and ideas about roles and responsibilities for girls and boys and women and men. Some generalisations cause hurt and harm.
9. Gender		i. Who we are emotionally, romantically and sexually attracted to.

COLUMN A	Answer	COLUMN B
10. Sexual orientation		j. We are born either male or female or intersex (with both male and female sex organs). This is our biology. Some of us are born male and identify as girls, and vice versa. They are transgender.
11. Stereotypes		k. The control that one person or people have over others can be physical, psychological, emotional, sexual, due to social status, financial/economic, to mention a few.
12. Stereotypical views of gender roles and responsibilities		l. When we treat people fairly and equally, regardless of whether they are a girl or a boy, or a woman or a man, or a transgender person.

Worksheet 10.2.3: Gender, stereotypes and power terms and definitions (Answers for Educator) COLUMN A	Answer	COLUMN B
1. Femininity	(e)	a. Generalised statements, which can often hurt and cause harm, about a particular group of people.
2. Gender equality	(l)	b. Society teaches boys attitudes and behaviour that are considered appropriate for boys and men. These are traditional expectations of how boys and men should behave.
3. Gender norms	(g)	c. How power can be used positively or negatively between people, such as in relationships between rich and poor people, bosses and workers, educators and learners, parents/ caregivers and children, leaders and the people who voted for them.



<b>Worksheet 10.2.3: Gender, stereotypes and power terms and definitions (Answers for Educator) COLUMN A</b>	<b>Answer</b>	<b>COLUMN B</b>
4. Masculinity	(b)	d. A system that goes back to ancient times in most societies. It is a set of taught and learnt values in which it is accepted that boys and men can and should hold more power and control than girls and women. Power is held in different ways, including because of one's social status, ownership, economic or financial influence, traditional rights and responsibilities, decision-making and having emotional control of another or others.
5. Patriarchy	(d)	e. Girls are taught what society expects of them. This includes the attributes, behaviour and roles that society values and expects of girls and women. This is reinforced by the media.
6. Power relations	(c)	f. Socially constructed characteristics of women and men – such as norms, roles and relationships of and between groups of women and men
7. Types of power in relationships	(k)	g. Families, schools and society- including the media -, teach us from birth to death how we are expected to behave and what we are expected to do, depending on whether we are boys or girls, or men or women. Some people, who do not meet these expectations, may identify themselves as LGBTQIA, and they are often stigmatised.
8. Sex	(j)	h. Generalised statements and ideas about roles and responsibilities for girls and boys and women and men. Some generalisations cause hurt and harm.
9. Gender	(f)	i. Who we are emotionally, romantically and sexually attracted to.
10. sexual orientation	(i)	j. We are born either male or female or intersex (with both male and female sex organs). This is our biology. Some of us are born male and identify as girls, and vice versa. They are transgender.
11. Stereotypes	(a)	k. The control that one person or people have over others can be physical, psychological, emotional, sexual, due to social status, financial/economic, to mention a few.

Worksheet 10.2.3: Gender, stereotypes and power terms and definitions (Answers for Educator) COLUMN A	Answer	COLUMN B
12. Stereotypical views of gender roles and responsibilities	(h)	l. When we treat people fairly and equally, regardless of whether they are a girl or a boy, or a woman or a man, or a transgender person.

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

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



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

**Gender**



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

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



### WORKSHEET 10.2.5 Challenging stereotypes and rigid gender norms

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



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

.....  
 .....  
 .....

**Steps I will take to achieve gender equality in my life**

.....  
 .....  
 .....  
 .....



## HOMEWORK

### WORKSHEET 10.2.6: Gender roles and activities

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

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



## GLOSSARY

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

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

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

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

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

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

### LGBTQIA:

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

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

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

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

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

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

**Intersex:** People who are intersex are born with both male and female sexual organs. It is for them

to be free to decide their own unique identity

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

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

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

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

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

#### **Sex, gender and sexual orientation:**

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

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

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

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

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



## Lesson 10.3

Gender, equality and healthier  
relationships

Lesson 10.3	Gender, equality and healthier relationships
Grade	10
Term	1
Weeks	1-3
CAPS Topic(s)	Development of the self in society
CAPS Subtopic(s)	<p>Definition of concepts: <b>power, power relations</b>, masculinity, femininity and gender</p> <ul style="list-style-type: none"> <li><b>Influence of gender inequality on relationships</b> and general well-being: sexual abuse, teenage pregnancy, violence, STIs including HIV and AIDS</li> </ul>
Link to other subtopics in CAPS (LO)	<ul style="list-style-type: none"> <li>Definition of <b>concepts: power, power relations, masculinity, femininity and gender</b> <ul style="list-style-type: none"> <li>Differences between a man and a woman: reproduction and roles in the community, stereotypical views of gender roles and responsibilities, gender differences in participation in physical activities</li> </ul> </li> <li>Strategies to enhance self-awareness and self-development: factors influencing self-awareness and self-esteem, including media</li> </ul>
This lesson will deal with the following:	<ul style="list-style-type: none"> <li>Recognise how gender inequality can lead to more people being sexually abusive and violent, to more unintended teenage pregnancy, and to acquiring HIV and other sexually transmitted infections (STIs).</li> <li>Recognise how gender equality in relationships leads to more happiness and peace.</li> <li>Identify the positive effects on our overall well-being when we do physical activities regularly.</li> </ul>
Concepts	<ul style="list-style-type: none"> <li>Sustainable Development Goals</li> <li>Femininity</li> <li>Gender</li> <li>Gender equality</li> <li>Gender inequality</li> <li>Masculinity</li> <li>Well-being</li> </ul>
Teaching methodologies	<ul style="list-style-type: none"> <li>Class discussion</li> <li>Pair work</li> <li>Groupwork and presentations</li> </ul>
Time	60 minutes



## BRIEF LESSON SUMMARY

Learners will explore ways to practice gender equality in relationships, starting with their families. They will move on to discuss romantic relationships. Next they will analyse how both equal and unequal gender power relations contribute to the risk of STIs, including HIV, unintended teenage pregnancy, and gender-based harm. They will work in groups to come up with some ideas that promote gender equality in romantic relationships, which they will present to the class. They will also go out and interview people at home and in their communities to get their views on gender relations.

## KEY POINTS

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



## RESOURCES/MATERIALS

Refer to additional resources from lesson 10.2:

- ***Educator Resource 10.2.1: Put on a gender lens***



## PREPARATION FOR THE LESSON

Read through this lesson, its activities and homework assignments and be prepared to lead discussions about gender and healthy relationships. Also review the previous lesson to ensure this lesson builds on the previous exploration of gender, power and identity. Bring a ball (if you do not have one, a piece of paper rolled up into a ball will be fine), or prepare another interactive way of engaging learners in the review of the previous lesson.

### Activity A: Gender equality and healthy relationships

Review the readings and the activities, including the one assigned as homework. Reflect on your own life, and the lives of the learners around you to prepare for this discussion.

### Activity B: Understanding each other

This activity is meant to promote empathy between genders, as well as help learners to think through concrete needs related to their relationships. Read through the activity and think of responses from the perspective of your own gender, the opposite gender, as well as others who don't identify as either gender.

Assessment: Lesson 10.3			
Activity	Time	Type of assessment	Form of assessment
Activity A: Gender equality and healthy relationships	30	Educator, Informal Peer, Informal	<ul style="list-style-type: none"> <li>Group discussion/ brainstorm</li> <li>Written task</li> </ul>
Activity B: Understanding each other (for greater equality and healthier relationships)	25	Educator, Informal Peer, Informal	<ul style="list-style-type: none"> <li>Groupwork</li> <li>Presentations</li> </ul>
Homework	5	Educator, Informal Peer, Informal	<ul style="list-style-type: none"> <li>Activity log</li> <li>Survey</li> </ul>
Total	60		

## TEACHING THE LESSON

Begin with a review of the previous lesson. A good way of doing this would be to play *Toss the Ball*. Take a ball - or the paper ball you make - to class, and throw it to a learner who you want to answer a question you will ask. The learners can also toss the ball to each other in the same way, asking and answering questions that relate to the previous lesson. This is a fun way of doing revision. You could use a different game to achieve the same result. End the game by reminding learners that the lesson explored new ideas related to gender and gender identity, sexuality, and power in relationships.

Tell the learners that in this lesson some of these ideas will be applied at a more personal level as we think about what we want in our own relationships, and how we can better support each other.



## ACTIVITIES

### Activity A: Gender equality and healthy relationships

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

1. Ask learners to write down what the term means to them. Write down key words on to the board. Then ask for a volunteer to read this description of a United Nations (UN) Sustainable Development Goal:

*Gender equality is not only a fundamental human right, but a necessary foundation for a peaceful, prosperous and sustainable world. Providing women and girls with equal access to education, health care, decent work, and representation in political and economic decision making processes will fuel sustainable economies and benefit societies and humanity at large.<sup>14</sup>*

<sup>14</sup> <http://www.un.org/sustainabledevelopment/gender-equality/>

### NOTE TO THE EDUCATOR

Learners will provide their own interpretation of the quote and using their own examples of relationships explain where there is gender equality. They may include inequality in relationships that are broader than romantic relationships like relationships in the work place where men are treated differently to women or paid differently, more sport codes for boys at school than for girls, society's expectation that boys take initiative in starting love relationships – boys must ask girls out, etc.

The purpose of the activity is to get learners to say what they would want to see in a more equal relationship

2. Ask the learners to turn to the person sitting next to them and ask what they think a world with gender equality and without gender-based violence would look like. Ask them to think about everyone who would benefit from living in a world like that. Ask them to complete the statement in the space provided in **Worksheet 10.3.1: Gender equality – what it means to me**. Ask one or two volunteers to read their descriptions aloud to the class. Tell them they can add to their descriptions throughout the lesson.
3. Refer your learners to the exercise **Worksheet 10.3.2: Thinking about gender equality and romantic relationships**. Ask learners to form small groups. Explain that the groups will analyse each specific protective needs. This will be done by looking at relationships where there is gender equality and relationships where there is less gender equality. Assign two rows on the worksheet for each group and allow enough time for them to discuss and complete their portion of the table. Each group will then share their responses with the class. Learners should complete the rest of the table as they listen to each other's ideas.

### NOTE TO THE EDUCATOR

Be sure the discussion includes the concept:

People should treat each other respectfully, fairly and equally regardless of their gender or gender identity (this includes people who are transgender).

4. Conclude this activity by highlighting that if we want to have healthier relationships and less unintended pregnancy, HIV and intimate partner violence, we have to look at new ways of behaving and treating each other in our romantic and sexual relationships. Relationships with more equality, respect and sharing are happier and healthier.

### Activity B: Understanding each other

**Introduction:** The aim of this exercise is to help each other to appreciate the challenges others experience in relation to gender, and explore ways to be more supportive of each other.

1. Ask learners what the English expression *to put oneself in someone else's shoes* means. We want learners to think about how they would feel if they were to experience what someone else is made to experience, or how they would feel if the same thing was done to them. Explain that feeling empathy is to understand or appreciate what another person or group experiences or is experiencing as if it was done to them.

By putting ourselves in each other's shoes, we will now explore what we need from each other in order to have greater equality and healthier romantic relationships. Consider the earlier discussion about equal and unequal relationships.

2. Divide the class into two groups of girls, and two groups of boys (depending on the number of learners in the class, there may be more groups). Assign one question to each group according to the gender indicated. Give each group about five minutes to brainstorm their ideas.

### WORKSHEET 10.3.3: Whose perspective?

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

3. When they have had sufficient time to communicate their ideas, each group should be prepared to share their thinking with the rest of the class.
4. Wrap up the activity by noting that everyone has had an opportunity to consider what is needed for healthier relationships, and what our partners need from each of us.



## CONSOLIDATION

Ask the learners to reinforce their learning by considering the key points of the lesson as well as the core messages below.

### Core messages:

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



## HOMEWORK

### Assignment: Conduct a survey

The survey for this homework assignment 1 covers topics from the three lessons that have just been completed (**SLPs 10.1, 10.2 and 10.3**). Review the survey with the learners and guide them to first fill in their own views as Person 1 on the survey form. Note that the learners should have fun doing this exercise and enjoy talking to other people about their views on masculinity and femininity.



## ASSESSMENT

1. Use the questions and group presentations in Activities A and B as assessment tasks. Ask learners to share their responses to the questions after their group discussions.
2. The homework assignment will be done as an individual task first, and then discussed in groups; Use the peer-assessment method to check responses on the survey.



## RESOURCES

### WORKSHEET 10.3.1: Gender equality – what it means to me

**Gender equality is not only a fundamental human right, but a necessary foundation for a peaceful, prosperous and sustainable world. Providing women and girls with equal access to education, health care, decent work, and representation in political and economic decision-making processes will fuel sustainable economies and benefit societies and humanity at large.<sup>15</sup>**

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

<sup>15</sup> <http://www.un.org/sustainabledevelopment/gender-equality/>

**In a relationship with gender equality...**


---



---



---



---



---



---



---



---

**Why is this important to you?**


---



---



---



---



---



---



---



---

**WORKSHEET 10.3.2: Thinking about gender equality in romantic relationships**

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

<b>Sexual and reproductive health action</b>	<b>What happens in a relationship with little or no gender equality?</b>	<b>What happens in a relationship with more gender equality?</b>
1. Choose if, and when, to have sex and when not to		
2. Use my right to say “no” and the responsibility to respect the right of others to say “no” to sexual attention at any time and in any situation		
3. To protect myself and others, I need to be honest and communicate well in sexual relationships		

Sexual and reproductive health action	What happens in a relationship with little or no gender equality?	What happens in a relationship with more gender equality?
4. Use a condom every time my partner and I choose to have sex		
5. Use a method of contraception to prevent pregnancy		
6. Get tested for HIV and share results with my partner		
7. Get treatment for both partners for a Sexually Transmitted Infections (STIs)		
8. Live positively with HIV		
9. Resist sexual and other intimate partner violence		

### WORKSHEET 10.3.3: Whose perspective?

**Instructions:** In groups, work to complete the question your group has been assigned. Each group will have about five minutes to brainstorm ideas.

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

## HOMEWORK

**Homework assignment:** Learning about attitudes through a survey

**Instructions:** What do you think?

Fill in your own views for Person 1

Then ask two other people to answer the questions, and fill in for Person 2 and Person 3.

When your form is complete, make notes of your findings at the end.



Survey on views about masculinity, femininity, gender roles and responsibilities									
Characteristics	Mostly men and boys			Mostly women and girls			Both		
Who is usually:	Person 1	Person 2	Person 3	Person 1	Person 2	Person 3	Person 1	Person 2	Person 3
1. compassionate and caring									
2. assertive									
3. protective									
4. the one to show sad feelings									
5. the one to show happy feelings									
6. nurturing									
7. the one to initiate a romantic relationship									
8. takes responsibility for using a condom for all sex									
9. able to cook meals									
10. able to change nappies									



Survey on views about masculinity, femininity, gender roles and responsibilities								
Characteristics	Mostly men and boys			Mostly women and girls			Both	
11. able to play soccer								
12. able to play netball								
13. resolves conflict peacefully								
Write a short note about what you discovered from doing the survey:								



## GLOSSARY

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

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

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

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

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

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

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

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

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



## Lesson 10.4

Social and environmental  
justice: we can make a  
difference

Lesson 10.4	Social and environmental justice: we can make a difference
Grade	10
Term	2
Weeks	4-7
CAPS Topic(s)	<b>Social and environmental responsibility</b>
CAPS Subtopic(s)	<ul style="list-style-type: none"> <li>Contemporary social issues that impact negatively on local and global communities:               <ul style="list-style-type: none"> <li>Concepts: <b>social justice</b> and <b>environmental justice</b></li> <li><b>Social issues: poverty, food security, violence, HIV and AIDS</b>, safety, unequal access to basic resources, lack of basic services (health services)</li> <li>Harmful effects of these issues on personal and community health</li> </ul> </li> </ul>
Link to other subtopics in CAPS	<b>Social and environmental responsibility, Term 2, Weeks 4-7</b> <ul style="list-style-type: none"> <li>Social, constructive and critical thinking skills necessary to participate in civic life:               <ul style="list-style-type: none"> <li>Social responsibilities including the knowledge and skills to make informed decisions and take appropriate action</li> <li>Own contribution to these services, projects and organisations</li> </ul> </li> </ul>
This lesson will deal with the following:	<ul style="list-style-type: none"> <li>Identify HIV and AIDS as a contemporary social justice issue that has local and global impacts</li> <li>Identify ways in which HIV and AIDS impacts negatively on well-being – and identify what needs to be done to turn this around</li> <li>Recognise that those of us living with HIV and AIDS can live fulfilling lives if there is no stigma and we have proper treatment, care and support</li> <li>Identify how the following factors affect those of us living with HIV and AIDS:               <ul style="list-style-type: none"> <li>poverty</li> <li>food security</li> <li>violence</li> <li>safety</li> <li>unequal access to basic resources</li> <li>lack of health services</li> </ul> </li> </ul>
Concepts	<ul style="list-style-type: none"> <li>critical thinking</li> <li>empathy/empathetic</li> <li><i>go-to people</i> (peers with positive influence and trusted adults)</li> <li>poverty</li> <li>stigma; self-stigma</li> <li>social justice</li> </ul>

<b>Teaching methodologies</b>	<ul style="list-style-type: none"> <li>• Class discussion/brainstorm</li> <li>• Knowledge input</li> <li>• Group discussion</li> <li>• Story analysis</li> <li>• Critical thinking</li> <li>• Tool application</li> </ul>
<b>Time</b>	60 minutes

## BRIEF LESSON SUMMARY

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

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

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

Finally, learners will gain a critical thinking tool to apply to their sexual and reproductive health (SRH) in order to promote their own well-being and encourage good decision-making around their SRH.

## KEY POINTS

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



## RESOURCES/MATERIALS

- Coloured pencils and different coloured pens
- Articles and pictures of/about HIV and SRH



## PREPARATION FOR THE LESSON

Before you teach this lesson, talk to people, read up on the subject, and follow the news to deepen your understanding of the social issues that impact those of us living with HIV. Keep in touch with new developments regarding testing, counselling, treatment, care and support. Find out about the organisations offering help, and other help offered in your community, including support groups and youth-friendly clinics. Explore the possibility of having community health workers or other outreach workers come to your school to talk to your learners about the services offered to adolescents.

The activities include readings. Consider asking learners to read through the reading activities beforehand so that there is more time for discussion.

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

Read through the lesson plan and review the reading materials. Think about some of the linkages between population growth and the environment and the way social justice and environmental justice relate to sexual and reproductive health. Also think about some of the causes of stigma, as well as the consequences that you see around you.

### **Activity B: Affected by HIV and AIDS: a teenager's story**

- Prepare examples of both local and global social justice and environmental justice issues.
- Find newspaper and magazine articles and photographs that show social and environmental justice issues.
- Read the story carefully to identify the challenges facing the person in the story who is living with HIV.
- Make sure you understand and can explain with examples about stigma and self-stigma.

### **Activity C: Applying critical thinking**

- Read through the activity so that you are prepared to follow the recommended process to get learners to think critically about issues related to social and environmental justice.
- Learners may not be able to identify what social and environment justice issues are. Find current newspaper or magazine articles they may use as reference material as they do this activity.

Assessment: Lesson 10.4			
Activity	Time	Type of assessment	Form of assessment
Activity A: Getting the picture about social justice and environmental justice	15	Educator, Informal	<ul style="list-style-type: none"> <li>Brainstorm</li> <li>Visual presentation: Interpretation of visuals</li> <li>Group discussion</li> </ul>
Activity B: Affected by HIV and AIDS: a teenager's story	20	Educator, Informal Peer, Informal	<ul style="list-style-type: none"> <li>Pair work</li> <li>Written task</li> </ul>
Activity C: Applying critical thinking NB this may be completed as a homework assignment	25	Educator, Informal	<ul style="list-style-type: none"> <li>Mind map</li> <li>Written task</li> </ul>
Total	60		

## TEACHING THE LESSON

Begin with a review of the previous lesson. Tell learners that this lesson will expand beyond gender equality to explore the relationship between SRH and social and environmental rights. The class will investigate the meaning of social justice and environmental justice.



## ACTIVITIES

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

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



1. Ask the learners to turn to **Worksheet 10.4.1: What are social justice and environmental justice?** Ask them to look at the first illustration and answer questions: a – d in order to define social justice and environmental justice. Give them some time to work alone or with the person next to them and then discuss their responses in the large group. Use the information in **Worksheet 10.4.1** to supplement your own knowledge on the subject in order to guide the discussion.
2. Refer learners to the definitions of social justice and environmental justice in their glossary, and answer any questions.
3. Ask learners to look at the second illustration in the worksheet and answer questions on the link between social justice and environmental justice and sexual and reproductive health. Again, use the information in **Worksheet 10.4.1** to fill in any gaps. Ask learners how (a) poverty, (b) food security, (c) unequal access to basic resources, and (d) lack of basic services (like clean water and electricity), can affect their SRH as adolescents.
4. Finish the activity by asking them to answer the last question on the worksheet regarding local efforts to address social and environmental issues.
5. Introduce the next activity, which is to read a story that shows how HIV and AIDS is a social justice issue.

#### **Activity B: Affected by HIV and AIDS – a teenager's story**

**Introduction:** This activity explores the meaning of stigma and how to prevent it, and uses a story about a boy born HIV positive, to help learners better understand stigma, its impact, and what can be done to stop it.

1. Remind learners that in previous lessons, the concepts of power, inequality and equality were explored. The class learnt how important it is to treat each other with respect and as equals and to not stigmatise people for being different from us in some way.
2. Ask learners to explain this statement: *Stigma is a product of fear*. They may do this by using examples to demonstrate the meaning of the statement □ ensure that they include the term: *ignorance*. Encourage discussion by asking how they understand the relationship between ignorance and stigma.
3. Ask the class to identify groups of people, and/or the types of problems for which people are often stigmatised. What are some of the causes of stigma?



## NOTE TO THE EDUCATOR

Learners will list a number of examples of issues that may cause others to feel that they are victims of stigma. Examples may be linked to SRH issues or learners may raise examples of stigma that are not linked to SRH. For example:

- SRH-related stigma: HIV and AIDS, teen pregnancy, non-conforming sexual and gender identity, living with a family member who is infected.
- Non SRH-related stigma: Mental illness, having a family member in prison, being from an ethnic or religious minority, poverty, unemployed parents.

4. Refer learners to **Reading 10.4.1: What stigma means and using our power positively to prevent it.** Read the reading aloud in class and discuss.
5. Remind learners that having correct information is the first step toward combatting stigma, which thrives on ignorance. Refer learners to the **Reading 10.4.2. HIV: Know the facts and prevent stigma.** Explain that there will not be time to discuss the details during this lesson, but it is critical that people understand this basic information so that they can be of support to those affected by HIV and AIDS.
6. Ask learners to turn to **Reading: 10.4.3: Affected by HIV and AIDS – a teenager's story**<sup>16</sup> in their learner books. While they are following along, they should make notes of anything they think has to do with (a) social or environmental justice, or (b) stigma and self-stigma, or (c) support and care.
7. Ask learners the following questions:
  - How did the story make you feel?
  - What is *self-stigma*? Give examples.
  - Why does the cousin in the story stigmatise himself? How can he build his self-esteem?
  - Which support structure or support network assists the cousin when he feels depressed or angry? (Learners should identify that the story-teller and her family are the people who love and accept him.) Then ask learners to list their own *go-to* people in their notebooks.
8. Ask learners to identify challenges people living with HIV and AIDS may face, based on this story, or others that they know.
9. Ask learners to identify positive experiences they know of locally or globally that support people with HIV and AIDS. For example, their community may be very caring and supportive of those living with HIV. This is how it should be. Perhaps there are good medical services and organisations that work against stigma?
10. Finish the discussion on the story by asking why it is important for people to know their HIV status. What are the barriers to testing? What can help us test? Are there people or organisations that can help us decide about testing?

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

<sup>16</sup> Soul City Institute for Social Justice. RISE issue eleven.

### Activity C: Applying critical thinking

**Introduction:** This activity uses critical thinking skills to enable learners to analyse social and environmental issues and identify actions that can be taken. It follows three main stages in which the learner asks questions in order to reach a satisfactory conclusion. The questions are: What are the facts? What are the consequences? What should happen?

1. Explain to learners that the process they will be introduced to will help them think critically as they analyse social and environmental issues and identify actions we can take to improve the situation.

#### NOTE TO THE EDUCATOR

##### Encourage critical thinking as a habit

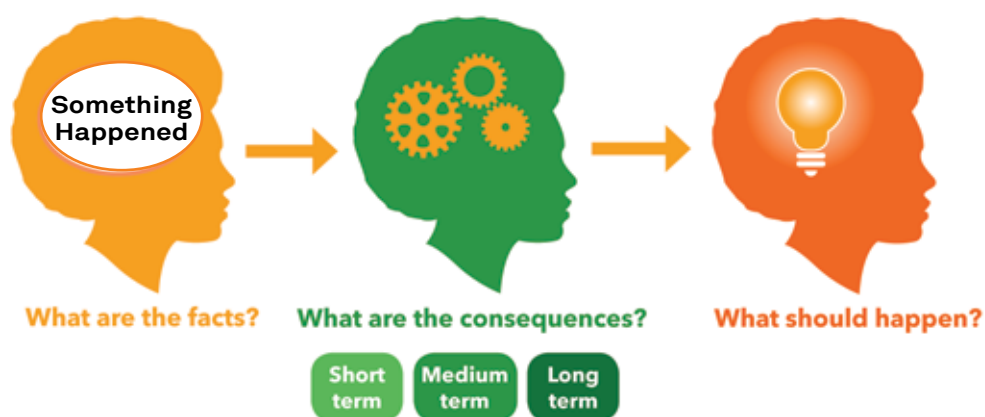
Critical thinking needs to be a habit. It builds our intellectual capacity and our empathy, and makes us more engaged and interesting people. See the glossary for definitions of 'empathy' and 'empathetic'. These are the opposite of judging and being judgmental.

In this activity, learners apply critical thinking to HIV and AIDS, which affects millions of South Africans and millions of people globally.

The mind map is a thinking tool that your learners are familiar with. They will use it to look at social issues such as living with HIV. It helps learners to not label people. A person living with HIV can also be a sportsperson, a choir member, a single parent, a lover. Being HIV positive is only one part of that person's identity.




When your learners apply critical thinking to social justice issues, it helps them change negative behaviour, such as stigmatising, victimising or bullying. It may motivate them to become active citizens.

2. Refer learners to **Illustration 10.4.1: Critical thinking for social and environmental justice**<sup>17</sup>



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

<sup>17</sup> Adapted from [http://edtechreview.in/images/what\\_is\\_critical\\_thinking.jpg](http://edtechreview.in/images/what_is_critical_thinking.jpg).

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

3. Ask your class for some examples of SRH and social justice issues they feel strongly about as adolescents. It could be that there is no youth- friendly clinic nearby, or it could be teenage pregnancy, or accessing condoms without being judged. Write them on the board and then ask learners to form groups around each topic. They must apply their topic to the critical thinking diagram in their Learner Book in the table provided. Refer learners to the note below the table.

### NOTE TO THE EDUCATOR

Go through the first example and set the rest as an individual, pair, or group assignment for homework. You could also link with other subject educators and do this work as an integrated assignment:

- Languages: Writing short paragraphs; structuring an argument; expressing thoughts critically.
- Natural Sciences: Environmental justice; expression of life views.

4. Invite groups to share their thoughts about the critical thinking tool with the class and discuss how they could use it in the future to think through a situation or problem.



### CONSOLIDATION

In consolidating this lesson, ask your learners to say why they think it is important to think critically. What SRH issues do they need to think critically about for their own and their peers' well-being? What can they do to reduce stigma around SRH challenges? And why, coming back to the story, is it important to know our HIV status? Wrap up by going through the key points listed in the section before the activities begin, and consider the core messages below.

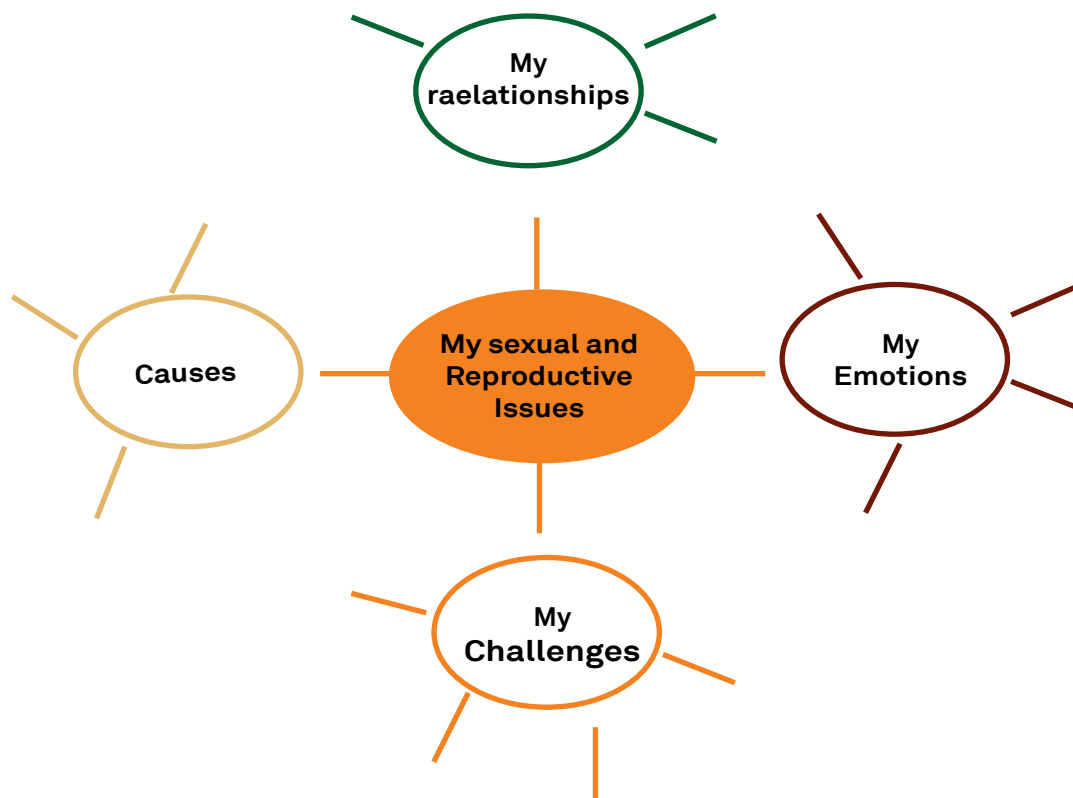
#### Core messages

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



### HOMEWORK

1. Complete any remaining work from Activity C. Think about social justice and the issues you feel passionate about, and write those in your Learner Books.
2. Learners complete the mind map for themselves reflecting on one example of what they have identified as SRH issues. Ask learners to map that issue in relation to their emotions, what causes the issue, how it affects their relationships and what their greatest challenge is related to the issue.



## ASSESSMENT

1. **Individual activity to be done at home.** This activity is not part of the teaching time for this lesson. Learner may want to discuss their responses with a peer.

Use **Activity C: Critical thinking for social and environmental justice.** Ask learners to select an example of a social or environmental issue they consider important and complete the critical thinking tool.

Learners should do self-assessment on their responses. Many learners may consider their responses to be personal and may not want to share them.



## RESOURCES

### WORKSHEET 10.4.1: What are social justice and environmental justice?



#### Instructions:

- What do the pictures in the illustration above represent and what are the linkages between them?
- Using the illustration as a prompt, how can social and environmental justice be defined?
- What types of social and environmental justice issues are there in your community? What other pictures might you add to the illustration above to represent these issues?
- What are the links between social and environmental justice?



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



## WORKSHEET 10.4.1: What are social and environmental justice?

### Answer sheet



What do the pictures in the illustration above represent and what are the linkages between them?

#### Possible answers:

- HIV and AIDS, environment, water and sanitation, healthcare.
- Access to quality healthcare, a clean and safe environment and to safe water and sanitation all influence the prevention and treatment of HIV and AIDS.
- The lack of access to resources and opportunities related to education, healthcare, clean water, employment, housing, etc. negatively affect the prevention and treatment of HIV and AIDS.

Using the illustration as a prompt, how can social and environmental justice be defined?

#### Possible answers:

- **Social justice:** Equal distribution of resources and opportunities regardless of a person's sex, sexual identity, race, ethnicity, religion, age, economic or health status. We have social justice when people are able to fulfil their basic human rights as stated in the Bill of Rights in the Constitution. **Environmental justice:** Environmental justice means that everyone has the right to live in an environment that is safe and good for their health. Examples include: clean and safe water and sanitation; air, land and waterways free of pollution and toxic materials.



What types of social and environmental justice issues are there in your community? What other pictures might you add to the illustration above to represent these issues?

**Possible answers:**

- Poverty; overpopulation; chronic health issues due to environment and lack of money/access to healthcare, drought and water shortages, food insecurity, violence and crime, gender-based violence and/or racism.

## What are the links between social and environmental justice?

**Possible answers:**

- Social and environmental justice are interconnected. Issues related to the environment have an impact on the people who live there. The unequal distribution of wealth prevents many people from being able to deal with the impact of environmental problems, making their situation worse. For example, extreme flooding in an area can wipe out crops and housing. Those who do not have the means to rebuild can end up living in unhealthy housing and be susceptible to more diseases such as malaria and cholera. Also, social justice issues can affect the environment. For example, people who are living in poverty might not have the means or awareness of how to take care of the environment. To meet their basic needs, they might do things that harm the environment and the health of people living in the environment, such as improper dumping of refuse.



How do social and environmental justice relate to sexual and reproductive health? Use the illustration above to help you come up with ideas.

**Possible answers:**

- Social and environmental justice issues affect sexual and reproductive health decisions and actions. People without the means or access to healthcare facilities or to information on SRH are at a greater risk for unwanted pregnancies, HIV and other STIs, poor pre and postnatal care, etc. People, regardless of their sex, gender, economic status, religion, etc. should be able to make their own choices about their sexual and reproductive health.

**NOTE TO THE EDUCATOR**

Learners may raise many other valid inputs in their discussions and in their feedback to each other. Encourage learners to engage positively and have an open mind towards different views that may emerge from their discussions.

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

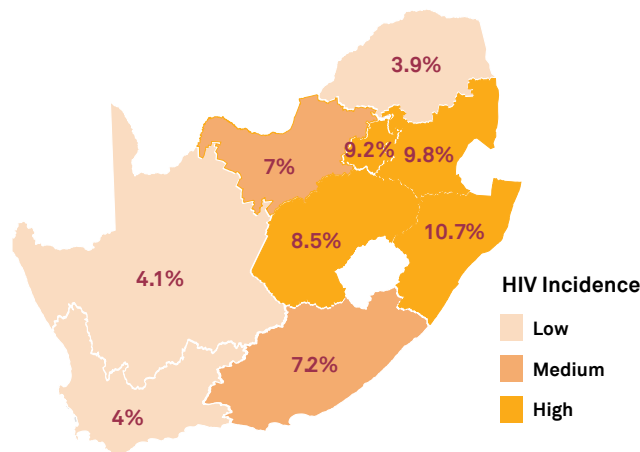
**Stigma:** Stigma is when society, or a large number of people, treats a particular group of people in a negative way because of how they look, a health condition, their living circumstance, an experience they have had, their religious or political beliefs, or for any number of reasons that they are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

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

**READING 10.4.2: HIV: know the facts and prevent stigma HIV affects us all**

The Human Immunodeficiency Virus (HIV) is a virus that is transmitted through unsafe sex (sex without correctly putting on a condom every time you have sex with a partner). It can also be acquired by a baby when their mother is living with HIV and not on antiretroviral treatment. Drug users can get HIV when they share needles. Experts estimate that nearly 266,618 people were newly infected with HIV in South Africa in 2016<sup>18</sup>.

<sup>18</sup> Statistics South Africa [StatsSA], Mid-year estimates, 2016. Statistical Release P0302, Statistics, South Africa: Pretoria



Source: SANAC, accessed January 18, 2019

Figure 3: HIV Prevalence by Province 2016

Although everyone who is having unsafe sex is at risk, girls and young women are getting infected at higher rates.<sup>19</sup>

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

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

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

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

Acquired Immune Deficiency Syndrome (AIDS) is not a virus. It is a combination of common and mostly curable illnesses the human body can't fight off in someone living with HIV who has not gone onto antiretroviral treatment (ART).

<sup>19</sup> Shisana, O., Rehle, T., Simbayi, L.C., Zuma, K., Jooste, S., Zungu, N., Labadarios, D., and Onoya, D. (2014). South African National HIV Prevalence, Incidence and Behaviour Survey, 2012. Cape Town, South Africa: HSRC Press.

### READING 10.4.3: Affected by HIV and AIDS – a teenager's story<sup>20</sup>

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

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



#### Anger

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

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

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

#### Love

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

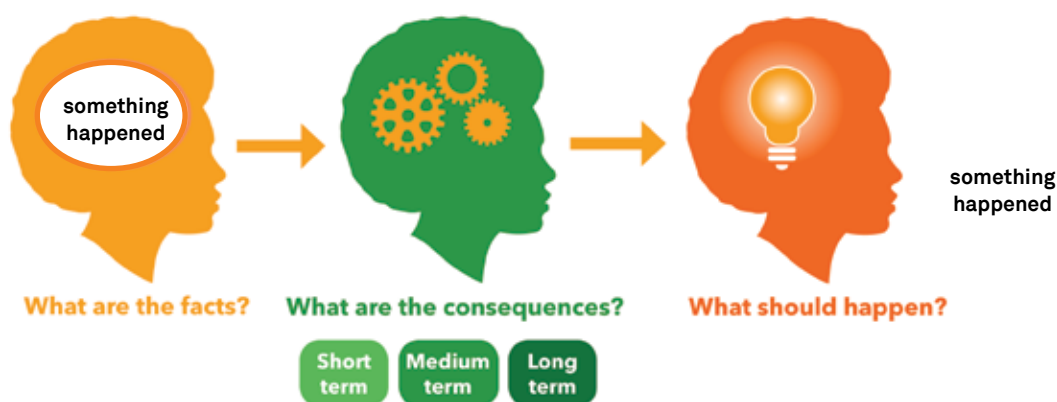
I often wish I had money so that I could pay for whatever it takes to treat them. That would make me happy.

<sup>20</sup> Soul City Institute for Social Justice. Rise magazine, issue eleven

## Judgement

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

### ILLUSTRATION 10.4.1: Critical thinking for social and environmental justice<sup>21</sup>



## WORKSHEET 10.4.2. Critical social and environmental issues

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

<sup>21</sup> Adapted from [http://edtechreview.in/images/what\\_is\\_critical\\_thinking.jpg](http://edtechreview.in/images/what_is_critical_thinking.jpg)

<p><b>Stage 1</b></p> 	<p>The speech bubble represents something that happened, or was said (the facts).</p> <p>What happened?</p>
<p><b>Stage 2</b></p> 	<p>The cogs represent our brain asking critical thinking questions like:</p> <p>What are the consequences?</p> <p>Answer this by looking at: short-, medium- and long-term consequences. Ask the main critical thinking questions: The 5 Ws and the H – Who, What, When, Why, Where and How</p>
<p><b>Stage 3</b></p> 	<p>These questions should lead you to a <b>light bulb</b> moment where you think in an enlightened way about what can, or needs to be done, about the situation.</p>



## GLOSSARY

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

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

**Environmental justice:** "All people and communities have the right to equal environmental protection under the law, and the right to live, work and play in communities that are safe, healthy and free of life-threatening conditions."<sup>22</sup> Examples include: clean and safe water and sanitation; air, land and waterways free of pollution and toxic materials.

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

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

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

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

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



## **Lesson 10.5**

My changing life roles and life goals



Lesson 10.5	My changing life roles and life goals
Grade	10
Term	3
Weeks	1-5
CAPS Topic(s)	Development of the self in society
CAPS Subtopic(s)	<ul style="list-style-type: none"> <li>• <b>Life roles:</b> child, student, adult, role in family, partner, mother, father, grandparent, breadwinner, employee, employer, leader and follower               <ul style="list-style-type: none"> <li>– Evolving nature of and responsibilities inherent in each role; how roles change and affect relationships</li> <li>– Handling each role effectively: influence of society and culture</li> <li>– Changes associated with development towards adulthood: adolescence to adulthood</li> </ul> </li> </ul>
Link to other subtopics in CAPS	<ul style="list-style-type: none"> <li>• Strategies to enhance self-awareness, self-esteem and self-development: factors influencing self-awareness and self-esteem including media               <ul style="list-style-type: none"> <li>– Strategies to build confidence in self and others: communication, successful completion of tasks or projects, participation in community organisation or life, making good decisions, and affirmation of others</li> </ul> </li> <li>• Physical changes: hormonal, increased growth rates, bodily proportions, secondary sex/gender characteristics, primary changes in the body (menstruation, ovulation and seed formation), and skin problems               <ul style="list-style-type: none"> <li>– Emotional changes: maturing personality, depth and control of emotions, feelings of insecurity, changing needs, interests, feelings, beliefs, values and sexual interest</li> </ul> </li> </ul>
This lesson will deal with the following:	<ul style="list-style-type: none"> <li>• Identify our different roles in life since birth and into the future, and reflect on each role's responsibilities</li> <li>• Reflect on how our changing roles affect our relationships – with ourselves and with others</li> <li>• Strategies to manage the influence of society and culture, with a particular emphasis on romantic/intimate relationships</li> </ul>
Concepts	<ul style="list-style-type: none"> <li>• abstinence (from sex)</li> <li>• adolescence</li> <li>• positive and negative pressures</li> <li>• romantic/intimate relationships</li> </ul>
Teaching methodologies	<ul style="list-style-type: none"> <li>• Individual work</li> <li>• Speed interviews in pairs</li> <li>• Knowledge review</li> <li>• Small group work</li> <li>• Class discussion</li> </ul>
Time	60 minutes

## BRIEF LESSON SUMMARY

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

## KEY POINTS

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



## RESOURCES/MATERIALS

- Chalkboard and chalk
- All necessary notes or activities will be in the Learner Book



## PREPARATION FOR THE LESSON

Read through this lesson, its activities and homework assignments, so that you are prepared to lead discussions about life roles and responsibilities and the role that sexual responsibility plays in achieving your life goals.

Use the illustrations to get learners to give their own interpretation of what the different scenarios are presenting. Learners may have varying interpretations based on their own experiences and perspectives.

### Activity A: Reflecting on your changing roles

Prepare examples that will be relevant for your learners. If you can, draw part of the timeline on the board before the lesson.

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

Learners are required to do a brainstorm and then to show their ideas in a mind map. You may want to prepare an example of a mind map showing concepts and links to illustrate what they are required to do in their own mind maps.

Assessment : Lesson 10.5			
Activity	Time	Type of assessment	Form of assessment
Activity A: Reflecting on your changing roles	30	Educator, Informal	<ul style="list-style-type: none"> <li>Individual work</li> <li>Group discussion</li> <li>Pair work – Interviews</li> <li>Written task</li> </ul>
Activity B: How my changing roles may affect my relationships	30	Educator, Informal  Peer, Informal	<ul style="list-style-type: none"> <li>Written task</li> <li>Groupwork</li> <li>Brainstorm</li> <li>Mind map</li> </ul>
Homework			<ul style="list-style-type: none"> <li>Written task-</li> <li>Practical task – leaflet design</li> </ul>
TIME	60		

## TEACHING THE LESSON



### ACTIVITIES

#### Activity A: Reflecting on your changing roles

- Begin by telling learners that as we grow up, our roles in life evolve. For each new role there are different responsibilities. The first activity of the lesson will help them think about what their roles and responsibilities are now and what they will be in the future. Tell learners that they will begin with some pair work to help them understand how our roles change over time. Ask the learners to get into pairs for the next exercise and to refer to **Worksheet 10.5.1: Speed interviews**.
  - Use the questions in **Worksheet 10.5.1: Speed interviews** for speed interviews in pairs.
  - Take turns to be the interviewer or interviewee.
  - Include more life roles or relationships with the responsibilities that go with them.
- After the speed interviews ask a few learners to reflect on new insights about the nature and responsibilities in each life role, now and in the future.

3. Have a discussion using these questions, and add any more that you consider appropriate to your learners' lives:
  - a. Are there any life roles that you have discussed that you would like for yourself?
  - b. Are there any life roles that you have discussed that you may never want for yourself?
  - c. Do you feel that your parents or other adults in your life put pressure on you to take on certain life roles or responsibilities?
  - d. What other types of pressure do you experience in your life now (for example, from friends, your romantic partner, or from school)? Are these pressures positive or negative?
  - e. If you had to become a parent now, how would that change your life? What new roles and responsibilities would it mean for you? Would it be positive or negative?
  - f. How can you prevent an unintended pregnancy that may stand in the way of you achieving your full potential and your life goals and dreams?
4. Explain to the class that it is important to always remember that they have the right to abstain from sex no matter what anyone else says, especially if they have not considered their own readiness for sex and the emotions and responsibilities that come with it. If they decide they want to enter into a romantic relationship, they should already know the responsibilities that are part of it (for example, to treat each other with respect). As learners begin to take on the role of partner with another person, they should prepare to make decisions about their life, including their sexual life, with their partner. It will be important for them to honour their partner's thoughts, opinions and hopes and to expect their partner to do the same for them.

### NOTE TO THE EDUCATOR

#### Review of contraception information

It is a good time to remind learners that as they grow older and begin long-term relationships with partners, it is important to discuss contraception. Both partners are equally responsible for preventing pregnancy, HIV and STIs. It is important to discuss these issues with your partner, and this includes if and when you would like to start a family. Explain that this will be discussed again when homework is given. **Reading 10.5.1: Information on Contraception** in the Learner Books will provide more details on family planning options.

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

1. Refer your learners to **Illustration 10.5.1: My changing roles mind map** in their Learner Books. Start off by brainstorming some ideas about how they might write or draw their own mind map. Say that they are free to include drawings, illustrations or to decorate the page so it is unique to them and to their lives. They can use photos and images of themselves or others for their mind map.
2. Give learners a few minutes to complete their mind map and then ask them to reflect in pairs on what they have created. Ask one or two volunteers to share their mind maps. When the volunteers have shared, ask the class if any of the volunteers' experiences sounded similar to their own. Discuss any common experiences or differences that others may experience.

## NOTE TO THE EDUCATOR

### Start conversations at home

Encourage learners to share their experiences with family members or with those they live with, and discuss the exercise as a way of starting conversations about their journey and changing relationships as they become young adults. Perhaps their parents, older siblings, or other caregivers can discuss how their life roles and responsibilities have changed and what caused that change.

3. In this activity, tell the learners that they will explore how to handle a romantic or sexual relationship well, taking into account society's influences, the influences of traditional gender norms, and the influences of our cultures. We will always face both encouragement and pressures. Some pressures are good (for example, to balance your life with sport or another type of exercise, have a social life with friends, spend time with family and focusing on doing your best at school). Other pressures may be difficult to deal with or unwanted. You need to maintain good self-confidence to do what feels right for you, and avoid those pressures that are unhelpful or even harmful. We are all unique and different.
4. Refer learners to the image below **Good Pressure, Bad Pressure**, and in their Learner Books. Ask learners:
  - Do you relate to any of the scenes in the drawing? If yes, which?
  - Are there scenes you would put in if you were the illustrator drawing your life's pressures, especially in romantic or sexual relationships? If yes, what scenes?



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

### **NOTE TO THE EDUCATOR**

#### **Messages around relationships**

##### **If these points don't come up, weave them into your class discussion:**

- Some of us may be involved in romantic relationships in which we don't have sex.
- Some of us may be involved in sexual relationships.
- Some of us may have been involved in romantic and sexual relationships but are not now.
- Some of us might not be in a relationship and don't feel any pressure to be in one. A romantic relationship is just one part of your life.
- Don't allow people to pressure you to be in a relationship, or to have sex. Even if you have been sexually active before, it is your choice if you want to return to abstinence.
- You must be the one who decides if, and when, to have sex.
- It is your life and you need to be in control of it.
- Condoms are clever. If you use them correctly, every time you have sex and with every partner, you can prevent unintended pregnancy and acquiring STIs, including HIV.

6. Remind learners that as we grow and our roles change, we have new responsibilities and pressures to deal with along the way. Some may get involved in relationships with other people and some may not. For many partners, family planning is an important thing to discuss as partners share the responsibility to prevent pregnancy and remain protected from STIs, including HIV. Partners have the responsibility to discuss if and when they'll have a baby and the methods of preventing pregnancy until they are ready. The homework assignment will review options for preventing pregnancy and protecting ourselves from STIs.
7. Wrap up the activity by discussing which of the core messages could help learners in situations where they feel pressures.

## NOTE TO THE EDUCATOR

The information on contraception is included to ensure that all learners get accurate, relevant information on available methods of contraception, particularly those who have chosen to have a sexual relationship. This is a time when they are considering their goals in life, and early pregnancy can interfere with that.

Learners will read through the information for themselves. This content is included in Grade 9, but is repeated here since many may not have received the information, and all learners need to refresh their knowledge. As the educator, you can decide to how best to engage the learners in discussion. Remember, not all learners who ask for this information will necessarily already be sexually active. Treat their request for information respectfully, as the information is necessary to help young people to make informed choices. You may also refer them to a youth friendly clinic in your community for more information on contraception and other health services.



## HOMEWORK

Refer learners to **Reading 10.5.1: Information on contraception**. Explain that the information provided is important if they are ready and have chosen to have a safe, protected romantic relationship, and to help them plan for the future. Everyone should read it – even if it does not feel relevant for the learner personally, it will help them to help someone they care about.

The information provides accurate information on different methods of contraception. Remind the learners that if they choose to have sex, they and their partner should remember to practice safer sex (safe from infection as well as pregnancy, and to consider their dual protection needs). That means they should always use a condom correctly every time; refer them to the section that talks about both male and female condoms.



## CONSOLIDATION

In consolidating the lesson, tell your learners you feel confident that they are well prepared to reflect on their roles all through life, and to make good choices for their own and others' well-being. Go through the key points of the lesson and check the core messages.

### Core messages

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



## ASSESSMENT

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

### Contraception is a choice!

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

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

### Test your knowledge

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



## RESOURCES

### WORKSHEET 10.5.1: Speed interviews

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





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

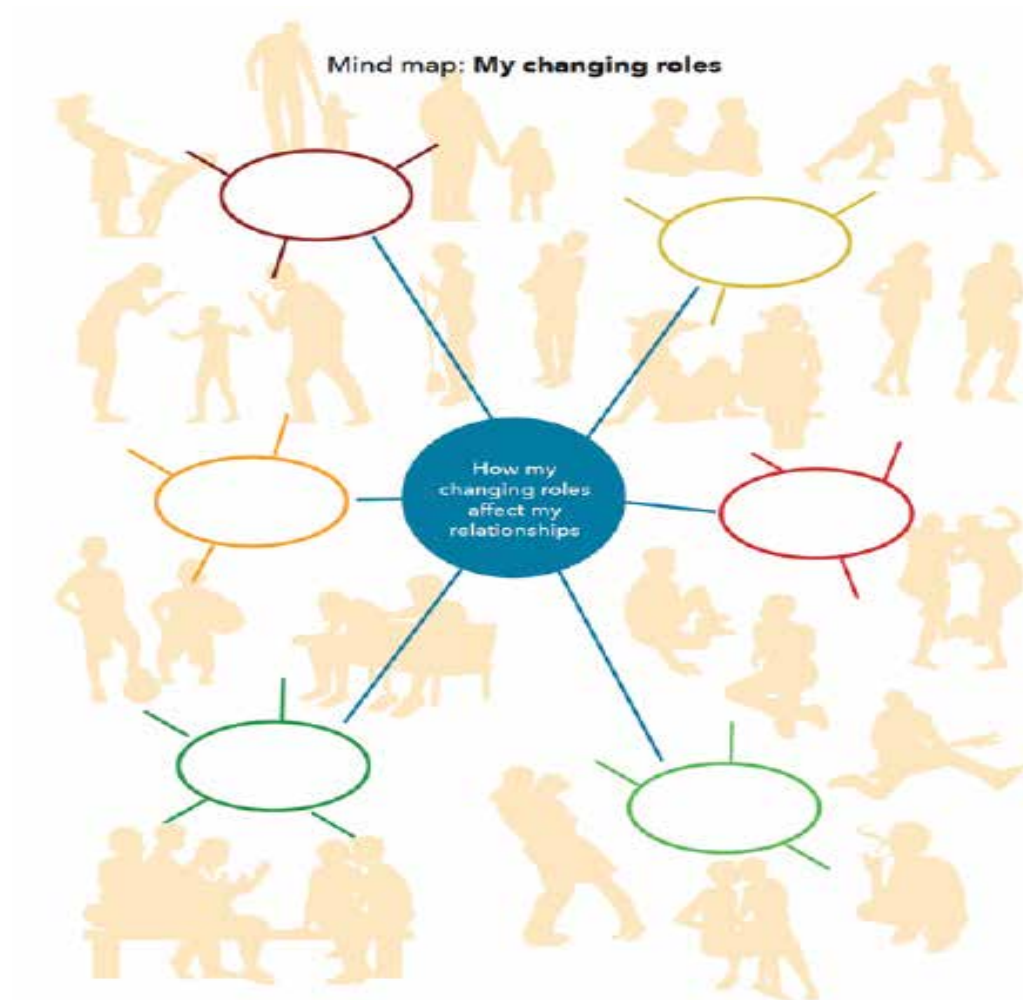
- 1. Get into pairs with someone sitting close to you.
- 2. Use the questions below for speed interviews in pairs.
- 3. Take turns to be the interviewer or interviewee. Use the worksheet to guide you. Feel free to add in more life roles or relationships and the responsibilities that go with them.

Your life roles or relationships	Responsibilities now	Responsibilities in the future
Friend		
Learner/student		
Partner (romantic/intimate/sexual)		
Employer (for example business owner)		
Employee (for example working for a person or a company)		
Breadwinner		

Your life roles or relationships	Responsibilities now	Responsibilities in the future
Parent/caregiver/guardian		
Grandparent		
Other roles I'd like to play (e.g. leader, follower)		

### ILLUSTRATION 10.5.1: My changing roles mind map

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



## READING 10.5.1: Information on contraception

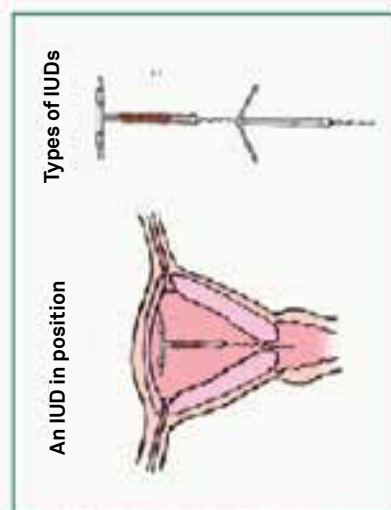
Many of you may consider having children at some point. All young people need to consider whether having children fits in with their lives. It is particularly important to consider your reproductive goals or intentions: Do I want to have children? How soon would I like to have a child? How many children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

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

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

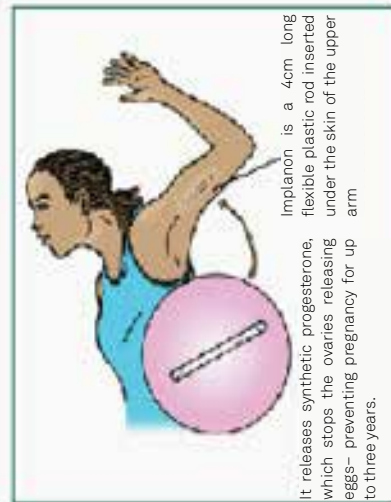
1. Having unprotected sex is likely to result in pregnancy: 9 out of 10 fertile adults will become pregnant as a result of unprotected sex.
2. The SAFEST choice is NOT to have sex: abstinence is the only 100% effective method for preventing pregnancy.
3. If you choose to have sex, the correct use of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

## EDUCATOR RESOURCE 9.2.2: Illustrations of hormonal contraceptives



### THE INTRAUTERINE DEVICE (IUD)

The South African government is now making IUDs AVAILABLE at low or no cost



### THE IMPLANT

Implants are NOT commonly available for low- or no cost in public clinics in South Africa.



### THE PATCH

The patch is NOT available for low- or no cost in clinics in South Africa.



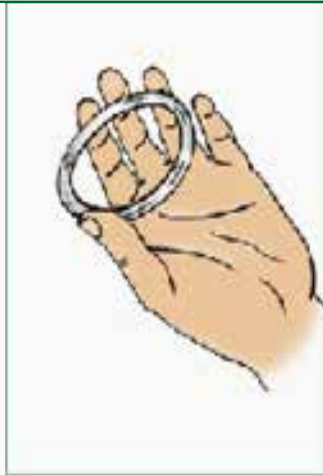
### THE PILL

Birth control pills - generally Microval®, Triphasil® and Bafasil® - are AVAILABLE - often at no cost - in public clinics in South Africa.



### THE INJECTION

The injections Nur Istrate® and Depo Provera® are AVAILABLE - often at low- or no cost - in public clinics in South Africa.



### THE RING

The ring is NOT available for low- or no cost in public clinics in South Africa.

### Contraceptive methods at a glance

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

What is it?	How do you use it?	More information
<p><b>The pill or “birth control pill”</b> comes in a plastic or foil package of 28 pills.</p>	<p>A woman takes one pill, at the same time every day. Once she has finished the entire 1st pack of pills, the woman is protected as long as she continues taking pills daily as directed.</p>	<p>The birth control pill is more than 99% effective at preventing pregnancy if taken every day and if a condom is used as well during the first month of taking the pills (before they've taken full effect).</p> <p>For many women the pill is convenient and allows for spontaneous sex. But to ensure you are safe from infections, always use a condom with the pill.</p> <p>While taking the pill, some women's periods are lighter, shorter and more regular with less cramping. The pill may protect a woman from other problems such as pelvic inflammatory disease and ovarian and endometrial cancer.</p> <p>Three types of birth control pills – Microval®, Triphasil ® and Bafasil ®- are widely available at low- or no cost in clinics and health centres in South Africa.</p>

What is it?	How do you use it?	More information
<p><b>The IUD (Mirena or ParaGard):</b></p> <p>There are two types of intrauterine devices (IUDs). Both are small T-Shaped devices; for example the Mirena is 32mm across and 36mm vertically._</p>	<p>An IUD is inserted into a woman's uterus by a healthcare provider. After insertion no further action is needed until the IUD expires in either five or 12 years.</p>	<p>Mirena® is a hormonal IUD which releases hormones to prevent ovulation. ParaGard® is a copper IUD. Copper produces ions which act like a spermicide, destroying, damaging or inhibiting the movement of sperm so they cannot join with - and fertilise - the egg.</p> <p>IUDs are more than 99% effective at preventing pregnancy. Mirena® (hormonal) provides protection for five years and the ParaGard® (copper) provides protection for 12 years.</p> <p>Some women prefer to use the IUD because after it is inserted they don't have to think about it for several years. It can be removed by a healthcare provider at any time and the user rapidly returns to her previous level of fertility after removal.</p> <p>The ParaGard® IUD can be used as emergency contraception if inserted by a healthcare provider within 120 hours (five days) after unprotected sex. It is 99.9 % effective, even on day five, and can be left in as ongoing birth control for as long as desired.</p> <p>The government is making copper IUDs more available at low- or no cost in clinics and public health centres. IUDs should also be used with condoms to ensure you are safe from infections.</p>

What is it?	How do you use it?	More information
<p><b>The injection</b> is an injectable synthetic hormone</p>	<p>Women are given their first injection during the five days of a normal menstrual period. An additional form of contraception is required for two weeks after this first injection as a precaution (a condom will serve this purpose and protect you from infections). A new injection is required every 2-3 months.</p>	<p>The injection prevents pregnancy in three ways: a) it inhibits ovulation by suppressing hormone levels, b) it inhibits the development of the endometrium, a lining of the uterus that is necessary for an egg to implant in the uterine wall, and c) it contributes to the development of a thick mucus in the cervix that makes it difficult for sperm to enter the uterus.</p> <p>The injection is extremely effective at preventing pregnancy – more than 99.9% - as long as a woman receives her injections on schedule. A woman can use the injection without the knowledge of her partner.</p> <p>Some women have reported modest weight gain, irregular or unpredictable periods, and a decrease in the amount of mineral stored in the bones (a possible risk factor for osteoporosis). A woman should check with her healthcare provider about any side effects or complications that she may experience given her personal health profile.</p> <p>Two types of injections - Nurlstrate® and Depo Provera® are available at low-or no cost in clinics in South Africa.</p>

What is it?	How do you use it?	More information
<p><b>The patch</b> is a thin plastic square that can be worn on the skin of the buttocks, stomach, upper outer arm or upper torso (but not the breasts).</p>	<p>A new patch is applied each week for three weeks. No patch is used on the fourth week.</p>	<p>The patch is more than 99% effective in preventing pregnancy when used correctly.</p> <p>A woman must remember to change the patch every week for three weeks, not to wear the patch during the fourth week, and to start the cycle again. Thus, the patch is convenient and allows for spontaneous sex, although it requires more care to use correctly than the pill for many women.</p> <p>The patch can lessen the bleeding and cramping of heavy or painful menstrual periods.</p> <p>While the patch may be available in some clinics and health centres in South Africa, it is not common and must be purchased whereas other methods of hormonal contraception can be obtained for low or no cost.</p> <p>Always use condoms with the patch to ensure you are safe from infections.</p>



What is it?	How do you use it?	More information
<p><b>The ring</b> is a soft flexible ring (about 5 centimeters in diameter) that a woman inserts into her vagina.</p>	<p>The ring stays in place for three weeks. In the fourth week, the woman takes the ring out for a week. She inserts a new ring after the end of the fourth week. The ring is not removed during sex.</p>	<p>The ring is more than 99% effective in preventing pregnancy when it is used correctly.</p> <p>A woman must remember to take the ring out after three weeks and insert new one after the fourth week.</p> <p>Although it requires more care to use correctly than the pill, for many women it is convenient and does not interfere with spontaneity in a sexual relationship.</p> <p>The ring can reduce the bleeding and cramping of heavy or painful menstrual periods.</p> <p>The ring is not yet widely available in South Africa. While the ring may be available in some clinics and health centres in South Africa, it is not common and must be purchased whereas other methods of hormonal contraception can be obtained for low or no cost.</p> <p>You will still need to use a condom with the ring to ensure you are safe from infections.</p>

What is it?	How do you use it?	More information
<p><b>The implant or Implanon®</b> is a three-year method of birth control. A tiny rod of artificial hormone is put under the skin of the upper arm by a healthcare provider.</p>	<p>An implant is a thin, flexible rod about the size of a matchstick. It is inserted inside the upper arm through a small incision after the patient is given a local anesthetic. After the implant is inserted no further action is needed to prevent pregnancy until the implant expires after three years.</p>	<p>A birth control implant like Implanon® is more than 99% effective at preventing pregnancy and provides protection for three years.</p> <p>Some women prefer to use an implant because it is always in place and they don't have to remember to take a pill each day, or to go on and off the method as with the patch and ring. An implant can be removed by a healthcare provider at any time and woman rapidly returns to her previous level of fertility after removal.</p> <p>Some women report irregular periods, spotting or no periods while using an implant such as Implanon®. A woman should check with her healthcare provider about any side effects or complications that she may experience given her personal health profile.</p> <p>While the implant may be available in some clinics and health centres in South Africa, it is not common and must be purchased whereas other methods of hormonal contraception can be obtained for low or no cost.</p> <p>Implants won't protect you from infections; you will also need to use condoms for sex to be safe.</p>

What is it?	How do you use it?	More information
<p><b>The emergency contraceptive</b> is used AFTER sex when other birth control methods may have failed, e.g. if a condom breaks or a woman realises she has missed pills.</p>	<p>“Two types of safe and effective emergency contraceptive methods are currently available in South Africa: hormonal, emergency contraceptive pills (ECPs) taken within 120 hours (5 days) of unprotected intercourse, the sooner the better;</p> <p>Cu IUD, inserted up to 120 hours (5 days) after unprotected intercourse.” <sup>23</sup></p>	<p>Emergency contraception is exactly that – something to use in an emergency. It should not be used as a regular form of birth control. The emergency contraceptive hormonal pill is 85% or more effective if taken within five days (or 120 hours) of unprotected sex. These pills are slightly more effective if taken within three days of unprotected sex. Emergency contraception is birth control – it does not cause an abortion and it is not the same as the abortion pill.</p> <p>It can take up to six days for the sperm and egg to meet after having sex, which is why pregnancy can be prevented even after unprotected sex. Emergency contraception pills keep a woman's ovary from releasing an egg for longer than usual and pregnancy cannot happen if there is no egg to join with sperm.</p> <p>It is normal for a woman's next menstruation period after taking an emergency contraceptive pill to be different from usual.</p> <p>A copper IUD can be used as emergency contraception if inserted by a healthcare provider within 120 hours (five days) after unprotected intercourse. An IUD used as emergency contraception can be left in as ongoing birth control for as long as the woman desires, up to 12 years.</p>

## An 11-Step learner guide to using male condoms correctly

### Step 1 Remind yourself of your values and goals

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

### Step 2 Talk to your partner about using condoms

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

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

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

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

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



condoms in a cool, dry, protected place like a drawer in a dresser or night table, or in a box under your bed.

#### Step 5 Check the expiration date on condom

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



#### Step 6 Inspect and open the condom package carefully

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



#### Step 7 Pinch the tip of a male condom

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



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

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



### Step 9 Have sex

- a. Be caring. Be safe.

### Step 10 Withdraw penis immediately after ejaculation

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



### Step 11 Dispose of the condom

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



### How to use a female condom



Open the package carefully; tear at the notch on the top right of the package. Do not use teeth, fingernails or sharp objects.

2



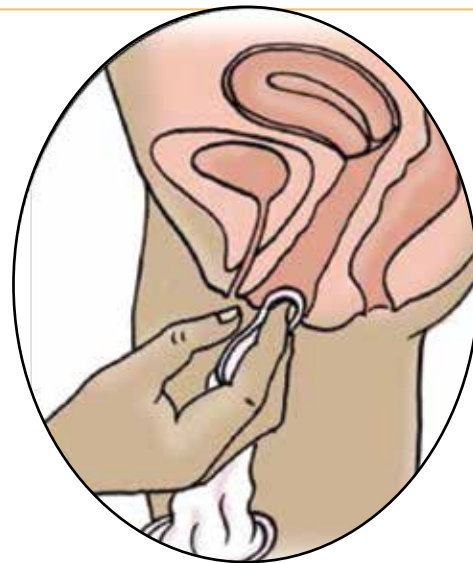
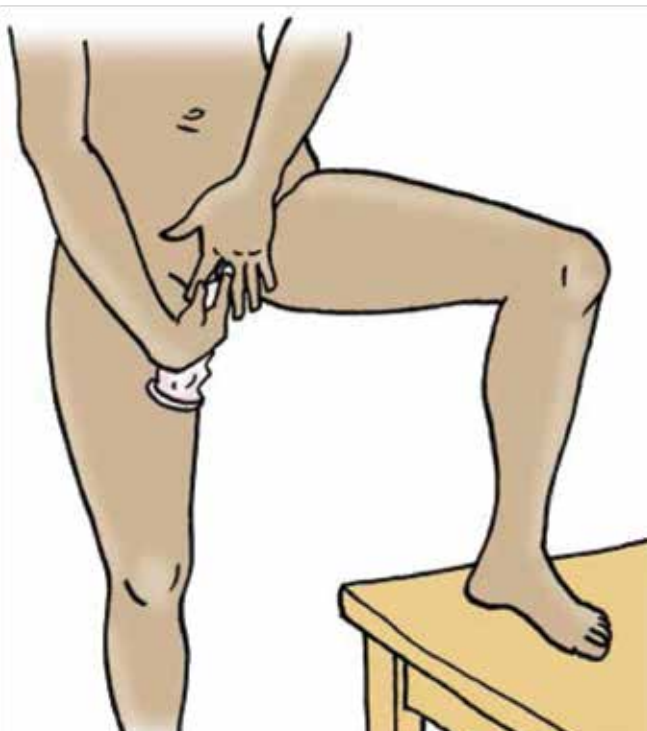
The outer ring covers the area around the opening of the vagina. The inner ring is used to put the condom in and to help hold it in place.

3



While holding the condom at the closed end, grasp the flexible inner ring and squeeze it with your thumb and fingers so it becomes long and narrow.

4



Gently insert the inner ring into the vagina. Feel the inner ring go up and move into place.

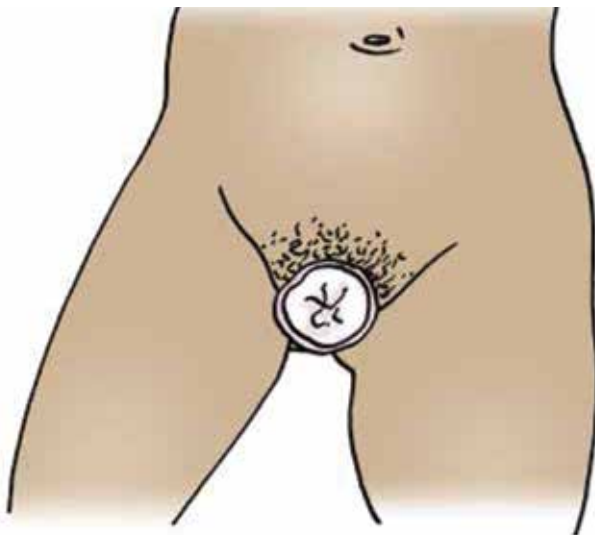


5



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

6



The female condom is now in place and ready to use with your partner.

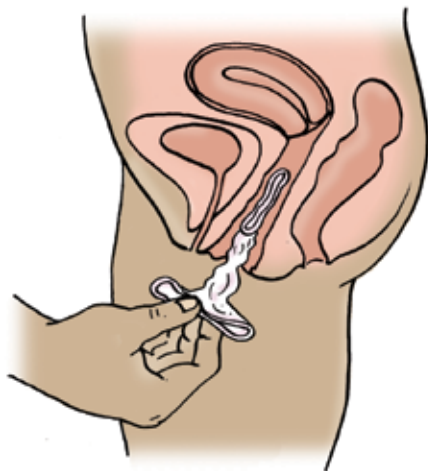


7



When you are ready, gently guide your partner's penis into the condom's opening with your hand to make sure that it enter properly – be sure that the penis is not entering on the side, between the sheath and the vaginal wall.

8



To remove the condom, twist the outer ring and gently pull the condom out





## GLOSSARY

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

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

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

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

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



## Lesson 10.6

### Understanding sexual interest

Lesson 10.6	Understanding sexual interest
Grade	10
Term	3
Weeks	1-5
CAPS Topic(s)	Development of the self in society
CAPS Subtopic(s)	<ul style="list-style-type: none"> <li>• <b>Physical changes:</b> hormonal, increased growth rates, bodily proportions, secondary sex/gender characteristics, primary changes in the body (menstruation, ovulation and seed formation), and skin problems</li> <li>– <b>Emotional changes:</b> maturing personality, depth and control of emotions, feelings of insecurity, changing needs, interests, feelings, beliefs, values and <b>sexual interest</b></li> <li>– Social changes: relationship with family, interaction with social groups, need for acceptance by and dependence on peer group, moving into the workforce and increased responsibilities</li> </ul>
Link to other subtopics in CAPS	<p>Life roles and responsibilities from adolescence to adulthood</p> <p>Importance of values and strategies</p>
This lesson will deal with the following	<ul style="list-style-type: none"> <li>• Review physical, emotional and social changes typically present in transition from adolescence to adulthood</li> <li>• Describe how the female and male reproductive systems work</li> <li>• Explore physical, emotional and social changes learners experience at their age</li> <li>• Differentiate between misconceptions and facts related to sexual interest and safer sex</li> </ul>
Concepts	<ul style="list-style-type: none"> <li>• menstruation</li> <li>• ovulation</li> <li>• seed formation</li> <li>• puberty</li> <li>• adolescence</li> <li>• intersex</li> <li>• transgender</li> <li>• asexual</li> <li>• myths</li> <li>• self consciousness</li> </ul>
Teaching methodologies	<ul style="list-style-type: none"> <li>• Self-reflection</li> <li>• Pair work</li> <li>• Class discussion</li> </ul>
Time	60 minutes

## BRIEF LESSON SUMMARY

Learners will review the physical, emotional and social changes that take place in puberty, and the changes most experience in their transition through adolescence to young adulthood. They will have an opportunity to reflect on the changes they have experienced so far, and how these have made them feel, as well as the influence these changes have had on them. They will also get more information on reproductive health, including fertility awareness.

Learners will focus on sexual feelings, and clarify some common myths and misconceptions about sexual interest. They will apply their learning by creating a comic to illustrate points related to misconceptions, and to provide correct information about sexual feelings and interest.

## KEY POINTS

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



## PREPARATION FOR THE LESSON

'Body changes' were covered in **Grade 7, SLP 7.4**. If you can, go back to that lesson as part of your preparation. In this lesson, we focus on the physical changes that adolescents experience, and how this relates to fertility, changes in emotions, sexual interest, and transition to adulthood.

If you don't have access to these, follow the content in this SLP. All relevant content has been included in the activities for the lesson.

**Activity A: Introduction and understanding changes to the body**

Read through what you covered in and **Lesson 10.1** about self-confidence and in **Lesson 10.5** about roles and responsibilities. Prepare to recap key points as they relate to this lesson. Read through the information in **Reading 10.6.2: Female and male reproductive organs** so that you are ready to explain it in class.

Ask learners to bring a photograph of themselves at the age of 10 and a recent one to show how they have changed. This is optional.

**Activity B: Understanding sexual interest**

Bring one blank A4 piece of paper for each learner. They will write **TRUE** on one side of the page, and **FALSE** on the other side in big and bold letters. If you are not able to provide paper, they can write the words on two different pages in their note book in large letters.

The answers to the activity will be provided at the back of the Learner Book. This will be given to learners as supporting material for creating cartoons as part of the assessment.

Assessment: Lesson 10.6			
Activity	Time	Type of assessment	Form of assessment
Activity A: Being me now	30	Educator, Informal	<ul style="list-style-type: none"> <li>Class discussion: Tasks related to reproductive health</li> <li>Written task</li> </ul>
Activity B: Understanding sexual interest	30	Educator, Informal Peer, Informal	<ul style="list-style-type: none"> <li>Visual presentation: Interpretation of visual material</li> <li>(cartoon)</li> </ul>
Total	60		

**TEACHING THE LESSON****ACTIVITIES****Activity A: Being me now**

**Introduction:** This activity begins by having learners reflect on the physical, emotional and social changes they went through during puberty, and then provides information on male and female reproduction, including menstruation and fertility awareness.

1. Read the note called **Reading 10.6.1: Changing bodies, changing emotions**, then ask learners to think back to early puberty. This might have been the time when they first started noticing changes in their

bodies. Ask:

- What types of changes did you experience (for example physical, emotional and social)?
  - What changes relate to a woman's or man's ability to have children (for example menstruation, sperm production, development of breasts, emotional and social readiness to have children, etc.)?
  - Can you remember things that used to make you feel self-conscious (for example when a girl has her first menstrual period, or when a boy's voice starts changing, or when you get your first pimples)?
  - How did this make you feel?
2. Ask learners to turn to **Reading 10.6.2: Our changing bodies** to get more information on changes that happen during puberty.
  3. Introduce learners to discussion on the male and female reproductive system. Having knowledge about how our bodies work will help us be more confident in making decisions related to sexual and reproductive health.
  4. Write the following three tasks on the board:
    - a. Describe the journey of an egg once it gets released from the ovaries.
    - b. Describe the phases of the menstrual cycle. When is a woman most likely to get pregnant?
    - c. Describe the production and the journey of sperm.

Divide the class into sections and assign each section one of the tasks. Tell them they will be responsible for explaining the answer to question assigned to their group.

5. Ask learners to turn to **Reading 10.6.3: Female and male reproductive organs** and to read through it with a partner, keeping the task in mind.
6. Go through the three tasks in the large group. Ask for volunteers from the assigned section to explain the information to the others. Anyone in their section can offer additional information to the class. Fill in gaps as needed.
7. Ask learners why they think it is important to know about reproductive systems and fertility.

### NOTE TO THE EDUCATOR

Possible responses should include that being knowledgeable about the reproductive system and the fertility phases will equip sexually active people to protect their reproductive health and their partner's reproductive health. Having the knowledge will help them in family planning and in protecting themselves if they are not ready to have children.



8. Emphasise that another change we experience as we go through puberty and become adults is that we start to have sexual feelings. Stress that it is normal and natural to experience sexual feelings, and there are many ways of being intimate without having sex. Although young adults experience all kinds of emotional changes, including increasing sexual interest, sex is best delayed until one is in a mature, loving relationship.

### NOTE TO THE EDUCATOR

It is important for learners to be able to recognise and understand changes in their bodies related to sexual arousal and sexual interest. This understanding helps them to be prepared for situations that can quickly become risky.

### Activity B: Understanding sexual interest

**Introduction:** This activity emphasises that it is normal to experience sexual interests and sexual feelings. It explores many myths related to sexual interest through a series of true/false statements. Learners then create dialogues for some of these myths and how to debunk them.

1. Tell your learners that it is natural to have sexual relationships. Having incorrect information about sex can result in problems when one is in a romantic relationship. It is up to each of us to make decisions and choices for our well-being now and in the future. Remind learners that they have already discussed how equality in relationships leads to respect and happier lives.
2. Ask learners to refer to the **Worksheet 10.6.1: Sexual interest: get the facts** in their Learner Books. Go through each statement and ask learners to put up their **TRUE** or **FALSE** signs after each one (see the note to educator below). After each statement has been discussed, ask learners to write the correct answer in their book. When you have completed the activity, refer learners to the answers and explanations in their Learner Books.

### NOTE TO THE EDUCATOR

#### True and false signs

Hand out the A4 blank pages (one for each learner), and ask them to write in bold the word **TRUE** on one side of the paper in big letters, and **FALSE** on the other. When you read each statement on **Worksheet 10.6.1** aloud, the learners should hold up their responses. Once the activity is complete, refer them to the page in their Learner Book to find the answers and explanations.

The focus in the activity that follows is on how society's messages often reinforce misconceptions about sexual interest. Ask learners about current music videos or adverts that give messages regarding sexual interest, power relations and gender-based harm.

3. After you have gone through the table and cleared up myths and misconceptions, ask the class:
  - a. What do you notice about society's messages regarding men's and women's sexual interest? How do they differ?
  - b. How can society's statements regarding men's and women's sexual interests affect unequal power relationships and gender-based harm (including violence and emotional and physical harm)?
  - c. What can you do, as an individual and as a peer group, to challenge these harmful ideas or myths?
4. Ask learners to work in pairs to make up their own words in the speech bubbles in **Worksheet 10.6.2: Bust a myth with a cartoon**. Allocate the different myths from the activity they have just done to different pairs. Each pair makes up their own dialogue to challenge the myth they have been allocated. Please make sure at least two pairs do the myth around sexual interest and disability.

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



5. Invite your learners to think of ideas for displaying their cartoons at school, so that other learners in the school can see them and discuss them.
6. Go through the homework with the class to make sure they understand what is required.



## CONSOLIDATION

This lesson has re-examined the changes our bodies have gone through during puberty and has introduced information on male and female reproduction. Understanding the reproductive system will help boys and girls, men and women, make informed choices regarding their sexual and reproductive health. Remind learners that they have a right to say “no” to sex. A romantic relationship is built on trust and respect for each other's sexual and physical well-being. Remind learners that they are responsible for respecting a person who says “no” to them. Wrap up with the key points, and ask learners to identify the core messages.

### Core messages

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



## HOMEWORK

### Express yourself

Write a poem, letter or any type of creative expression, responding to the questions below:

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



## ASSESSMENT

Use the cartoon speech bubbles to see that learners have understood the concept of myths and have created relevant responses as an assessment task. Allow learners to present their cartoons to the class.

They can peer-assess which cartoon they think is the best cartoon and display it in the classroom.



## RESOURCES

### READING 10.6.1: Changing bodies, changing emotions

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

### READING 10.6.2: Our changing bodies

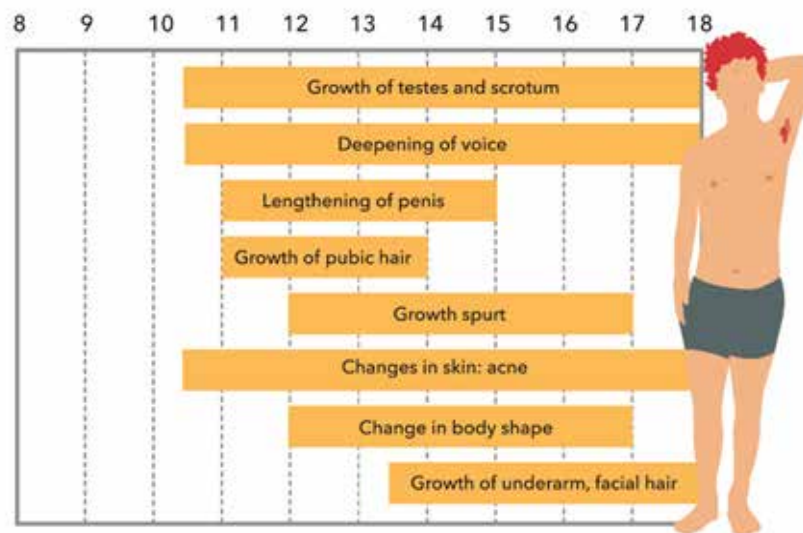
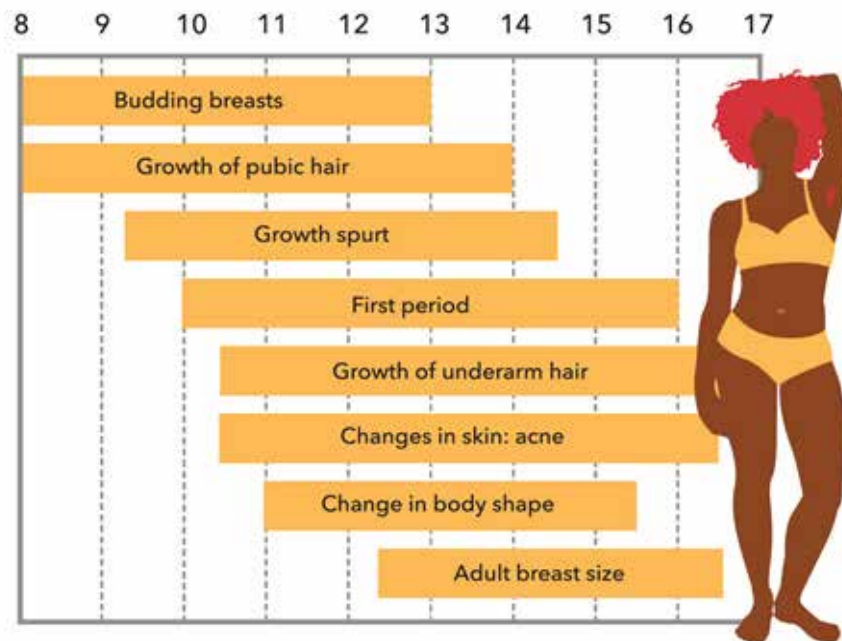
We are all unique: our personalities, body shapes, sizes, likes and dislikes, and how and when our bodies develop are unique to us. It does not help to compare yourself with someone else, or to want to live someone else's life. You are you, and I am me. Let us respect ourselves and one another.

#### Is there a 'right' time to develop?

The following diagrams show the average development of girls and boys through adolescence. Remember that this is merely a guide. If you develop earlier or later, it does not mean that something is wrong. We are all different, some boys or girls may suffer from acne whilst others may only have the occasional pimple. There is no 'right' body for a boy or girl. Each of us is unique and love starts with you loving and caring for your own well-being. <sup>24</sup>

<sup>24</sup> Adapted from: <https://bwisehealth.com/article/bodies-are-different-whats-your-type>

## Age<sup>25</sup>



<sup>25</sup>Adapted from: <https://www.sciencenews.org/article/early-arrival> and <https://www.bwisehealth.com>

### If you are female

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

### If you are male

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

### Other changes you may notice

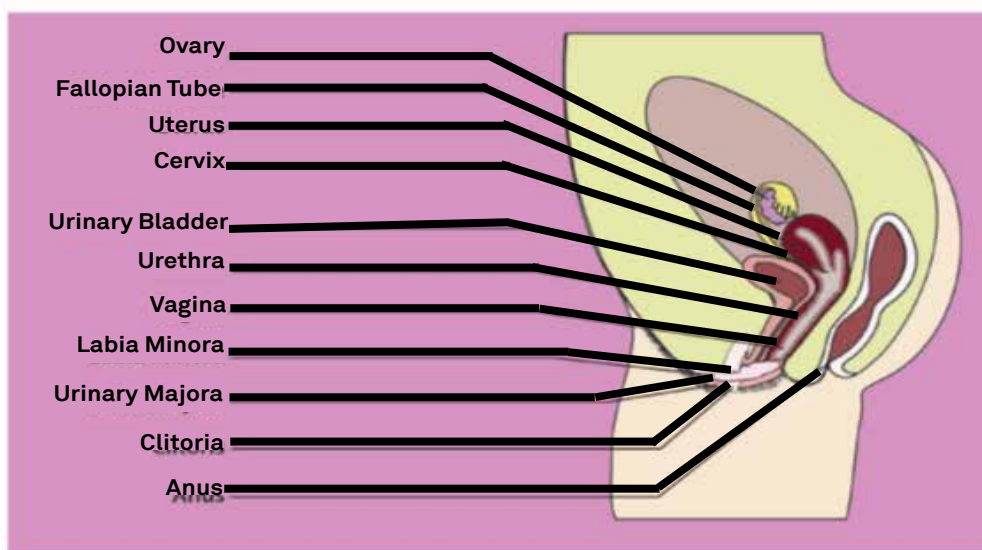
- You may start to get pimples on your skin.
- Your body smell can change and you may sweat more.
- The hair on your legs and arms may get thicker and darker.
- Boys will have more hair on their face and their body, and some girls may grow thicker hair on their arms and legs.

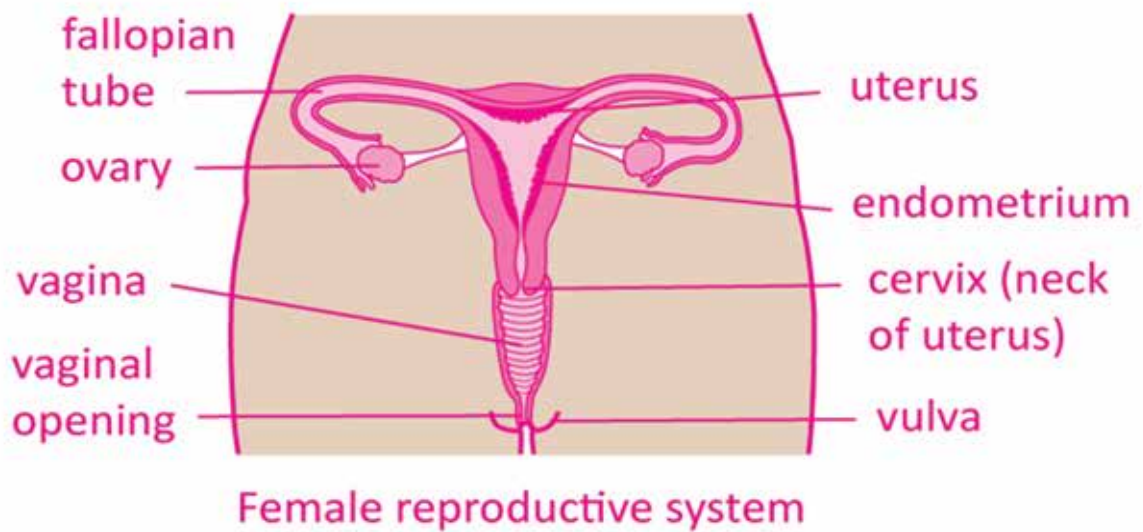
### Gender and sex

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

## READING 10.6.3: Female and male reproductive organs

### Female reproductive organs





### Female reproduction

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

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

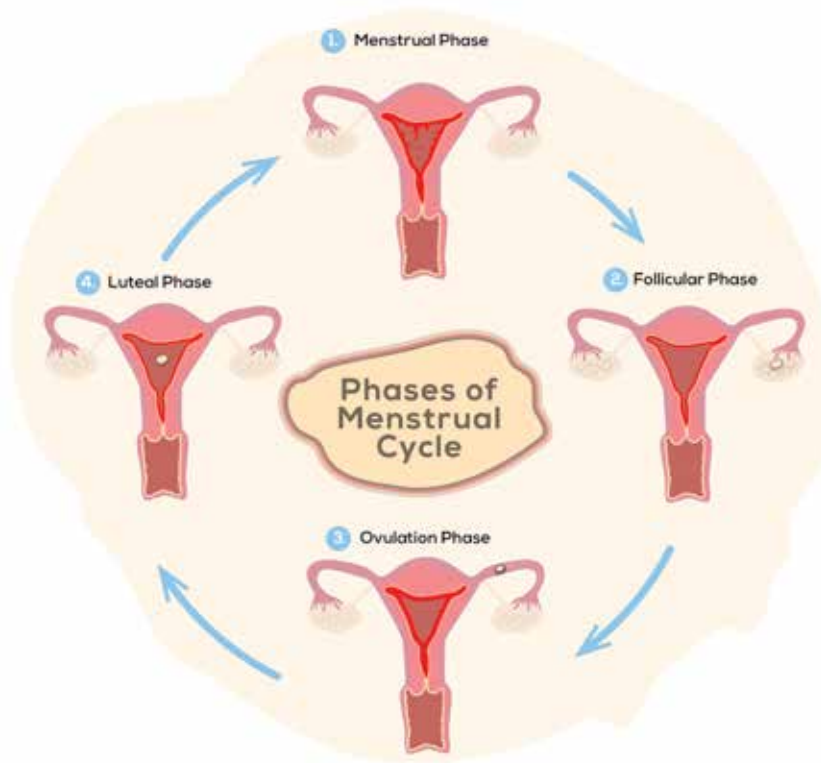
Girls develop at different times and so they start their periods at different times. Some may start at the age of nine, others not until 19. It will also take a while before the body has a regular pattern.

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



## Phases of the menstrual cycle

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



### 1. **Menstrual phase (day 1-5)**

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

### 2. **Follicular phase (day 1-13)**

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

### 3. **Ovulation phase (day 14)**

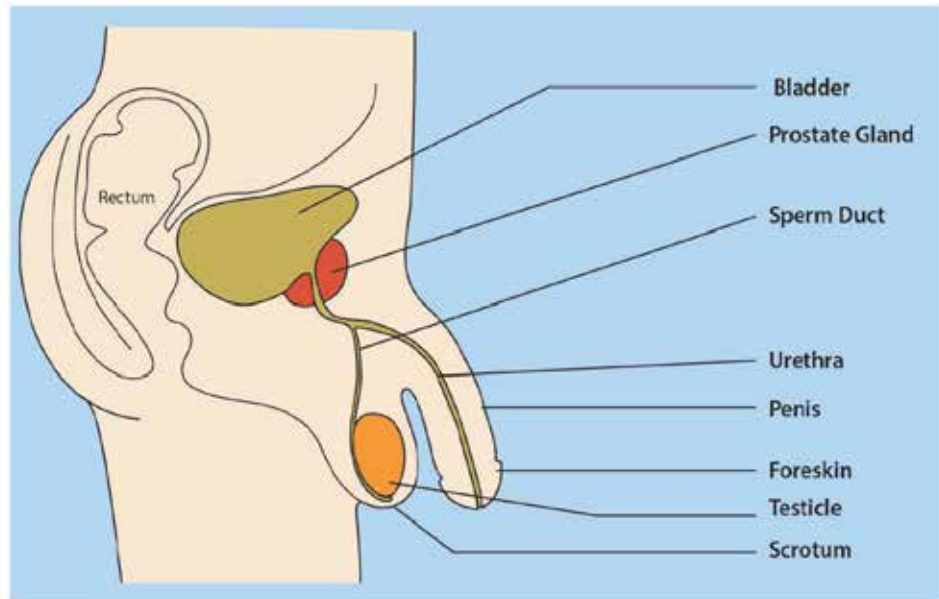
On the 14th day of the cycle, the pituitary gland secretes a hormone that causes the ovary to release the matured egg cell into the fallopian tube. Assuming a 28-day cycle, the most fertile days are days 10 – 14.\*

### 4. **Luteal phase (day 15-28)**

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

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

## Male reproductive organs:



### Male reproduction

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

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

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

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



**WORKSHEET 10.6.1: Sexual interest – get the facts with answer key**

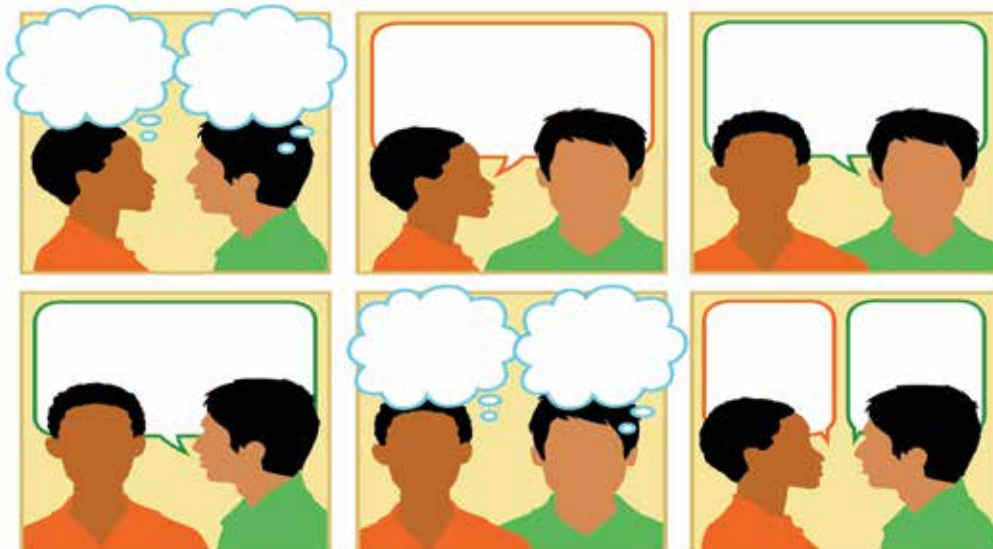
<b>Learner worksheet: Sexual interest – get the facts</b> <sup>27</sup>		
Read each statement. Decide if it is true (T) or false (F). Mark your answer in the box on the right. T or F?		
		My answer: <b>TRUE OR FALSE?</b>
1	A person can feel sexual interest for someone he or she does not love.	
2	If you want sex, you have to have it immediately.	
3	Most girls and women do not really want sex.	
4	If a boy gets an erection, it means he wants to have sex. If a girl's vagina lubricates, it means she wants to have sex.	
5	Fear of becoming pregnant or getting an STI can affect sexual interest.	
6	Everyone's level of sexual interest can change over time.	
7	If you are male, you want to have sex all the time.	
8	If a man does not get an erection in a sexual situation, he does not desire the person he is with.	
9	Some medication affects sexual interest.	
10	People with disabilities do not have sexual interest or enjoy intimacy.	
11	It is normal for men not to want sex sometimes.	
12	If you have anal sex you cannot get HIV or AIDS.	
	Total correct answers out of 12	

Answers to worksheet on sexual interest: what is the truth?			
	Statement	Answer	Explanation
1	A person can feel sexual interest for someone he or she does not love.	<b>True</b>	People can confuse sexual interest and love. You may love someone and not desire to have sex with them, and you can desire to have sex with someone whom you do not love.
2	If you want sex, you have to have it immediately.	<b>False</b>	Sexual interest does not have to lead to sex. In fact, some people can enjoy feeling “turned on” without wanting to have sex.
3	Most girls and women do not really want sex.	<b>False</b>	Most girls and women do desire sex. However, if a woman does not get pleasure from sex, she may lose interest.
4	If a boy or man gets an erection, it means he wants to have sex. If a girl or woman’s vagina lubricates, it means she wants to have sex.	<b>False</b>	Erections and lubrication can occur for no reason or for reasons not related to sexual interest. For example, most males wake up with an erection in the morning because their bladders are full. Teenage boys often get spontaneous erections that are not related to sexual interest or excitement.
5	Fear of becoming pregnant or getting an STI can affect sexual interest.	<b>True</b>	Emotional states, such as fear, can affect a person’s sexual interest.
6	Everyone’s level of sexual interest can change over time.	<b>True</b>	“Normal” levels of sexual interest vary widely and can change over time. Sexual interest is affected by physical, emotional, and social factors. If a person’s level of sexual interest is causing him or her a problem, the person can talk with a sexual health professional.
7	If you are male, you want to have sex all the time.	<b>False</b>	Men do not always have sexual interest. They experience variations in their levels of interest, as do all people.
8	If a man does not get an erection in a sexual situation, he does not desire the person he is with.	<b>False</b>	A man may not get an erection in a sexual situation for many reasons, including medical conditions (for example, diabetes or heart disease), the use of certain drugs, and emotional factors (such as anxiety about sexual performance or frustration with the other person or about someone else).

9	Some medication affects sexual interest.	<b>True</b>	A decrease in sexual interest is one side effect of some medications. Some medications such as Viagra increase erectile function and are taken specifically for that purpose. Doctors frequently do not discuss the sexual side effects of medications with their patients. If side effects are a concern, consult a physician or pharmacist.
10	People with disabilities do not have sexual interest or enjoy intimacy.	<b>False</b>	There are misconceptions that people with disabilities do not have sexual interest or cannot have sexual relationships. They can. Depending on the disability (such as a spinal injury) they might have to make adjustments when engaging in sexual activities. Communication is very important in helping partners understand each other's needs and interests better, whether one has a disability or not.
11	It is normal for men not to want sex sometimes.	<b>True</b>	No one, male or female, always wants to have sex.
12	If you have anal sex you cannot get HIV or AIDS.	<b>False</b>	Although a girl may not fall pregnant, it is possible to get HIV through anal sex, so it is important to always use a condom.

### WORKSHEET 10.6.2: Bust a myth with a cartoon

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





## GLOSSARY

**Irrationally:** we say or do something without thinking about the facts of the situation or about the consequences of our actions.

**Impulsive:** Acting or behaving quickly, without thinking about what we are doing beforehand.

**Menopause:** When a woman stops menstruating. Menopause takes place over a period of time. After menopause a woman can no longer become pregnant.

**Menstrual cycle:** monthly changes that occur in the female reproductive system related to fertility and the body's preparation to be able to support a pregnancy.

**Misconception:** An incorrect or false idea about something. For example, people who believe that if you have sex standing up or if you jump up and down after sex you won't get pregnant, you have a misconception.

**Myths:** False beliefs or ideas. For example it is a myth to believe that vitamins can cure HIV. This is not true. They cannot. Those of us living with HIV need to stick with antiretroviral treatment (ART), so that we can reduce our HIV viral load. But right now there is no cure for HIV and AIDS, only treatment.

**Ovulation:** Approximately every month an egg will mature within one of a menstruating girl or woman's ovaries, pushed down the fallopian tube, and made available to be fertilized. This is the beginning of the fertile period when pregnancy can occur.

**Self-consciousness:** When you are self-conscious you may feel shy or embarrassed and think that people are looking at you. Many of us feel self-conscious, especially during puberty and adolescence when our bodies are changing and we are becoming young adults.



## **Lesson 10.7**

Our choices, our decisions

Lesson 10.7	Our choices, our decisions
Grade	10
Term	3
Weeks	1-5
CAPS Topic(s)	Development of the self in society
CAPS Subtopic(s)	<ul style="list-style-type: none"> <li>Values and strategies to make responsible decisions regarding sexuality and lifestyle choices to optimise personal potential               <ul style="list-style-type: none"> <li><b>Behaviour that could lead to sexual intercourse and teenage pregnancy, sexual abuse and rape</b></li> <li><b>Skills such as self-awareness, critical thinking, decision making, problem solving, assertiveness, negotiations, communication, refusal, goal setting and information gathering relating to sexuality and lifestyle choices</b></li> <li><b>Where to find help regarding sexuality and lifestyle choices</b></li> </ul> </li> </ul>
Link to other subtopics in CAPS	<p>Strategies to enhance self-awareness, self-esteem and self-development: <b>factors influencing self-awareness and self-esteem, including media</b></p> <ul style="list-style-type: none"> <li><b>Values such as</b> respect for self and others, abstinence, <b>self control</b>, right to privacy, <b>right to protect oneself, right to say 'No' and taking responsibility for own actions</b></li> </ul>
This lesson will deal with the following:	<ul style="list-style-type: none"> <li>Develop skills and strategies to help you think ahead about, plan around, avoid, and be able to do your best to respond to risky situations, including in romantic and sexual relationships</li> <li>Make responsible and protective decisions regarding sexuality and lifestyle choices so you do the best you can to fulfil your personal potential</li> <li>Identify where you can find help about your sexuality, lifestyle choices, and SRH needs.</li> </ul>
Concepts	<ul style="list-style-type: none"> <li>abstinence</li> <li>adolescence</li> <li>celibacy</li> <li>consequences</li> <li>romantic relationships</li> <li>sexual arousal</li> <li>sexual relationships</li> <li>strategy</li> <li>values</li> </ul>

<b>Teaching methodologies</b>	<ul style="list-style-type: none"> <li>• Brief knowledge check-in</li> <li>• Story analysis</li> <li>• Class discussion</li> <li>• Group discussion</li> <li>• Presentations</li> </ul>
<b>Time</b>	60 minutes

## BRIEF LESSON SUMMARY

This lesson encourages positive decision-making strategies during the learner's natural time of experimentation and striving for independence. The learners will work with a story to help them think about their values and strategies, in order to make responsible decisions for their well-being.

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

It is critical that you make it clear throughout the class discussions that everyone has the right to their own sexual orientation. Sexual orientation is not a decision or choice that one makes. One makes choices and decisions about sex.

## KEY POINTS

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



## RESOURCES/MATERIALS

- Prestik and paper punch
- Board to write on
- Learner book



## PREPARATION FOR THE LESSON

### Activity A: Swimming in the river

Add other familiar contexts for the learners if you feel you need to.

### Activity B: Freeze the moment

Introduce a group discussion and an activity on scenarios that present certain risks. Suggest strategies to address and assess the risk, and create group consensus on an acceptable response to the risk.

Assessment: Lesson 10.7			
Activity	Time	Type of assessment	Form of assessment
Activity A: Swimming in the river	25	Educator, Informal	<ul style="list-style-type: none"> <li>Group discussion</li> </ul>
Activity B: Freeze the moment	35	Educator, Informal	<ul style="list-style-type: none"> <li>Groupwork</li> <li>Written task</li> </ul>
Total	60 mins		



## TEACHING THE LESSON

### NOTE TO THE EDUCATOR

#### Understanding adolescence

#### Your vital role

“Positive and negative health experiences in adolescence lay the foundation for health and well-being in adulthood and for the health and well-being of future generations. As a result, this period presents a critical opportunity for educating and supporting young people as they learn about and begin to navigate new relationships and behaviour such as sexual activity.”

There are three things we need to know, understand and put into practice when we work with adolescents and sexuality education:

- Programmes and theories that focus on teens must address developmental changes in adolescence, including how social, emotional and cognitive processing influences decision-making.
- Relationships are a fundamental context for adolescent sexual health.
- Multiple support systems are essential to scaffold youth through positive growth and development

#### **(Sex and the Teen Brain: Disrupting What We Think We Know. Findings from the 2016 Kirby Summit)**

In this lesson, as in all of the sexuality education lessons you teach, you play a vital role in helping your learners to prepare themselves to develop strategies to manage decisions around sexual relationships and sexual arousal. Some learners may already be sexually active. Remember to remain non-judgmental. Your job is to help your learners, whether they are sexually active, celibate, or thinking about returning to celibacy. Remember to make sure learners are familiar with the **Places and people who help** section in their Learner Book which gives contact details about where to get access services and support for their SRH.



## ACTIVITIES

### Activity A: Swimming in the river

1. Before you begin with the activities, ask if any learners would like to display the myths and misconception cartoons they completed for **Lesson 10.6**. Put the cartoons on the wall and go over key points from the last lesson. For example, sexual arousal is a natural part of being a young adult/ busting myths and misconceptions about sexual desire/unequal gender relationships portrayed in media. Explain that in this lesson learners will apply critical thinking around possible consequences they may face, for certain actions they may take, and how they can use strategies to plan for things that are not going to be harmful for them.
2. Explain that Grade 10 is a time where youth face both exciting and daunting experiences.

Relationships are probably changing, and it is natural to want to be independent, and to establish new relationships (possibly including romantic relationships) and to work out who they are and what they want to do with their lives. Acknowledge that it is normal for their bodies to be changing, and for them to feel sexually aroused. Confirm that sometimes this can be very exciting, but there are times when it can be scary. They should understand that with each new stage in their lives, their roles will change, and so will their responsibilities. Their actions will have consequences. Tell them that now is the time to stop and think extra carefully before doing something impulsive that could sabotage their goals and dreams.

3. Refer your learners to **Reading 10.71: Scene 1** in their Learner Books. Invite a learner who enjoys reading aloud to read to the class.
4. Brainstorm with the learners what kinds of risks they might face if they were in this scenario. Perhaps the current is too strong and they don't know how to swim well? Perhaps the water is not clean enough to swim in? Could the river be a place where friends go to do things they should not be doing, such as drinking or smoking?

### NOTE TO THE EDUCATOR

Other questions learners might need to consider before swimming in the river could include:

- Which part of the river is it safer to swim in?
- Are there animals like crocodiles or harmful snakes?
- Will fellow learners use self-control, and not pretend they can swim when they cannot?
- Will they have the self-control to resist doing things they should not do? Even if their friends are doing it?
- Will those who can swim have enough respect not to make peers who can't swim feel embarrassed about it?

5. Ask learners to interpret what they see on the image included in the reading.
6. Ask learners if they would agree that **Reading 10.71: Scene 1** can be compared to the pressure they put on themselves - or put on others- to have, or not to have sex. Ask the learners to give examples of some of the other peer pressures they might experience during this time of experimentation.
7. Tell learners to go back to **Reading 10.71: Scene 1** and ask volunteers to complete the endings prompted in the reading:
  - You decide that you will not jump in yet because...
  - Your response when friends pressure you is...
8. Ask learners how prepared they feel to find the balance between taking a risk and being safe. What are the most important things they need to do to stay on the track they want for their lives and not face negative consequences for their actions? Tell learners that in the next activity we will discuss strategies they can use to make responsible decisions about sexuality and other lifestyle choices.

### Activity B: Freeze the moment

1. Tell the learners that they will work in groups for this activity. Explain that we will focus specifically on identifying strategies to protect them from situations that could put them at risk of having sex when they are unprepared, or before they are ready to have sex as part of a mature, long-term relationship. Explain that they will look at different settings where they are likely to face risks and pressure. Groups will identify strategies to make responsible and protective decisions regarding sexuality and lifestyle choices. In this way, learners can fulfil their personal potential and not put their short-, medium-, and long-term goals at risk.
2. Invite a learner to read **Reading 10.7.1: Scene 2** to the class.
3. Tell learners to refer to **Worksheet 10.7.1: Your freeze the moment strategies**. Explain that they will break up into groups and each group will be assigned one 'scenario' to complete in the chart. Before learners break into groups, tell them that you will work through the setting described in **Reading 10.7.1: Scene 2** as an example.
4. Work through these steps with the class:
  - a. **Freeze the moment:** What could happen? What are the risk factors, including to one's emotional and physical health in this setting?
  - b. **Strategy:** What can the person say or do AND what can friends say or do to protect themselves from risk and negative peer pressure?
  - c. **Values:** Does the strategy match with your values? Yes or no? How or how not?
  - d. **Core messages:** What core messages can help you in this setting?
  - e. **Peer review:** Could this strategy work in real life? Why? Why not?
5. Tell learners to get into groups with people around them and allocate each group a different scenario to work through. If groups finish the activity quickly, they are welcome to come up with their own scenario.

#### NOTE TO THE EDUCATOR

Groups should imagine themselves in the situation and come up with a good strategy, or strategies to pull back and protect themselves from risk and pressure from others.

6. Allow small groups to take turns presenting their strategies to the class and ask the class to vote on whether it is a good strategy or not by giving a thumbs up or thumbs down. Encourage some debate on the strategies so that the learners can gain more insight into strategic thinking. Allow discussion in the class to evaluate the strategies presented and think of new ones.
7. Remind learners that as they develop strategies for dealing with various situations in their lives, including romantic relationships, it is important to incorporate their values, use their life skills such as self-control, and act on their right to protect themselves. This means taking responsibility for one's own actions and using critical thinking and problem-solving, as well as assertiveness.

## NOTE TO THE EDUCATOR

### Freeze the moment discussion

*Freezing the moment* is a useful strategy for staying in control of one's life. Explain to the learners that as they mature and are faced with different risks and pressures, using the *freeze the moment* technique will be useful to them in various situations they may encounter.



## CONSOLIDATION

Ask learners to think over their strategies so that they can avoid situations where they could put themselves at risk. Risks could include being hurt emotionally, becoming a parent before one is ready, or getting HIV or other STIs. In consolidating the lesson, go through the key points, as well as the core messages below.

### Core messages

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



## HOMEWORK

While this lesson will support learners to develop strategies to enable them to make responsible decisions regarding sexuality and lifestyle choices, they may need additional support. For homework, ask learners to identify one place within their community where they can go for help regarding sexuality and lifestyle choices. Ask them to describe the place and the type of help they think they will receive there. They should write three to four sentences on this for homework.



## ASSESSMENT

Refer to the assessment table in the introductory section. Use the written task in **Activity B: Freeze the moment** as an informal assessment task.

Assess groupwork for understanding and application of concepts and strategies.



## RESOURCES

### READING 10.7.1: Scene 1

#### Swimming in the river

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

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

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



## READING 10.7.1: Scene 2

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

### WORKSHEET 10.7.1: Your freeze the moment strategies

#### Group work: Your freeze the moment strategies

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

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

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



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

<p>You have been involved with the same person for six months, and you have not had sex. Your friends keep asking whether you have done 'it' yet. You would love to. But your partner says he/she is not ready. How are you going to handle this in a responsible and respectful way?</p>					
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	--	--	--	--





## GLOSSARY

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

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

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

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

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

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

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

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

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



## Lesson 10.8

I know what I want

Lesson 10.8	I know what I want
Grade	10
Term	3
Weeks	1-5
CAPS Topic(s)	<b>Development of the self in society</b>
CAPS Subtopic(s)	<ul style="list-style-type: none"> <li>• Values and strategies to make responsible decisions regarding sexuality and lifestyle choices to optimise personal potential               <ul style="list-style-type: none"> <li>– Behaviour that could lead to sexual intercourse and teenage pregnancy, sexual abuse and rape</li> <li>– Values such as respect for self and others, abstinence, self-control, right to privacy, right to protect oneself, right to say 'No' and taking responsibility for own actions</li> <li>– Skills such as self-awareness, critical thinking, decision-making, <b>problem-solving, assertiveness, negotiations, communication</b>, refusal, goal-setting and information gathering relating to sexuality and lifestyle choices</li> <li>– Where to find help regarding sexuality and lifestyle choices</li> </ul> </li> </ul>
Link to other subtopics in CAPS	<ul style="list-style-type: none"> <li>• Development of the self in society. Strategies to enhance self-awareness, self-esteem and self-development: factors influencing self-awareness and self-esteem, including media</li> <li>– <b>Strategies to build confidence in self and others:</b> communication, successful completion of tasks or projects, participation, community organisation for life, making good decisions and affirmation of others</li> <li>– Emotional changes: maturing personality, depth and control of emotions, feelings of insecurity, changing needs, interests, feelings, beliefs, values and sexual interest</li> </ul>
This lesson will deal with the following	<ul style="list-style-type: none"> <li>• Define assertive communication</li> <li>• Identify the steps of assertive communication</li> <li>• Apply assertive communication steps to situations related to sexual and reproductive health</li> <li>• Differentiate between assertive, passive and aggressive communication</li> </ul>
Concepts	<ul style="list-style-type: none"> <li>• Assertiveness</li> <li>• assertive communication</li> <li>• negotiation respect</li> <li>• sexual intercourse</li> <li>• rape</li> <li>• sexual abuse</li> </ul>

<b>Teaching methodologies</b>	<ul style="list-style-type: none"> <li>• Interactive teacher explanation of assertive communication tools</li> <li>• Class discussion</li> <li>• Group presentations</li> <li>• Demonstrations</li> </ul>
<b>Time</b>	60 minutes

## BRIEF LESSON SUMMARY

Learners will begin the lesson by deepening their understanding of different styles of communication; for example passive, assertive and aggressive communication. They will examine the differences between these styles of communication. They will come to see the benefits of using assertive communication in different situations. Learners will be introduced to a tool on how to communicate assertively and will put it into practice by applying it to different sexual and reproductive health situations.

## KEY POINTS

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



## RESOURCES/MATERIALS

No additional material required



## PREPARATION FOR THE LESSON

Review **Reading 10.8.1 Improving your communication style**. Reflect on your own communication style as well as the communication styles of your learners as you prepare for the lesson.

Look at the **Educator resource 10.8.1: Mind map** to see how the concepts in Grade 10 SLPs are interlinked

and build on each other. Think about pulling the threads together and consolidating the information as you move to the last two SLPs in the series for Grade 10. When you get to the last two lessons, reinforce ideas related to self-confidence and developing self-confidence in an integrated way, in line with this lesson's CAPS subtopics.

Reinforce skills such self-awareness, critical thinking, decision-making, problem solving, goal setting, assertiveness, negotiations, communication, and information- gathering related to sexuality and lifestyle choices. Make the examples relevant to your learners and their challenges in life.

### Activity A: Assertive communication

In this activity, passive, assertive and aggressive communication will be demonstrated so that learners can see the difference between them and understand the effectiveness of assertive communication.

If time constraints are a consideration, ask learners to identify topics for their role-plays on different communication styles before the lesson.

### Activity B: Putting assertive communication tools into practice

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

Assessment: Lesson 10.8			
Activity	Time	Type of assessment	Form of assessment
Activity A: Assertive communication	25	Educator, Informal	<ul style="list-style-type: none"> <li>Brainstorm</li> <li>Written task</li> </ul>
Activity B: Putting assertive communication tools into practice	35	Educator, Informal Peer, Informal	<ul style="list-style-type: none"> <li>Group role play</li> </ul>
Time	60		

## TEACHING THE LESSON



### ACTIVITIES

#### Activity A: Assertive communication

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

- Write the following scenario on the board: **Your partner has been pressuring you to have sex for a while now. You are not ready but fear your partner will leave you if you do not.**

2. Tell learners that you are going to respond to the partner in three different ways. Their task is to note the differences between the responses and determine which response will be most effective.
3. Do the three demonstrations:
  - a. Passive communication: For example, “That seems like an interesting idea but I am not really sure”.
  - b. Aggressive communication: For example, “Would you stop harassing me about this? That is all you ever think about!”
  - c. Assertive communication: For example, “I understand that you really want to have sex but I do not feel ready yet. I think we have a great relationship but let’s strengthen it even more first. We also need to talk about using condoms”.

### NOTE TO THE EDUCATOR

Another way to do this would be to have a few learners demonstrate each of the responses. You would need to brief them before the activity.

In discussion and during the demonstrations, highlight that the scenarios should also look at girls pressuring or harassing boys. Examples should not only portray boys as perpetrators. As with lesson 10.2, be prepared to give positive reinforcement to boys as well as girls who speak out on gender equality.

4. Ask the learners what they observed regarding the three responses. How would they describe the type of communication seen in each one? Which style of communication do they think is most effective?
5. Explain that they have observed and are describing passive, aggressive and assertive communication. Ask them to turn to **Reading 10.8.1: Improving your communication styles** and read it together. Answer any questions regarding the types of communication.
6. Ask learners to give examples of when they think assertive communication would be useful in:
  - a. peer relationships
  - b. friendships
  - c. romantic /intimate /sexual relationships
  - d. family relationships, including siblings and cousins, and with parents and grandparents (elders)
  - e. school relationships, for example, with teachers
7. Emphasise that when both partners in a relationship use assertive communication on a regular basis, they will be able to maintain a healthy relationship. Assertive communication can protect you as an individual in different ways. It can help to protect you from aggressors, sexual abuse, infections and unintended pregnancy. Being able to state clearly what you want and what you need, will make you less vulnerable. Everybody benefits from assertive communication regardless of gender or sexual identity.
8. Refer the learners to **Worksheet 10.8.1: Communication in an uncomfortable situation**, and ask them to determine if the responses to the situation are passive, assertive or aggressive. Quickly review the responses together after they have finished working and emphasise the core messages related to the scenario given in the worksheet.

## Activity B: Putting assertive communication tools into practice

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

1. Tell the learners that the focus will now be on putting assertive communication into practice. Refer them to **Reading 10.8.2: Four step assertive communication tool** and read through the steps one can take to practice assertive communication. As you go through the steps, give an example that the learners can relate to.
2. Divide learners into groups and refer them to **Worksheet 10.8.2: Handling situations using assertive communication**. Assign each group one of the sexual and reproductive health topics in the left column. Assign the second topic on practicing safe sex to as many groups as possible. Tell the learners that they will practice using the four steps to assertive communication for the situations provided. They will all practice in their groups and then they will choose two people to demonstrate one of the situations to the large group. Explain that they will do peer-assessments of the demonstrations and ask them to review the criteria found in **Worksheet 10.8.3: Group presentations: assessment criteria**.
3. Tell the learners that each group must make sure everyone participates in creating the assertive communication role-play and choosing how their group will present it to the class.
4. After each group presents, get everyone in the class to show their rating, (☺ = 2 ☹ = 1 ☹ = 0). Ask learner volunteers to count and give the group their score. This can be done very quickly, with a quick assessment given of the winning team.

### NOTE TO THE EDUCATOR

A creative option to save time for reporting back from groups is to ask learners to put their written group responses on the wall in the classroom. This allows other groups to read all the responses and to make notes of what is meaningful to them from the different responses.

5. Remind learners that assertive communication takes practice, but with time, they will get better at it and find that it helps them express what is important to them, while being respectful of others. It is a skill that is necessary in all sorts of negotiations, from within the home with family, to being with a romantic partner. Assertive communication leads to increased self-confidence because it involves speaking clearly about what you need and believe in – and obtaining positive results.
6. Go through the homework activity.



## CONSOLIDATION

The lesson began with defining passive, aggressive and assertive communication, and ended with learners applying steps to become more assertive communicators, especially in relation to SRH. As learners become more used to using assertive communication, they will be able to respectfully state what they need and want. This will help them to protect themselves.

Ask learners to look over the key points and core messages below.

### Core messages

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



## HOMEWORK

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



## ASSESSMENT

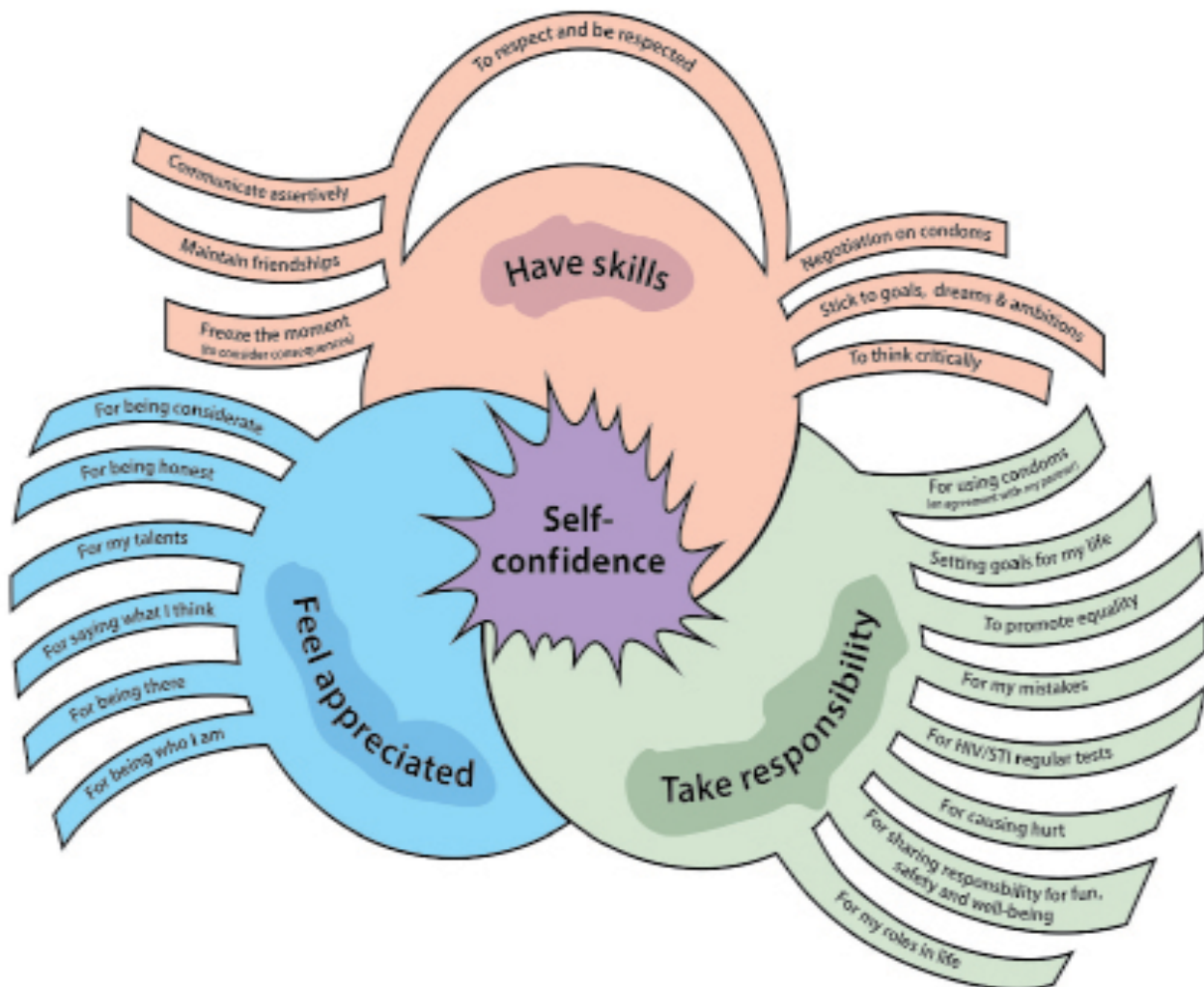
1. After the discussion in **Activity A: Assertive communication**, set up a class brainstorm on ideas learners bring to the discussion on assertive communication. Put up a clean sheet of flipchart paper on the wall in the classroom. Put only one label in the centre of the sheet: *Assertive Communication*. Each learner in the class can write up one point about assertive communication on the chart. Leave the chart up for several days. Learners should be invited to add to the page when they can or feel comfortable doing so. At the end of the activity you will have a comprehensive compilation of what learners have understood from the content of this activity. Learners refer to this again in a later SLP.
2. Learners use assertive communication tools in Activity B in group role-plays. Ask learners to use the rubric provided to assess group presentations.





## RESOURCES

### EDUCATOR RESOURCE 10.8.1: Mind map



## **READING 10.8.1: Improving your communication style <sup>28</sup>**

### **Assertive communication**

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

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

### **Passive communication**

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

### **Aggressive communication**

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

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

### **Learning to be more assertive**

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

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

People develop different styles of communication based on their life experiences. People tend to

<sup>28</sup>Mayo Clinic (2017). Retrieved: <https://www.mayoclinic.org/healthy-lifestyle/stress-management/in-depth/assertive/art-20044644?pg=2>

stick to the same communication style over time, and are often unaware of their own style. But you can change your communication style by being aware and learning to communicate in healthier and more effective ways.

Here are some tips to help you become more assertive:

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

## WORKSHEET 10.8.1: Communication in an uncomfortable situation, answer sheet

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

Uncomfortable situation <sup>29</sup>	Response	Aggressive	Passive	Assertive
A teenage boy and teenage girl are going to have sex for the first time. They do not have condoms. One of them says...	For all I know you have an STI!	✖		
	I also want to have sex, but only if we use condoms. I know where we can get them.			✖
	Well, whatever...		✖	

### 1. Which style of communication is most appropriate for the situation? Why?

**Possible answer:** Communicating assertively is the best way to handle this situation. It is good that the person responding has clearly stated that she or he wants to have sex too but only if they use condoms. There is no doubt about what the person wants and the communication is open.

### 2. Develop another possible response that would be effective in this situation.

**Possible answer:** I would like to have sex but we need to wait until we have proper protection. Let us make sure we have condoms available in the future.

### 3. Identify the Core messages that relate to this scenario.

**Possible answer:**

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

## READING 10.8.2: Four-step assertive communication tool



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



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



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



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

### Assertive communication tools

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

#### More about the tool

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

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

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

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

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

## WORKSHEET 10.8.2: Handling situations using assertive communication

**Instructions:** Ask learners to get into their groups for the next activity, which is to practice using the four steps to assertive communication for the situations provided below. Each group should choose two people to demonstrate what has been discussed.

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

<b>4. Issues about sexuality and preference</b>	a. Tell a trusted family member that you are romantically and sexually attracted to people of the same sex and you want to come out of the closet about it (be openly gay).
	b. You are attracted to a person of the same sex but you are not sure about the person's sexuality. You decide to approach them.

### WORKSHEET 10.8.3: Group presentations: assessment criteria

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





## GLOSSARY

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

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

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

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



## **Lesson 10.9**

Consent, rape and taking  
action

<b>Lesson 10.9</b>	<b>Consent, rape and taking action.</b>
<b>Grade</b>	10
<b>Term</b>	3
<b>Weeks</b>	1-5
<b>CAPS Topic(s)</b>	<b>Development of the self in society</b>
<b>CAPS Subtopic(s)</b>	<ul style="list-style-type: none"> <li>Values and strategies to make responsible decisions regarding sexuality and lifestyle choices to optimise personal potential               <ul style="list-style-type: none"> <li>Behaviour that could lead to sexual intercourse and teenage pregnancy, sexual abuse and rape</li> </ul> </li> <li><b>Values such as respect for self and others, abstinence, self-control, right to privacy, right to protect oneself, right to say 'No' and taking responsibility for own actions</b></li> <li><b>Where to find help regarding sexuality and lifestyle choices</b></li> </ul>
<b>Link to other subtopics in CAPS</b>	Development of self <ul style="list-style-type: none"> <li>Skills such as self-awareness, critical thinking, decision-making, problem-solving, assertiveness, negotiations, communication, refusal, goal setting and information-gathering relating to sexuality and lifestyle choices</li> </ul>
<b>This lesson will deal with the following</b>	<ul style="list-style-type: none"> <li>Define consent</li> <li>Recognise the importance of assertive communication in discussions related to consent</li> <li>Define rape</li> <li>Identify the issues related to rape and steps that can be taken to prevent it</li> <li>Identify the steps one should take after being raped to get the proper care, support and protection</li> </ul>
<b>Concepts</b>	<ul style="list-style-type: none"> <li>consent</li> <li>self-respect</li> <li>mutual respect</li> <li>self-control</li> <li>rape</li> <li>victim blaming</li> <li>perpetrate</li> </ul>
<b>Teaching methodologies</b>	<ul style="list-style-type: none"> <li>Metaphor analysis (with optional audio/video input)</li> <li>Class discussion</li> <li>Group discussion</li> </ul>
<b>Time</b>	90 minutes

## NOTE TO THE EDUCATOR

The content in this lesson is difficult to deal with as the two important concepts are consent and rape. For this 90 minute lesson, most of the time should be allocated to discussion in the classroom to ensure that learners have enough time to clearly understand these concepts.

The resources included on consent and rape are useful in getting learners to understand the relationship between consent and rape. Learners go through a practical exercise on both concepts.

Discussions in groups allow for learners to explore different opinions and views on otherwise very difficult content related to rape and consent. Use the feedback from group discussions to consolidate the lesson by asking learners to reflect on points of discussion they may not have considered. They can write additional discussion points on their own worksheets.

## BRIEF LESSON SUMMARY

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

## KEY POINTS

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



## PREPARATION FOR THE LESSON

A video about consent is available for the class to watch in preparation for this lesson. If you are able to, watch the video, **What is consent?** with your learners. The video uses a tea metaphor to illustrate basic ideas about consent that relate to sexual behaviour. It shows consent in a humorous but firm way. It was originally developed by police in England, and has now been adapted and used in many places. Share the website link with learners who may have their own access to the internet and can re-watch the video in their own time after the lesson. The link to the video can be found in the section on resources.

## NOTE TO THE EDUCATOR

It is important to be fully prepared for this lesson. Starting a discussion on rape may raise all kinds of alarms, fears, bad memories and/or experiences and emotions that learners may not be able to deal with on their own. Keep discussions focused on the content in the activities. If you recognise that learners need more emotional and/or psychological support, be sure to refer the learners to services that are able to assist them. As teachers, you too may have to confront your own fears and feelings. If you are not able to do this lesson with your learners, ask another LO teacher to assist.

Consult your Principal or HOD to be sure you have the most up to date list of services in your area.

If you are not able to show the video, it is still useful to listen to it on a smart phone, tablet or computer. If you cannot play the audio or video, use **Illustration 10.9.1: What is consent?** Remind the learners at the end of the lesson to read through the worksheet again to consolidate the discussion.

Become familiar with your school's process for addressing the needs of learners who have been raped or abused. The District Based Support Teams (DBSTs) provide information to schools.



## RESOURCES

- Tea Consent. Video length: 2:49 minutes <https://www.youtube.com/watch?v=fGoWLWS4-kU>
- Get a copy of the directory for support services in your district.

Assessment: Lesson 10.9			
Activity	Time guide	Type of assessment	Form of assessment
Activity A: Assertive communication and consent	30	Educator, Informal Peer, Informal	<ul style="list-style-type: none"> <li>Visual presentation using video</li> <li>Class discussion on content of video</li> </ul>
Activity B: Rape, an act of violence, an abuse of power	30	Educator Informal Peer, Informal	<ul style="list-style-type: none"> <li>Whole group discussion</li> <li>Written task: Passage analysis - understanding concepts</li> </ul>
Activity C: Getting care, support and treatment after rape	30	Educator Informal	<ul style="list-style-type: none"> <li>Brainstorm</li> </ul>
Time	90		

## TEACHING THE LESSON



### ACTIVITIES

#### Activity A: Assertive communication and consent

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

1. Start the lesson by asking for a few volunteers to share the examples they found for homework of the different styles of communication, which are passive, assertive and aggressive. Discuss which style of communication they found the most successful for the situations they observed. Ask a few volunteers to quickly demonstrate the difference between the three styles.
2. Ask the learners what the benefits of using assertive communication are in one's daily life and in romantic/sexual relationships (for example builds self-esteem and self-confidence/helps you to express your views and feelings more clearly to others/helps you to strengthen your relationship with other people).

#### NOTE TO THE EDUCATOR

The glossary provides useful definitions for terms used in the following activities. You may want to go over the glossary terms beforehand. Alternatively, ask learners to familiarise themselves with the terms on their own before this lesson is taught.

3. Write the word **consent** on the board. Ask learners to turn to the person next to them and quickly:
  - a. Share what they know about consent.
  - b. Discuss the link between assertive communication and consent.
4. Ask for a few volunteers to share what they think consent is and how it is linked to assertive communication.
5. Tell learners to read the information in **Illustration 10.9.1: What is consent?**

This information uses the humorous metaphor of a cup of tea to introduce some important ideas around consent. In this first reading, make sure you use the ‘tea’ terminology. If you can access the internet on a smartphone, computer or tablet, first watch (or listen to) the 2 minute video at this YouTube address: <https://www.youtube.com/watch?v=fGoWLWS4-kU>
6. Now ask learners to read the same information but to substitute the word “tea” with “sex”. Ask learners if the issue of consent differs simply because the words tea and sex were changed.

Clarify any questions learners have about the meaning of consent. Talk through the different situations highlighted:

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

Ask learners to give examples of a situation in which a person cannot make a good decision or communicate consent (for example situations where someone may have had a lot to drink or taken drugs).

Whether you do this on paper or use the short video you should encourage learners to try this exercise together with family members or friends they trust, to have a conversation around issues of consent.
7. Learners should read the story in **Illustration 10.9.2: Saying no, accepting no**. Ask learners to describe the communication between the man and the woman. Were they being respectful of one another? After the class affirms that they are showing mutual respect, ask: What did each of them do that was right? After the discussion, emphasise that both the man and woman showed self-control, assertive communication, and they really listened to each other.

### NOTE TO THE EDUCATOR

Make sure the learners understand the difference between the thinking bubble and the speech bubble. This is necessary for the lesson.

8. Emphasise that consent must be given by both partners before having sex. Without consent, it is forced sex. Sex without consent is considered to be rape. It is important to discuss with learners what the law says about age when discussing consent, as it refers to the age at which people can and cannot give consent.

### NOTE TO THE EDUCATOR

Learners may raise the importance of establishing good values and attitudes towards each other and others during the discussion on being able to say “No” and to accepting someone else saying “No”. Include their inputs in the discussion.

### Activity B: Rape – an act of violence, an abuse of power

**Introduction:** The next activities give learners more insight into rape and its effects, as well as how to protect oneself and care and treatment.

### NOTE TO THE EDUCATOR

Introduce this topic in an empathetic way. All of us may know someone who has been raped or sexually abused, although we may not know that about them. Rape is a very serious issue and all discussion should be treated with compassion and respect, knowing that someone in this room may have been raped. Tell learners that information about places to find help will be shared before the end of the lesson. Refer learners to the ‘Places that help’ section in their learner books.

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

Refer learners to **Reading 10.9.1: This is what rape is** in their learner book. After reading it, ask learners if the definition is clear to them. Ask if they understand that anyone can be raped and anyone can rape. Understanding what consent is, and what consent is not, is crucial for preventing rape and sexual violence.

Explain that another important message is to never blame the victim. Refer learners to **Reading 10.9.2: Your body belongs to you**. Read it to the class. Make sure you read and discuss the information under the heading, **Do not blame the victim**.

2. Ask learners to form small groups. Explain that they should:
  - Discuss how victim blaming happens and **share examples that may be familiar to them**.
  - Brainstorm practical ways they could help create awareness around not blaming the victim. If there is time, ask groups to make presentations to the large group.
3. Tell learners that the class will continue to explore how to stop rape, as well as the care, support, and treatment needed after somebody has been raped.



**Activity C: Getting care, support and treatment after rape**

1. Ask learners to look at **Illustration 10.9.3: Rape support and help**. Tell them to put themselves in the shoes of someone who has been raped and consider:
  - a. What actions will they need to take?
  - b. What care and support will they need?
2. Discuss the following:
  - a. Are they safe from further harm? What options do they have?
  - b. Have they told someone? Who would they turn to first?
  - c. What physical care do they need? Where should they go first?
3. Ask learners to turn to **Reading 10.9.3: What to do if you or someone you know is raped?** Review the information on the steps to take with the class.
4. Explain that the class will be doing a personal reflection for just ten seconds. Tell learners to sit in silence and think of one positive, practical thing they can say or do to begin to put an end to victim blaming. They should write this in their learner books.

**CONSOLIDATION**

Consolidate the lesson with the key points and the quiz below. This will allow you to assess learners' understanding of "consent".

**Test your understanding about consent:**

Read about the following situations, and give learners the chance to respond as a group.

Situation	Answer
Is it consensual sex (consenting sex) if a 17 year old has sex with a 14 year old?	No – this would be statutory rape.
You are at a party and see your friend who is very drunk go off with someone who wants to have sex with her – is she able to consent?	No – she will not be able to give consent
If a 15 year old has consented to sex with a young man or woman who is 19, is it considered statutory rape?	Yes
A 16 and a 17 year old have been together for a while, and each feels they are ready for sex. They talk about it, and agree they will use a condom for protection. Is this consensual?	Yes

Refer learners to the pages in their Learner Book that list the names and contact information of services that support victims of sexual abuse and rape. Tell learners they can come and speak to you whenever they want to, and that you are able to recommend places where they or anyone they know can get support.

Ask the learners to consider whether the following core messages have been covered in the lesson.

### Core messages

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



### HOMEWORK

For homework, share the activity worksheet: **What is consent?** Learners might want to ask your family to answer the quiz questions.

### NOTE TO THE EDUCATOR

There are a number of services available to support educators and learners to deal with issues related to rape. It is a good idea to put up a poster of services in the classroom for learners to access easily.

This information is also included in the Learner Book. Your district or school directory will have the names of other services.

### DIRECTORY OF SERVICES

This is useful information to have displayed in your classroom for learners to see and have access to if they need it. Make a poster with the following information and place it on the wall in your classroom.

There may be more support services already working in your school or district. Include this information too.

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

**PLACES THAT HELP- a directory on services that can be approached for support**

**Department of Social Development**

Gender-based Violence Call Centre

0800 428 428 Dial \*120\*7867# (free from any cell phone).

All child/gender-related violence and abuse questions and help for victims. Social workers available to assist.

**Stop Gender Violence Helpline** 0800 150 150

**Childline** 0800 055 555

**Lifeline South Africa**

Free confidential telephone counselling services. 0861 322 322 [www.lifeline.org.za](http://www.lifeline.org.za)

**Thuthuzela Care Centres**

**Find out if there is a thuthuzela care centre in your area.**

For a list of TCCs visit the website <http://isssasa.org.za/care-centres>



**ASSESSMENT**

Use the **Test your understanding about consent** as an assessment task. Learners can use peer-assessment to assess their understanding of concepts included in this activity.

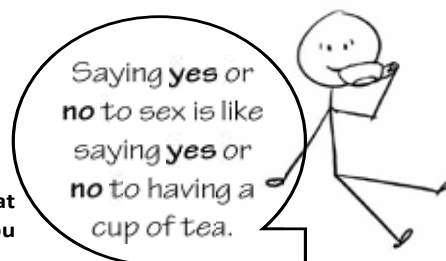


## RESOURCES

ILLUSTRATION 10.9.1: What is consent?<sup>30</sup>

What is  
consent?

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



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



## Read the page.

Replace words a cup of tea with "Sex"  
Replace the words drink tea with having "Sex"  
Read the page again. What is the message now?  
Does this help you to understand "consent"?

<sup>30</sup> Adapted from: <https://www.soulcity.org.za/media/materials/violence/we-want-to-be-free/view> and originally adapted from: <http://www.consentiseverything.com>

## ILLUSTRATION 10.9.2: Saying no, accepting no

Read through this story.



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

### READING 10.9.1: This is what rape is

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



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

#### What the law says about age and consent<sup>3<?></sup>

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

Under these laws:

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

### READING 10.9.2: Your body belongs to you

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



#### Your body belongs to you

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

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

Rape is a crime no matter who the rapist or the victim is. You can be reported, get convicted and go to jail



for rape. The South African justice system is clear on this. Civil society in South Africa is mobilising against the killing of women intimate partners (called femicide), sexual harassment and rape. We can join this movement and support it in different ways.

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

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

### **Being raped is NEVER your fault.**

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

### **Core messages**

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



### Illustration 10.9.3: Rape support and help



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

1. Tell someone you trust.
2. Seek help immediately.
3. **Physical care:**
  - a. If you or the person is injured, go straight to a hospital or health centre.
  - b. The doctor will do a forensic exam which is an exam to collect physical evidence. Do not wash your body. Hair, blood and semen can all be used as evidence.
  - c. Seek medical care immediately and no later than 72 hours, in order to get tested and to get treatment for protection from HIV, STIs and pregnancy (morning after pill or emergency **contraception**).
4. **Police:** If the person who has been raped wants to report the rape, she/he should go to the police station closest to where the attack took place. Offer to go with the person who has been raped, but also encourage them to take an adult they are close to with them.

#### KNOW YOUR RIGHTS <sup>32</sup>

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

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

<sup>32</sup><https://rapecrisis.org.za/get-help/>

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



## GLOSSARY

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

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

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

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

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

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

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

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

## BIBLIOGRAPHY

Action Aid.(2015) *ActionTalk Newsletter (August)*. Retrieved on March 14, 2016 from [http://www.actionaid.org/sites/files/actionaid/actiontalk\\_august\\_newsletter\\_aasa\\_2.pdf](http://www.actionaid.org/sites/files/actionaid/actiontalk_august_newsletter_aasa_2.pdf).

Ages 15-18: Developmental Overview. <https://www.parentfurther.com/content/ages-15-18-developmental-overview>. Retrieved March, 2018.

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

Beil, Laura (2012). *Early Arrival*. ScienceNews.org. Retrieved from: <https://www.sciencenews.org/article/early-arrival>.

B-wise Health. Bodies are different: What's your shape? Retrieved from: <https://bwisehealth.com/article/bodies-are-different-whats-your-type>

Child development: Development Milestones. Centre for Disease Control and Prevention. <https://www.cdc.gov/ncbddd/childdevelopment/positiveparenting/adolescence2.html>. Retrieved March, 2018.

Child Development Info: All developmental milestones. <https://pathways.org/topics-of-development/milestones/>. Retrieved March, 2018.

Columbia University. EJ Definitions. <http://www.columbia.edu/cu/EJ/definitions.html>  
Retrieved March 2018.

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

EdTech Review. What is critical thinking? Retrieved March 2018 [http://edtechreview.in/images/what\\_is\\_critical\\_thinking.jpg](http://edtechreview.in/images/what_is_critical_thinking.jpg)

Gordon, Gill (2016). *Stepping Stones for Children: a transformative training for children affected by HIV and their caregivers*. Practical Action Publishing Ltd: United Kingdom.

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

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

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

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

My Health (2018). Growth and Development, Age 15 to 18. Retrieved: <https://myhealth.alberta.ca/Health/pages/conditions.aspx?hwid=te7221>. Retrieved March, 2018.

Normal development: Middle Adolescence (Age 15 to 17 years old) <http://www.sapphirepediatrics.com/upload/teen%20composite%209-09.pdf>. Retrieved March, 2018.

Rape Crisis Trust, Cape Town. Retrieved : <https://rapecrisis.org.za/get-help/>

Reddy, S.P., James, S, Sewpaul, R, Sifunda, S, Ellahebokus, A, Kambaran, N.S., Omardien, R.G. (2013). *Umthente Uhlaba Usamila – The 3rd South African National Youth Risk Behaviour Survey 2011*. Cape Town, South Africa: South African Medical Research Council.

Rooth, E. 1999. Introduction of Life Skills. Hands-on approaches to life skills education. Education for life Series. Cape Town. Via Africa

Shisana, O., Rehle, T., Simbayi, L.C., Zuma, K., Jooste, S., Zungu, N., Labadarios, D., and Onoya, D. (2014). *South African National HIV Prevalence, Incidence and Behaviour Survey, 2012*. Cape Town, South Africa: HSRC Press. Retrieved from <http://www.columbia.edu/cu/EJ/definitions.html> on 15 February 2018.

Signs of Normal Development Stages Ages 13-18, The Whole Child. <https://www.thewholechild.info/resources/age-group-13-18/signs-of-normal-development-stages-ages-13-18/>. Retrieved March, 2018.

Soul City Institute for Social Justice. RISE, issue eleven. Page 14

South City Institute for Social Justice (2016). *We want to be Free*. Retrieved: <https://www.soulcity.org.za/media/materials/violence/we-want-to-be-free/view>

Stages of Adolescence. [www.healthychildren.org/English/ages-stages/teen/Pages/Stages-of-Adolescence.aspx](http://www.healthychildren.org/English/ages-stages/teen/Pages/Stages-of-Adolescence.aspx). November 21, 2015. Retrieved March, 2018.

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

*Sex and the Teen Brain: Disrupting What We Think We Know. Findings from the 2016 Kirby Summit*, Retrieved: <https://www.etr.org/default/assets/File/kirby-summit/Kirby-Summit-2016-Report.pdf>.

[Thames Valley Sexual Violence Prevention Group](http://www.consentiseverything.com). Retrieved: <http://www.consentiseverything.com>

The SANAC website (<http://ivizard.org/sanac/viz/>)

United Nations (2015). *Transforming our world: the 2030 Agenda for Sustainable Development*. <http://www.un.org/sustainabledevelopment/sustainable-development-goals/>

