



For young women

Delivered at

**Western English Language
School (WELS)**

By Women's Health West, cohealth,
Maribyrnong City Council and Centre for
Culture Ethnicity and Health.

Facilitator's manual

Reviewed December 2016

Background

Women's Health West, cohealth, Maribyrnong City Council and the Centre for Culture, Ethnicity and Health work in partnership with the Western English Language School (WELS) to deliver a human relationships program to newly-arrived young people.

This program has been periodically reviewed with this version being the result of a content review carried out in 2016. The program draws on evidence-based research and resources, the expertise of practitioners from Women's Health West, cohealth, Maribyrnong City Council and the Centre for Culture, Ethnicity and Health as well as the knowledge of teachers and young people who have been involved in the program.

The Human Relations Program runs for five weeks. This includes additional time for discussion of the emotional aspects of human relationships and time to concentrate on comprehension and working effectively through the use of interpreters.

A 2011 program review saw the inclusion of topics such as respect and diversity, with exploration of ways to counter homophobia, racism and cyber-safety. A clearer focus on discussion of the social and cultural context of early pregnancy has also been included. The 2013 mini-review saw the removal of cyber safety and bullying sections as WELS now covers these issues in their homeroom and classroom groups. Existing sections on relationship violence and sexual decision-making have been expanded.

The latest review consolidates new activities with more of a visual focus and has updated the order of the session themes delivered.

We would like to acknowledge all past and present community workers, teachers and students that have contributed to the material within this program.

Program objectives

The aim of the Human Relations Program is to:

Resource young newly-arrived students from interrupted schooling backgrounds with sexual and reproductive health knowledge and skills so that they can make safe, respectful and informed decisions about relationships and better ensure that they and their partners have optimal sexual and reproductive health.

Program principles

Principles of learning English as an additional language

WELS provides programs for primary and secondary students who speak English as a second language. In accordance with the Western English Language School, the Human Relations Program is guided by the following principles:

1. All English language learners are capable of learning to high standards if optimal teaching and a supportive environment are provided.
2. Learning is a process of apprenticeship in which novices become experts with scaffolding from the teacher or a more capable peer.
3. Language is acquired through social interactions that are engaging, meaningful and purposeful.
4. Teaching and learning needs to be responsive. Cultural norms and expectations for effective participation in mainstream social and academic life need to be explicitly taught to English learners.
5. Using language is more than using correct grammar and vocabulary. It requires cultural knowledge of what is appropriate and an understanding of discourse.
6. Use of rituals or familiar participation structures is necessary when concepts of language are new. Familiar concepts and familiar language can serve as the vehicle to learn new rituals or ways of participating in academic events.
7. Language learning requires conscious effort by the students, and by the informed support of the teacher.
8. Students should be encouraged to engage all of their resources, including their native language in the learning of English as a second language.
9. In instruction the content must be rich and challenging, the language must move beyond the sentence level to approximate natural discourse and the teaching must be carefully scaffolded.
10. Academic practices, learning and self-assessment strategies need to be explicitly taught to English language learners.
11. Instruction, curriculum and assessment are aligned to reflect high standards and best practice.
12. All parents can become successful partners in the education of English learners by continuing to support the development of the first language.

Facilitation principles¹

The Human Relations Program is informed by the following facilitation principles:

The following are useful skills for any group work leader:

Being an active listener. This means giving your full attention to the group. It is more than just simply listening. It involves being aware of the subtle ways in which people communicate, including their expressions, acknowledging the content being discussed, and importantly being aware of what is not being said.

Clarifying. This involves checking out with participants what you think you have heard and sorting out competing or conflicting views. This reinforces to participants that they have been heard and helps to move discussions forward.

Summarising. It is important as facilitators to summarise key points of discussions and make summary statements. This can be achieved through your active listening and by taking notes. This is a good task to share with your co-facilitator. It is best to plan in advance how this will be achieved.

Providing encouragement and support. It is important for participants to feel able to freely express their views. Therefore facilitators need to create a climate of safety and trust. Setting ground rules for discussion at the beginning of the session can do this.

Not everyone feels comfortable sharing their views in a large group setting, so think about breaking up into smaller groups as well. The facilitator must be active in preventing people from dominating, as well as encouraging and valuing non verbal input such as nodding, listening etc.

Validate. Validating people's perceptions and views is another way of creating a positive environment. You may not agree with their views. However, validating enables participants to feel respected and valued. For example, 'that's a really useful point, because it illuminates a different aspect of what we are talking about' etc

Keeping Time. Participants usually value a session where time frameworks are set, e.g. you have two minutes to discuss this with the person sitting next to you. Changing activities also enhances learning and allocating times helps avoid becoming disengaged by conversations drifting and dragging on.

Evaluation. Evaluation is critical for gathering information that gives evidence as to whether the goals of the module were achieved. Facilitators should ensure that ample time is set aside for evaluation in each workshop. This means that at least ten minutes be allocated to this task in every training session. Participants should also be informed at the commencement of each workshop that this will occur. See Evaluation Proforma

Some groups might not be able to complete an evaluation form for reasons of language and literacy. In these cases a large group discussion is more useful, with group members asked to brainstorm their ideas about:

- what worked well
- what could have been done differently
- and/or what other things they would like to learn more about.

¹ Sourced from: Women's Health West (2010) *Family Violence Intervention and Prevention of Violence against Women Training Package*, Women's Health West: Footscray.

Relationships and sexual health education

Respect. Health. Life.



I feel more confident to be myself.

I now understand what's important in a healthy relationship.



And it's good that we can talk about it.



I believe it's important to discuss sexual health issues with my parents.

12 PRINCIPLES of BEST PRACTICE

Relationships and sexual health education should:

- * include the development of lifelong skills, clarification of values and acquisition of knowledge to empower students to make informed, safe and healthy decisions
- * offer a positive and open view of relationships and sexuality in the context of respect, intimacy, readiness and love
- * be respectful of diversity, including different cultures, religion, sexuality and family values
- * recognise and respect the importance of family as a source of sexual health information, education and values
- * encourage young people to delay sexual activity and recognise and respect the right of young people not to be sexually active
- * use an approach that is supportive, non-judgmental and works towards reducing potential risks when developing sexual relationships
- * be delivered early before young people go through puberty and develop sexual relationships
- * be appropriate and relevant to the development and maturity of young people
- * be delivered within a safe, supportive environment
- * be delivered by the classroom/health teacher
- * be of sufficient duration and intensity to produce change
- * be sensitive and responsive to the issues for those young people who may have had unwanted and abusive sexual experiences



Learning about relationships and sexual health will help me now and later in life.



I've learnt a lot about respecting myself and others.



It's great! I know more about my body, keeping myself safe and where to go for help.



Supporting school communities

For more information go to www.shinesa.org.au

Delivering the program

Who should deliver the program?

The program is designed to be delivered by two facilitators for both the young women's and men's class. A community health nurse and a health promotion worker are preferred, as it offers a good balance between the biology of human relations and the social model of health. In 2016, an additional observer was present in the women's group to aide with activities and note taking (e.g. quiz responses). Students seemed comfortable with a consistent third person.

Participation criteria for students

The program's target population is young people aged fourteen years or over, who are newly-arrived students and have experienced interrupted schooling. Previously several classes have merged to participate in the program. However this caused difficulties around timetabling and often meant that students weren't of a similar English proficiency. Participants must therefore be from the same class, as opposed to individual students from numerous classes.

Class sizes

The size of the class impacts on the facilitators' ability to explore ideas, engage with students and to ensure that students understand the material. Class size must therefore be limited to 18 students.

Sex disaggregated classes

For the program to run effectively classes need to be desegregated by sex. Teachers, interpreters and facilitators are also divided in this way. WELS has few male teachers, however every effort should be made to ensure a teacher is present during the boys' program. While the facilitator team makes every effort to ensure male facilitators are available for the boys, the boys have agreed to have a female facilitator when no other arrangements can be made.

Using and booking resources from the school

The booking form on the next page has been developed to record the equipment and resources required to deliver each module and to confirm that WELS staff have made the appropriate bookings for the program dates.

Memorandum of Understanding

Program partners agree to and sign a Memorandum of Understanding, outlining the responsibilities of all agencies in the organisation and delivery of the program. This document needs to be reviewed and signed when major changes occur.

Planning and resources needed

Human Relations planning
<p>Planning and management meetings: quarterly at Women's Health West. Purpose: brainstorming for funding sources, planning dates for programs, any staffing updates.</p>
<p>Three weeks before the program is due to begin:</p> <ol style="list-style-type: none"> 1. Request student numbers and language groups needed from school (give WELS one week to send this through). 2. Confirm with WELS if any MEAs are available (in place of interpreters) 3. Meet with facilitators to confirm roles, run through any changes.
<p>Two weeks before program due to begin:</p> <ol style="list-style-type: none"> 1. Book on-site interpreters through On Call Interpreters. Try and request the same interpreters for each session if possible. Always provide a brief explanation on the nature of the program and that we trust interpreters will translate in an accurate and respectful manner.
<p>Materials needed for each week:</p> <ul style="list-style-type: none"> - Butchers paper and Blutak for student activities - Session activities (see each week for details) - Pens and textas, including whiteboard marker for facilitators - Plastic reusable name tags - USB stick with slides for each week - Student prizes (pens and stickers from Kmart) - Laptop (provided by school) - Student handouts (where necessary) - Evaluation handouts (emoji's and traffic lights)
<p>Day after each program:</p> <ul style="list-style-type: none"> - Send courtesy email to all co-facilitators requesting their summary from the lesson (dot points) and any evaluation data not received from the boys group - Enter evaluation data into spreadsheet - Scan interpreter timesheets and student worksheets and save on network in WELS folder
<p>Once the program has finished:</p> <ul style="list-style-type: none"> - Consolidate all evaluation data and send to co-facilitators for additional comments - Collect MEA/teacher feedback from WELS - Summarise program and send this brief summary to partners - If last program for financial year (i.e. Term 2), consolidate into a larger report and send to Team Leader for comments before circulating a final version to partners. This report will also be sent to funders.

A laptop needs to be arranged via WELS for each week. When using the board and where student's answers to discussion questions are being recorded and displayed, one facilitator should lead the discussion while the other writes comments and summaries on a notepad. At the end of the lesson, photos of the whiteboard can be taken (with a mobile phone) and emailed to WHW project worker for storage and summary.

The materials box set aside in the health promotion resource room contains butchers paper and pens/textas, a USB stick with the materials needed for display on the smart board each week, evaluation materials, laminated activities and games. A plastic folder for storing interpreter timesheets and evaluation materials is also there.

The structure of each session

Each session is delivered over two class periods, a total of 90 minutes. Sessions generally follow the structure outlined below:

- Begin with an icebreaker activity
- Briefly review information covered the week before
- Baseline quiz activity and explanation of emoji activity
- The topics for the week are discussed through the use of interactive activities including PowerPoint and small group activities
- Finish with a evaluation activities (quiz and emoji)

The importance of cultural sensitivity

Much of the material covered within this program will be confronting for students, as many will have ideas about the extent to which they should know, talk about or engage in sexual activities and relationships.

It is important to reinforce that we do not intend to challenge students' cultural, religious or family beliefs throughout the five week program. But rather, we want to provide students with information and an opportunity to engage with these ideas before they enter mainstream schooling. One way to put it to the students is that we want to make sure they have all the information needed if they ever had to make a decision for themselves, or if a loved one or friend approached them for help.

Students should be encouraged to discuss the program material within their cultural context. Facilitators can encourage such discussion by asking questions such as:

- *What have you been taught about having babies?*
- *Does your family discuss menstruation?*
- *What is the word for puberty in your language?*
- *What have you been taught about how to protect yourself against sexually transmitted infections?*

Reducing student anxiety

Whenever possible we aim to reduce the anxiety students feel about sexuality education and to enable students to feel safe and comfortable to participate in the program. We do this by:

- Promoting a fun, safe and respectful environment (and creating group rules)
- Involving teachers and interpreters in interactive activities
- Providing a '*content warning*' about sensitive topics that might be coming up that week (such as abortion or abuse). See session information for wording.

Avoiding heteronormative language and stereotypes

Heteronormativity is the '*assumption that heterosexuality is the only sexual orientation or only norm... that sexual relations are most (or only) fitting between people of opposite sexes*'. Heteronormative language, whilst often considered a

'standard' way to describe relationships (e.g. 'your boyfriend/ girlfriend'), can be exclusionary to same sex-attracted and questioning individuals, especially young people. In this program, an effort is made not to assume sexual identity and to openly encourage the discussion of sexual diversity.

For example, when talking about sexual attraction:

'During puberty you might start noticing boys that you like, romantically'

It is more appropriate to say:

'During puberty you might start to notice people you like, romantically'

Of course, there are situations when we will talk exclusively about heterosexual relationships and sex – this relates to pregnancy scenarios and options. When discussing respectful relationships, life goals and STIs/safe sexual practice, we will endeavour to include a range of different couples to represent.

We also make a conscious effort not to perpetuate gender stereotypes, while also acknowledging that rigid gender roles may be normalised and common among a lot of cultural groups represented in these classrooms. Part of the Human Relations program is to inform young women about their rights and options in Australia relating to education, respectful relationships, sexual health and life goals.

Working with interpreters

All partner agencies agree that the Human Relations Program is pivotal in preparing students for life beyond WELS. For this reason we have agreed to engage professional interpreters so that students can be supported to learn in their first language. If a professional interpreter is not available for some reason, it is important to notify a WELS teacher and discuss various alternatives. For example, a WELS teacher or Multicultural Education Aide (MEA) might be able to provide one-on-one support to students who do not have an interpreter, or students might need to be removed from the class.

Prior to commencing the first week of the program, facilitators need to meet briefly with the interpreters to clarify with them their roles and responsibilities, as well as the topics that will be covered in the program. The aim of this is to communicate with interpreters that they might find some of the material culturally challenging. It is important to inform interpreters that we don't require them to communicate their personal views and beliefs to students, but simply interpret the material that is presented. An information / key word sheet detailing the topics covered in the program also needs to be distributed to interpreters prior to its commencement. This will help to ensure that interpreters are prepared to discuss relationships and sexuality in a way that is positive and open.

Consistency of interpreters throughout the program is also important. The service booking request for interpreters needs to reiterate that we require the same interpreters for the entire five week program if possible. In past years, younger interpreters have proven to be the most effective in conveying accurate sexuality and sexual health information to young people involved in the program. Therefore, it is

important to communicate to the interpreter service that young interpreters are preferred.

During class room sessions, it is important for facilitators to ensure that interpreters are positioned where everyone who needs their language support can hear them. It is also important to remember that some languages take longer to interpret and therefore the program needs to go at a pace where everyone is engaged.

To aid in the smooth running of sessions and to keep the active engagement of interpreters, the facilitators could use the 'green card' tool. This means that once the facilitator has finished talking and wants the interpreters to translate what has been said, they hold up a laminated green card. This can be used throughout all sessions.

Support from teachers

The number of MEAs and teachers participating in the program will vary from term to term. A partnership approach with teachers has proven to be very successful. Teachers are to be given the program material a week before the program commences (PowerPoint presentation or brief summary of content) so that they can support students to understand the terminology that is used and the information provided. Teachers are required to participate in the session activities in order to promote discussion and assist students to understand the program's content. Teachers also assist with program evaluation by providing feedback and by encouraging and supporting students to complete the evaluation component of each session.

The question box

In the past, a question box was left in a prominent place at WELS. This provided students with an opportunity to ask questions anonymously by putting their questions into the box at any time during the five week program. The facilitator would read out questions from the previous week one at a time and then ask the group for their responses to encourage discussion. After students have had an opportunity to contribute to the discussion, it is important that facilitators provide an answer to the question to ensure that information is accurate and any myths are dispelled.

As of 2016, the question box was scrapped due to low uptake. Facilitators now encourage teachers and students to approach them at the end of the lesson each week with any questions they might have, and these can be discussed with the wider group the following week.

Program evaluation

An evaluation will be conducted at the end of each session. The aim of conducting an evaluation is to determine any modifications for future sessions based on student and teacher feedback (e.g. what works, what doesn't, what is 'boring'/too jargon-heavy, what is fun) and to also determine changes in knowledge and awareness among students. After the five week program is delivered, WELS staff will provide feedback to the welfare coordinator regarding the program. This will be fed back to the facilitators. We appreciate all feedback as this will help improve the sessions and ensure that the content and delivery remain responsive to the needs of participants.

This program manual will be reviewed and updated in conjunction with key partner agencies periodically. The evaluation has been recently modified to include a number of key activities:

Knowledge quiz:

The knowledge quiz helps to determine changes in awareness as well as topic/fact retention. At the beginning of each lesson, after group rules are discussed and ice breaker is completed, facilitators will quiz the students using a Power Point presentation and traffic light cards (red= false, green = true) with four key questions relating to that week's topics to collect baseline data. The answers will NOT be given until the quiz is repeated at the end, to determine learning and retention. In the final week, a 10 question quiz will take the place of both the baseline and end-of-lesson quiz and will test retention across the five weeks. This is to be done at the end of lesson 5.

Emoji faces:

The emoji activity aims to provide more context to the sessions and how students felt emotionally during the class. This may help to determine sessions which are considered the most/least enjoyable. If students indicate that they are feeling sleepy or bored, for example, it may prompt facilitators to present the information in a more engaging way next time. Students are given a set of four laminated emoji cards at the start of every lesson. These faces correspond to:

- Happy



- Sad



- Embarrassed/shocked



- Sleepy/bored



Students are asked to select ONE card that best represents their feelings during that lesson and drop it in a box at the back of the class at the end of the lesson. This is repeated each week (at the end). Responses are collated and recorded and may help to assist in the planning of future lessons.

Hints for the facilitator and supporting information

Throughout this program manual, activity descriptions are accompanied by 'hints for the facilitator', which are points that will aid in the smooth delivery of activities, as

well as 'supporting information'. While the supporting information is not necessarily content that must be delivered, it can assist the facilitator with background information on the topics discussed, can be used to give additional information that augments discussions in the classroom, or can be referred to if questions are raised by students. The facilitator may need to check whether or not this information is current prior to running the sessions.

WELS Human Relations Program Outline

Week 1: Puberty and reproduction

- Emotional and physical changes associated with puberty
- Anatomy and Menstrual cycle
- Hygiene

Week 2: Promoting healthy and respectful relationships

- Healthy relationships
- Relationship violence and harms
- Rules of sex and consent (legalities and norms)

Week 3: Contraception

- Contraception choices
- Making safe contraception choices – scenarios
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Week 4: Pathways and prevention of teenage pregnancy

- Life goals
- Pathways for young women
- Pregnancy and pregnancy options- scenarios

Week 5: Safe sexual practices and sexual decision-making

- Preventing sexually transmitted infections
- Developing communication, decision-making and negotiating skills – scenarios

Week one: Puberty and reproduction

Aim of this session

At the end of the session students should have an understanding of:

- Physical and emotional changes that occur during puberty
- Female and male reproductive systems
- The simple workings of the menstrual cycle
- An understanding of hygiene practices during menstruation and entering adulthood

Materials that you will need:

- Name tags
- Ball for icebreaker
- Emoji's (laminated) and box
- Traffic light cards for quiz and share/can't share activity
- USB stick containing:
 - Week one quiz and lesson materials on PowerPoint
 - Menstruation cartoon cycle (in the PowerPoint)
- White board markers
- Butcher's paper
- Coloured textas
- Blue tack
- Anatomy labels (laminated)
- Hygiene bag
- Three sets of male and female body outlines
- Notebook for making observations and recording quiz results
- Period pain prevention exercise handout

Session overview

Time estimate	Topic	Activity description	Resources
5 minutes (before students arrive)	Set up	<ul style="list-style-type: none"> ▪ Set up prior to the session starting <ul style="list-style-type: none"> ○ Set up laptop and switch on projector ○ Set up chairs in semi-circle ○ Place all student resources on table near door ○ Place emoji box at the back of the room 	<ul style="list-style-type: none"> ▪ Student resources: <ul style="list-style-type: none"> ○ Name tags ○ Emojis ○ Traffic light cards (one green and one red per student) ▪ Emoji box ▪ Laptop ▪ Projector remote
10 minutes	Introducing the program and ice-breakers	<ul style="list-style-type: none"> ▪ Ball game ▪ Ensure interpreters are sitting where everyone needing their language skills can hear ▪ Facilitators to introduce themselves and outline the program ▪ Establish group rules (bring these rules back each week) ▪ Explain the quiz and emoji activity and ask students to think about this during the lesson ▪ Explain that students' cultural, religious or family beliefs will be heard and respected ▪ Baseline knowledge quiz (via PowerPoint) 	<ul style="list-style-type: none"> ▪ PowerPoint slides ▪ Ball ▪ Whiteboard marker ▪ Butcher's paper ▪ Blue tack
25 minutes	Changes during puberty	<ul style="list-style-type: none"> ▪ Activity about the physical and emotional changes that occur during puberty 	<ul style="list-style-type: none"> ▪ White board markers ▪ Butcher's paper ▪ Coloured textas
20 minutes	Anatomy and the body	<ul style="list-style-type: none"> ▪ Anatomy of the body activity 	<ul style="list-style-type: none"> ▪ Anatomy cards ▪ Three sets of body outlines (female and male)
10 minutes	Menstruation	<ul style="list-style-type: none"> ▪ Menstrual cycle activity, including preventing period pain exercise ▪ Explanation of pads and tampons 	<ul style="list-style-type: none"> ▪ Menstrual cycle cartoon ▪ Period pain exercise handout for all students ▪ Pads and tampons
15 minutes	Hygiene bag	<ul style="list-style-type: none"> ▪ Activity about taking care of yourself during puberty 	<ul style="list-style-type: none"> ▪ The hygiene bag ▪ Traffic light cards
5-10 minutes	Evaluation activity	Repeat of the evaluation quiz (this time with answers) Emoji's in the box	<ul style="list-style-type: none"> ▪ Evaluation quiz on PowerPoint (with answers) ▪ Traffic light cards ▪ Emoji cards

Activity one: introducing the program

Aim of this activity

The aim of this activity is to introduce yourself to students and let them know where you are from and what you will be teaching them over the next five weeks.

What do you need?

- A ball
- Human Relations Program Outline on PowerPoint (PowerPoint: WELS week 1)

Steps

1. Start throwing the ball around the room so that each student can introduce themselves by saying their name and where they were born. They could also state:
 - Their favourite food
 - Their hobbies
2. The student will then throw the ball to someone else who will repeat the process. This includes facilitators and teachers.
3. Once you have finished the game, ask students to sit in the semi-circle. Ensure that interpreters are positioned where everyone who needs that language support can hear.
4. Explain that you will be running a five week program and that some students might find the information that is discussed embarrassing and confronting. Encourage everyone to participate, including the teachers/MEAs.
5. Reassure students that their religious and cultural beliefs will be respected and heard.
6. Elicit from the students group rules that will be used throughout the program. Group rules will be listed on butcher's paper and posted on the board during each session.
7. Introduce the evaluation activities (quiz and emoji's) and that they will be repeated every week throughout the five week program.

8. Go over the Human Relations Program Outline by reading out the headings of each week (see Power Point: WELS week 1).

Provide students with an opportunity to ask questions about the content and what is expected of them.

Hints for the facilitator:

Although some students at WELS are sexually active and are confronting issues raised in this program, some students and indeed their families will be challenged by the information provided. It is important to reinforce that we do not intend to challenge students' cultural, religious or family beliefs. Rather, the information we will explore is designed to help students in their transition into mainstream schooling and as they grow into young adults. It is also designed to help them if they are ever asked for advice or assistance from their friends and peers.

Baseline evaluation activity – quiz

Aim of this activity

The aim of this activity is to determine baseline knowledge at the start of the lesson. This four question quiz will be repeated at the end of the lesson to determine any changes in knowledge/retention from lesson. Answers will **not** be given during the baseline quiz.

What do you need?

- Questions on PowerPoint
- Traffic lights

Steps

Explain to the students that you will be playing a quiz game which will also be repeated at the end. Students are to try their best to answer the questions, even if they don't know the answer. Holding up the traffic lights to signify their response- true = green, false = red. The co-facilitator is to record the baseline responses in their notebook.

Questions for week one:

1. The physical and emotional changes that happen to your body between the age of 10 and 16 are called puberty
2. During puberty you grow pubic hair under your arms and on your genitals
3. Once you start menstruation you can get pregnant if you have sex without a condom or contraception
4. The ovaries are part of a women's reproductive system

Activity two: Changes during puberty

Aim of this activity

The aim of this activity is to assist young people to understand that there are a series of changes that occur to a young person's body as they transition from childhood to adulthood. It is important that students understand that young people experience a range of physical and emotional changes during puberty that impact on their sexual and reproductive health status. For example, once young women start menstruation they reach reproductive maturity. This activity uses both the young people's first language and English, which is an effective EAL technique, to support young people to learn the vocabulary and meaning of puberty in English.

What do you need?

- White board markers
- Butcher's paper
- Coloured textas

Steps

1. Students will already be sitting in their language groups. Depending on the size of the class, encourage them to also sit with other students (e.g. maybe three larger groups made up of a few different language groups to encourage students to work together).
2. Give a very brief overview to the students about getting older, and that there are a number of changes that happen to us at this time, as we transition from a child to a young adult. Ask students to discuss and write down (in English or their first language) the physical and emotional changes that occur during puberty for both boys and girls, and draw these changes on butcher's paper.

Question: What are some of the physical and emotional changes that happen to your body, and for boys, between the age of 10 and 16?

Prompt: physical changes are changes that happen to the body – things that you can see and things that change inside. Emotional changes are things that change the way you feel – about yourself and other people and the world around you.

2. Once they have done this, ask each group to share their thoughts with the larger group. List student's suggestions on whiteboard.
3. Explain that in English these changes to a young person's body are called **puberty**.
4. Ask students what the word for puberty is in their language.

Question: What is the word for puberty in your language?

Question: In your language is there one word for puberty (like in English) or are there many different words to explain these changes?

5. As a large group practice saying the word puberty in all the different languages. Ask students if there is anything they didn't understand or want to know more about.
6. Important to emphasise that these changes happen at different times for individuals (e.g. starting menstruation can happen for girls aged as young as 10 years to 15 years), and that all of these changes are natural and normal and nothing to feel ashamed about.

Supporting information

Physical changes that occur during puberty

Puberty is the time when your body begins to change from a child's body into an adult woman's body. Boys also experience puberty although they're usually a little older when their body begins to change.

Changes include:

Changes to girls	Changes to boys	Changes to all
Body shape will change. Your hips widen and your body becomes curvier . Puberty may be a time when some girls put on weight . This usually disappears as you get older, especially with regular exercise and a healthy diet	Voice can deepen although it is not as noticeable for girls	Grow taller
Breasts develop and grow larger		Grow body and pubic hair under arms, around the pubic area and on your legs
Start to get a white discharge from your vagina . This is a natural self-cleaning process and is completely normal		Skin and hair gets oily and some people get pimples , which usually clear up as you get older. Sometimes people get acne on their chest and back
Girls will start menstruation .		Body odour changes and you sweat more

Menstruation will be discussed in more depth in the following activity. People refer to menstruation in many different ways – but they mean the same thing. This includes 'period', 'time of the month', 'woman things'.

Emotional and social changes that occur during puberty

- **Coping with a changing body** – dealing with sudden physical changes and new body shapes. E.g. May be **self-conscious** or **embarrassed** re: differences. **Other people might start to treat them differently**, e.g. If you look older, you might be treated as an older person
- Emotions: e.g. **Frustration** because they feel different – it can be difficult coping with early physical changes or frustrating waiting for them to happen
- **Mood swings** – the sudden release of hormones into a young person’s body can bring about extreme emotions and mood swings (temporary) which are mostly caused by the changing hormone levels affecting the way a person feels
- **Energy changes** – the physical growth and other changes can make a young person **feel full of energy one minute and tired the next**.
- **Coping with society’s and families ideas, expectations and pressures of you** – your age, gender, sexuality, your status as a ‘young person’
- **Learning about your own identity** and your **independence** in relation to self, family, friends, your values.
- Starting to explore your **sexual identity** and possibly **romantic relationships**. This can mean that you start to notice people and think about them in a romantic way – **boys, girls, both – or none**. This might not happen and that’s normal too.

Source: Better Health Channel: Puberty
Raising Children Network

Activity 3: Anatomy and the body

Aim of this activity

The aim of this exercise is to teach students basic anatomy terminology and the parts of the body that are specific to sexual and reproductive health. This is important as later on in the program when you are teaching students about safe sexual practices they will need to know and understand terminology such as penis and vagina.

What do you need?

- Anatomy cards – there should be 12 in total which include: facial hair, pimples, breasts, vagina, ovaries, uterus, fallopian tubes, cervix, egg cell, pubic hair, penis and scrotum
- Three sets of male and female body outlines (laminated)

Steps

1. Ask students to get into language groups. Working in language groups is important as it allows interpreters to translate anatomy terms for students.
2. Distribute the body outlines and anatomy cards to each group and ask them to assemble.
3. Once students have put their body together, form a large group and put the large female and male bodies together. Read out each word and ask students to take turns to put the labels on the correct parts of the body.
4. At the end of this session it is important to summarise the physical changes that occur during puberty and reiterate the changes that students identified during activity two. Affirm that each women's body shape is different including the shape and colour of their vaginas (will link to next activity and mention of FGC/M in context of periods and tampon use)
5. Ask students if they have any questions, otherwise move on to the next activity.

Hints for the facilitator:

It is important that you read out each anatomy card and place it on the body on the floor so that all students are able to hear and see everything. Matching words and pictures is an important EAL technique used to assist learning

Activity four: The menstrual cycle

Aim of this activity

The aim of this activity is to teach young women about the menstrual cycle so that they have a greater understanding of their reproductive organs and what is happening to their bodies when they begin menstruation.

What do you need?

- Menstrual cycle cartoon (in PowerPoint)
- A pad and a tampon from the hygiene kit (see Activity five)
- The diagram of the uterus, as backup

Steps

1. Show students the menstruation cartoon, explaining the key features of each stage in the cycle. It is important not to go into too much detail about the stages, a basic summary is all that students need at this stage.
2. The key points the facilitator needs to reiterate are:
 1. You will start menstruating between the age of 8 and 17
 2. The menstrual cycle varies for every woman, though it usually occurs every 28 days
 3. You will bleed from your vagina for between 3 and 7 days. You can either use a pad or a tampon to help manage menstrual bleeding

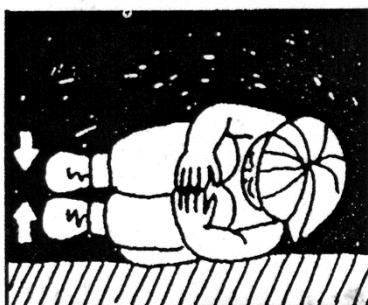
4. Periods can be irregular, especially at first, so you may get one period in the beginning and then no more for a little while
 5. When you start menstruation you are able to get pregnant if you have sex without a condom or contraception. Women get pregnant when the sperm from a man's penis meets the egg cell
 6. Some women experience pain during menstruation
 7. For women from some cultures who have experienced 'traditional cutting', tampon use may not be possible. If you want to know more, ask your mum, sister, trusted friend or nurse for example cohealth Women's Health Nurse)
 8. Tampons are very common and safe and allow you to do things like swimming and sports more comfortably than a pad. However, they do need to be changed every 4-6 hours, you cannot sleep with one inserted and some women don't feel comfortable inserting them.
 9. Tampons don't compromise your virginity.
 10. Pads are to be used a night. You can get night time pads which are thicker, and at the end of your period you might try using a liner or very thin pad instead.
3. If time, explain the period pain exercise sheet and hand out at the end of the lesson.

Handout: Period pain exercise



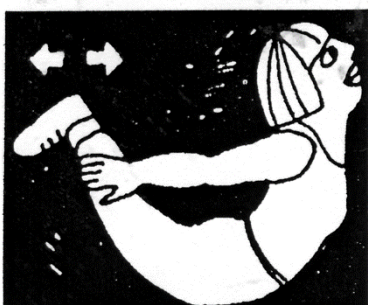
Pelvic Press

Lie flat on the floor, face down with your palms on the floor beside your shoulders. Now, push your palms down on the floor, and raise your head and shoulders off the floor until your arms are out-stretched. Repeat several times.



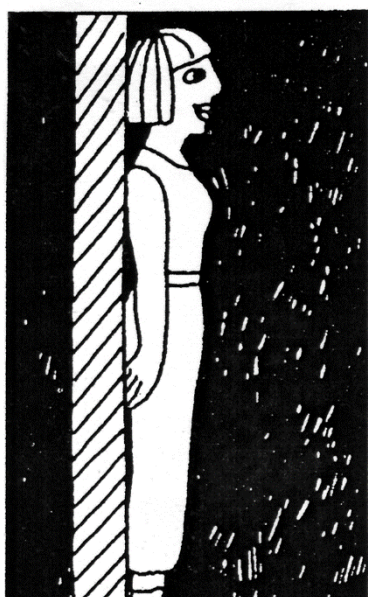
Crouch

Lie on your side with your knees drawn up to your chest and your head tucked in until it touches your knees, in the foetal position.



Pelvic Rock

Lie flat on the floor, face down. Stretch your arms behind you, arch your back and reach back until you can grasp your ankles, bending your knees and bringing your feet up to meet your hands. In this position, your legs, head and shoulders will be off the floor. Gently rock backwards and forwards.



Stretching

Stand with your back against the wall with your shoulders, heels, head and as much of your body touching the wall as possible. Try to imagine your head is being drawn upwards, making you as tall as possible. Practise this often. It is excellent for posture and for relief of period pain.

Source: Still smiling page 72 adapted from Taught Not Caught.

Activity five: Taking care of yourself during puberty

Aim of this activity

The aim of this activity is for students to think about taking care of themselves during puberty. This is a good time to discuss with students where they can access certain hygiene products they might need and whether or not they can be shared with other people. The purpose is to ensure that products and ways of washing are considered. It is important to understand and be sensitive to the fact that many students may not have had access to running water or have spent time in refugee camps and hence not had access to or had to share such items.

What do you need?

- The hygiene bag: containing soap, a toothbrush, toothpaste, deodorant, brush, a condom, lubricant, shampoo, tampons and pads
- Traffic light cards (for this activity: green = share, red = not share)

Steps

1. Before you start this activity you need to explain the word 'share'. Explain that in the context of this activity we are talking about lending something to another person.
2. Hold up each item in the bag and ask students to name and explain it.
 - What is it?
 - How do you use it?
 - Where do you get this product and how much does it cost?
 - Should it be shared?

Hints for the facilitator:

It's really important to check your own perceptions before delivering this activity as cultural practices around hygiene vary all around the world. Facilitators also need to provide a space for student to contribute what they know in a safe and non-judgmental way.

Evaluation activity – quiz and emoji’s

Aim of this activity

The aim of this activity is to determine how much students have learned from discussions and how they felt about the session. We appreciate all feedback as this will help improve the sessions and ensure that the content and delivery remain responsive to the needs of participants.

What do you need?

- Questions on PowerPoint
- Traffic lights

Steps

Explain to the students that you will be playing the quiz game that you played at the start of the lesson. You will be reading and then giving the answers on the PowerPoint. They must decide whether the statement is true or false and then hold up the traffic light corresponding to their answer. True = green, false = red. Co-facilitator is to record the responses in their notebook.

If time permits, also ask the students the question:

Can you tell us one thing that you have learnt today?

Emojis

Finally, ask the students to place **one** emoji face in to the box at the back of the room before they leave. They can place the remaining emoji’s, nametag and traffic lights on the table near the door before leaving.

Hints for the facilitator:

While one facilitator reads out the questions the other should write down the number of students that provide a correct response. These responses are to be added into a spreadsheet for evaluation purposes.

Displaying each question on the PowerPoint as it is read out is a useful tool for ease of interpretation.

Evaluation quiz: week one

Quiz Question	Correct answer
The physical and emotional changes that happen to your body between the age of 10 and 16 are called puberty	True
During puberty you grow pubic hair under your arms and on your genitals	True
Once you start menstruation you can get pregnant if you have sex without a condom or contraception	True – let students know that you will talk about this more in the coming weeks
The ovaries are part of a women’s reproductive system	True – the ovaries are the part that produce eggs

Week two: Promoting healthy and respectful relationships

Aim of this session

Young people's, and in particular young women's, vulnerability to violence in intimate relationships is heightened by unequal power, peer norms, inexperience, age differences in relationships, and lack of access to services.² Relationship violence has significant and often long-lasting impacts on young women's sexual and reproductive health. Being part of an equal and respectful relationship is therefore an essential part of achieving optimal health and wellbeing. This session aims to enhance young women's ability to:

- Identify behaviours associated with a healthy and unhealthy relationship
- Understand their legal rights and responsibilities; and
- Know where to access help and support if they or a friend experience violence or abuse

Materials include:

- Family cards for icebreaker
- White board markers
- Name tags
- Coloured pens
- Butcher's paper
- Blue tack
- Emoji box
- Rules of sex statement cards and matrix
- USB stick containing:
 - Evaluation quiz questions
- Relationship quiz handouts - photocopies
- Women's Health West DV pocket brochures (in 4 languages if required)

² M Flood & L. Fergus (2008) An Assault on our Future: The impact of violence on young people and their relationships. While Ribbon Foundations: Sydney.

Session overview

Time estimate	Topic	Activity description	Resources
5 minutes (before students arrive)	Set up	<ul style="list-style-type: none"> ▪ Set up prior to the session starting <ul style="list-style-type: none"> ○ Set up laptop and switch on projector ○ Set up chairs in semi-circle ○ Place all student resources on table near door ○ Place emoji box at the back of the room 	<ul style="list-style-type: none"> ▪ Student resources: <ul style="list-style-type: none"> ○ Name tags ○ Emojis ○ Traffic light cards (one green and one red per student) ▪ Emoji box ▪ Laptop ▪ Projector remote
5 minutes	Ice-breaker	<ul style="list-style-type: none"> ▪ Happy and healthy relationships ▪ Baseline quiz 	<ul style="list-style-type: none"> ▪ IPC Health Family cards ▪ Week 2 PowerPoint ▪ Traffic light cards
20 minutes	Sex, identity and diversity	<ul style="list-style-type: none"> ▪ Explanation of sexual identity ▪ How it differs from gender identity ▪ Same sex attraction ▪ Equality and acceptance 	<ul style="list-style-type: none"> ▪ PowerPoint
20 minutes	What is a healthy relationship?	<ul style="list-style-type: none"> ▪ Activity about what healthy and unhealthy relationships look like 	<ul style="list-style-type: none"> ▪ Butcher's paper ▪ Coloured pens ▪ Week 2 PowerPoint
30 minutes	Rules of Sex	<ul style="list-style-type: none"> ▪ Activity about the legal rights and responsibilities of young people ▪ Scenarios 	<ul style="list-style-type: none"> ▪ Butcher's paper ▪ Statement cards (IPC Health) ▪ Week 2 PowerPoint ▪ Coloured pens
5 minutes	Evaluation activity	<ul style="list-style-type: none"> ▪ Evaluation quiz ▪ Emoji activity 	<ul style="list-style-type: none"> ▪ Week 2 PowerPoint ▪ Traffic light cards ▪ Two pieces of butcher's paper ▪ Emoji cards (one set per student) ▪ Emoji box

Activity 1: Icebreaker

Aim of this activity

The aim of this activity is to reflect on the positive relationships in students' lives.

What do you need?

- IPC Health family flash cards (one set of cards per language group)

Steps

1. Divide students into language groups and ask them to sit in small circles on the floor.
2. Explain that you will be handing out cards which have pictures of different family members. Ask students to have a look at the pictures and pick one family member that they would like to talk about.
3. Ask each student to read out who they have chosen and why. Ask each student what the best thing about that person is. E.g. they are trustworthy, honest, and helpful.

This activity sets the scene for what a 'healthy' relationship is. We will be talking to students about both healthy and unhealthy relationships (family relationships, friendships, intimate partner relationships) in the next activity.

Baseline evaluation activity – quiz

Aim of this activity

The aim of this activity is to determine baseline knowledge at the start of the lesson. This 4 question quiz will be repeated at the end of the lesson to determine any changes in knowledge. Answers will **not** be given during this baseline quiz.

What do you need?

- Questions on PowerPoint
- Traffic lights

Steps

Explain to the students that you will be playing a quiz game which will also be repeated at the end. Students are to try their best to answer the questions, even if they don't know the answer. Holding up the traffic lights to signify their response- true = green, false = red. The co-facilitator is to record the baseline responses in their notebook.

Quiz Question
1. It is a crime for someone to touch you sexually without your permission.
2. A healthy relationship is when you both feel safe, respected and can listen to each other
3. It's okay for my boyfriend or girlfriend to hurt me physically or emotionally
4. It's okay to have sex with your boyfriend/girlfriend at any time, even if they don't want to

Activity 2: What is a healthy relationship?

Aim of this activity

The aim of this activity is enhance young people's ability to identify behaviours associated with a healthy and unhealthy relationship. It is important that young women are able to identify behaviours associated with an unhealthy, violent relationship and when to seek help and support from a professional and/or trusted friend, teacher or family member.

What do you need?

- Butcher's paper
- Coloured pens
- Week 2 PowerPoint slides – supporting information

Steps

What are some key qualities in a healthy relationship?

1. Using the whiteboard, create two columns and post the above question at the top of one column and record the students' responses underneath (see supporting information)

2. Then ask the students:

If all these things are part of a healthy relationships, what is an unhealthy relationship and how does it feel?

3. Record student responses on the other side of the table. Identify the different types of violence outlined in the supporting information – use the PowerPoint slide to read through this.
4. Discuss the difference between anger and violence. Emphasise the following points:

- Anger is a feeling and violence is an act
- Acknowledge that people in relationships have arguments and that this is normal
- Violence is when one person in the relationship feels scared, frightened or controlled and this is illegal in Australia
- Encourage students to discuss who, in their lives, they can talk to about your relationships and other problem.

Hints for the facilitator

It is important to reiterate to students that violence is where one person uses their power to control, bully or harm another person. An unhealthy relationship can, but does not always, involve the use of physical violence. Emotional and psychological violence – that is when someone makes you feel bad about yourself by putting you down or humiliating you - can be just as damaging to a person’s health and wellbeing. This discussion needs to be facilitated in such a way that responsibility always remains with the person who is choosing to be violent, not the person who is subjected to violence

Supporting information

Recognising a healthy and an abusive relationship

A healthy relationship is based on respect and when:

- You have fun together
- You both feel like you can be yourself
- You can have different opinions and interests
- You listen to each other
- You can both compromise, say sorry and talk arguments through
- You don’t have to spend all of your spare time together
- You can spend time on your own or with your own friends and family

Some warning signs of an abusive relationship are when:

- You feel nervous around the person and scared to disagree with them
- You have to be careful to control your behaviour to avoid the other person’s anger
- You feel pressured by them to have sex
- They criticise you or humiliate you in front of other people
- They always check up or question you about what you do when you are without them
- They accuse you of seeing or flirting with other people
- They tell you that if you changed they wouldn’t abuse you
- Their jealousy stops you from seeing friends or family
- They make you feel like you are wrong, stupid, crazy or inadequate
- They have scared you with violence or threatening behaviour
- They prevent you from going out or doing things you want to do
- They say they will kill or hurt themselves if you break up with them

What is violence?

Verbal: Shouting, put downs, name calling, negative comments about age, ability, ethnicity, culture or physical appearance

Physical: Hitting, kicking, punching, biting, choking, hair-pulling, using a weapon or object, throwing belongings

Emotional/psychological: Manipulating, threatening suicide, withdrawing contact, humiliating, showing extreme jealousy

Sexual: Rape, incest, unwanted sexual acts, forcing to watch pornography, pose for sexual photographs or videos, using sex to hurt or belittle

Social: Isolating from family and friends, preventing from leaving the house or contacting friends/family, insulting in public, constant monitoring

Financial/economic: Controlling finances, stealing, not providing money for household/ family expenses (food etc.)

Harassment/stalking: Repeated unwanted attention, following, constant phone calls, letters, visiting home/school/workplace³, harassment via social media.

Activity three: Recognising early signs of an abusive/harmful relationship

Aim of this activity

This activity aims to raise awareness of abuse and relationship violence and look at the rights of the individual to have a healthy relationship and feel safe. It also aims to raise awareness of what pressure, power and control might look like in a relationship, via scenarios.

What do you need?

- 3 x relationship scenario handouts (for interpreters)
- Butcher's paper
- Women's Health West DV pocket brochures (in languages)
- Textas/pens

Steps

1. Facilitators will read out each scenario. Interpreters will interpret the scenario. Ask the students to think about the scenario and write down what each person should do. Some prompts include:
 - ***What is the problem? What are the types of harms?***
 - ***What are the impacts on the person? How might they feel?***
 - ***What can be done to make the situation better?***

³ Victorian Community Council Against Violence and Hobart Sexual Assault Support Service

2. Ask the students in their small groups to discuss their thoughts about each of the questions for two minutes.
3. Invite students from each group to answer questions posed above i.e. question one will be answered by one group, question two by the other etc.
4. Discuss the 'correct' response to each scenario. This includes discussing where someone can go for assistance.

Scenario one: Nikki



Nikki is in university and has joined a study group with some other girls. They often make fun of her for being a 'nerd' and sometimes they meet in secret without her, or fail to come to study group all together.

One of the girls threatens to spread a sexual rumour about Nikki on social media if she doesn't give them her answers to the practice test. Nikki is new to the town and doesn't have any friends that live nearby and her family live 4 hours away.

Types of harms: emotional/psychological, social, harassment.

How might she be feeling? Isolated and lonely, scared for safety and that rumour will be spread, worried, offended.

What can be done? She might decide to report the threats to the university welfare team or a coordinator. It is a serious offence and they will have to take it seriously. She might talk to a friend or family member on the phone. Nikki might choose to leave the study group and form a new friendship group.

Scenario two: Michael



Michael is very stressed with finishing year 12. His parents, especially his father, are putting pressure on him to go to university and study law, even though he wants to become a designer.

His dad often yells at him in front of everyone, about being a failure to the family. He sometimes pushes Michael when he is angry. He tells Michael that if he doesn't get a high enough ATAR, he will be taking away his car, and he won't be allowed to play soccer anymore.

Types of harms: verbal, physical, emotional/psychological, social, financial
How might he be feeling? Nervous, under pressure to succeed, stressed, confused
What can be done? He could talk to his family about their expectations are causing him stress. He might choose to talk to someone outside of the family, such as a teacher, counsellor or friend. Maybe they could talk to his parents about supporting their child's goals and creating balance between social life and study. Michael needs to protect his safety and also do what is right for him career-wise. He also needs to look after his mental health. He might talk to the Kids Helpline or Headspace.

Scenario three: Martha



Martha is in a relationship with Louise. They have been dating for six months and have decided to move in together.

Martha likes to dance and play tennis with her friends, but since being with Louise, she has had to give up these things even though she enjoys them. Louise tells her that she shouldn't spend her money on these things now that they live together, and she should just enjoy being with her. Louise still goes out with her friends, and whenever Martha tells her it isn't fair, she yells at Martha and tells her that she is going to break up with her. Martha always ends up apologising.

Types of harms: verbal, emotional/psychological, social, financial
How might he be feeling? Stressed, angry, confused, worried, feeling like she will lose her girlfriend.
What can be done? Martha could talk to a loved one or friend about her situation and seek help from them. She should not have to quit her hobbies for her partner, and all people should have a balance between spending time with a partner and keeping their own interests and hobbies. If Louise cannot see Martha's point of view then Martha might consider ending the relationship. Although she cares about Louise, partners should be loving and supportive, and not threaten to break up with you and make you upset every time you have a disagreement or discussion.

Activity four: Rules of sex

Aim of this activity

This activity aims to discuss the legal rights and responsibilities of young people. It is important for young people to be aware that there are laws regarding sex and that some behaviours are illegal in Australia. This activity also aims to communicate to young people that they have the right to access services, particularly sexual and reproductive health services, without their parents' consent.

What do you need?

- Butcher's paper
- Statements
- Matrix with labels
- Coloured pens
- Blue tack

Steps

Present and explain the matrix below:

In Australia it is LEGAL to... √	In Australia it is ILLEGAL to... ×

Distribute one set of the statement cards and a matrix to each language group. Ask them to discuss each statement within their group and to reflect their discussion by posting their statement cards on the matrix.

Ask each group to post their matrix on the board and discuss with the larger group the correct placement of each statement card. (Refer to supporting information for the different statements, their placement and explanations. For more detailed explanations of the answers and phone numbers for services that students can contact around these issues, Appendix 1: [Week 3 Supporting information: Rules of sex.](#))

Summarise the lessons of the activity by emphasising the following points:

- There are laws about relationships, sex and how people should treat each other.
- Young people should seek advice from someone they trust if they are not sure or feel uncomfortable about how they are being treated. Refer to the trusted adults that the students identified in activity three.

- Encourage participants to ask and clarify anything that they didn't understand. Remind the students about the question box.

Supporting information

Statements	Legal/illegal	Key points
Have sex with someone who doesn't want to	Illegal	The law says that if someone touches you sexually or forces you to have sex without your agreement, this is a crime. This is known as a sexual offence and is a very serious crime.
Have sex with a child	Illegal	It is illegal for someone to have sex with a child under 12 years old, even if the child agrees.
Have sex with a 21 year old if you are 13 years old	Illegal	If you are aged between 12 and 15 years old, the law says that a person cannot have sex with you if they are more than 2 years older than you, even if you agree. If you are under the age of 18 years old, you cannot have sex with a person who is caring for you or supervising you.
Have sex with people from your family	Illegal	The law says that people in the same family cannot have sex with each other unless they are married or living as a couple. This means that fathers and mothers cannot have sex with their children. Brothers and sisters cannot have sex with each other. Having sex with someone in your family is against the law and is called incest.
Have sex with someone of the same sex	Legal	The age of consent for same sex relationships is the same as it is for heterosexual relationships.
Choose own doctor	Legal	You can legally choose your own doctor at any age. A doctor is not allowed to tell your parents any information without your permission, unless they are concerned that you may harm yourself or others.
Have an abortion in Victoria at any age	Legal	In Victoria, abortion is safe and legal and can be accessed at the Royal Women's Hospital and other private clinics in Melbourne such as the Fertility Control Clinic in East Melbourne. There is no age limit on getting an abortion and you may get an abortion without your parent's or guardian's consent.

Rules of sexuality: true or false

Statements	True/False	Key points
Homosexuality is found in all populations	True	<p>In all cultures and communities there are people who are attracted to people of the same sex.</p> <p>About one in 10 people are same sex attracted.</p>
In Australia, everyone has the right to be with the partner of their choice	True	<p>Being attracted to someone of the same sex is legal in Australia. There is no law against homosexuality.</p> <p>The age of consent for same sex relationships is the same as it is for heterosexual relationships.</p>
It's okay to tease people about their sexuality	False	<p>It is not acceptable to bully or harass someone who is same sex attracted, this is discrimination and is against the law.</p>
Being same sex attracted is a choice a person makes	False	<p>Studies show that being heterosexual, homosexual or bisexual is something we're born with.</p> <p>People might be able to change their behaviours if they are forced to, but their underlying attraction will remain the same.</p>

Evaluation activity – quiz and emoji’s

Aim of this activity

The aim of this activity is to determine how much students have learned from discussions and how they felt about the session. We appreciate all feedback as this will help improve the sessions and ensure that the content and delivery remain responsive to the needs of participants.

What do you need?

- Questions on PowerPoint
- Traffic lights

Steps

Explain to the students that you will be playing the quiz game that you played at the start of the lesson. You will be reading and then giving the answers on the PowerPoint. They must decide whether the statement is true or false and then hold up the traffic light corresponding to their answer. True = green, false = red. Co-facilitator is to record the responses in their notebook.

If time permits, also ask the students the question:

Can you tell us one thing that you have learnt today?

Emojis

Finally, ask the students to place **one** emoji face in to the box at the back of the room before they leave. They can place the remaining emoji’s, nametag and traffic lights on the table near the door before leaving.

Hints for the facilitator:

While one facilitator reads out the questions the other should write down the number of students that provide a correct response. These responses are to be added into a spreadsheet for evaluation purposes.

Displaying each question on the PowerPoint as it is read out is a useful tool for ease of interpretation.

Quiz Question	Correct answer
It is a crime for someone to touch you sexually without your permission.	True
A healthy relationship is when you both feel safe, respected and can listen to each other	True
It's okay for my boyfriend or girlfriend to hurt me physically or emotionally	False- this is called violence and is against the law
It's okay to have sex with your boyfriend/girlfriend at any time, even if they don't want to	False –This is known as a sexual offence and is a very serious crime.

Week three: Contraception

Aim of this session

The aim of this session is to focus on contraception and to improve student knowledge on the different types of contraceptives available in Australia. The specific focus on contraception is in recognition of the fact consultations with doctors regarding contraceptive choices can be very confusing for young women and they might end up with wrong contraception for their lifestyle. At the end of the session students will have an understanding of:

- Different contraceptive methods
- The process of obtaining the contraceptives
- Who to contact if they need help with choosing a contraceptive

Materials include:

- White board markers
- Name tags
- Coloured pens
- Butcher's paper
- Blue tack
- Traffic lights
- Flash cards for condom use (IPC Health resource)
- Emoji's
- Emoji box
- Samples of the pill, implanon and emergency contraception
- Condoms for demonstration
- Contraceptive cue cards
- USB stick containing:
 - Evaluation quiz questions
 - Session materials
- Youth and Women's nurses contact details handouts - booklets

Session overview

Time estimate	Topic	Activity description	Resources
5 minutes (before students arrive)	Set up	<ul style="list-style-type: none"> ▪ Set up prior to the session starting <ul style="list-style-type: none"> ○ Set up laptop and switch on projector ○ Set up chairs in semi-circle ○ Place all student resources on table near door ○ Place emoji box at the back of the room 	<ul style="list-style-type: none"> ▪ Student resources: <ul style="list-style-type: none"> ○ Name tags ○ Emojis ○ Traffic light cards (one green and one red per student) ▪ Emoji box ▪ Laptop ▪ Projector remote
5-10 minutes	Ice-breaker and quiz	<ul style="list-style-type: none"> ▪ Musical newspaper game ▪ Introduce the session ▪ Ensure interpreters are sitting where everyone needing their language skills can hear ▪ Acknowledge group rules – sensitive material today ▪ Review last week's session ▪ Baseline quiz 	<ul style="list-style-type: none"> ▪ Butcher's paper ▪ Radio/music ▪ Stickers/keyring as prizes ▪ Blue tack
25 minutes	Contraception	<ul style="list-style-type: none"> ▪ Activity about different contraceptive methods and their use. 	<ul style="list-style-type: none"> ▪ Samples of different contraceptive methods ▪ Condoms and plastic bananas ▪ Cue cards of the four contraceptive methods ▪ Blu tack
15 minutes	Say What?	<ul style="list-style-type: none"> ▪ Activity about communication and negotiation around condom use 	<ul style="list-style-type: none"> ▪ Scenarios on PowerPoint ▪ Butcher's paper ▪ Coloured pens ▪ Blu tack ▪ IPC Health condom flash cards

5 minutes	Evaluation activity	<ul style="list-style-type: none"> ▪ Evaluation quiz ▪ Emoji's 	<ul style="list-style-type: none"> ▪ Evaluation quiz ▪ Emoji box and emoji's ▪ Traffic lights
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Activity one: Icebreaker

Aim of this activity

The aim of this activity is to have fun. It starts the day's activities with an opportunity for the participants to interact in a fun and active manner.

What do you need?

- Butcher's paper
- Radio / music
- Keyring and stickers (from Kmart) as prizes

Steps

1. Divide students into four groups and ask them to form a circle. Place a sheet of butcher's paper on the floor for each of the four groups.
2. Explain that you will be playing music and the members of each group should walk around their butcher's paper. Once the music stops, all of the members of the group should have their feet inside the butcher's paper. Any group who does not have all their members inside the paper will be asked to sit down.
3. Fold the butcher's paper in half each round until one group remains (or one student in each group) and is declared the winner.

Baseline evaluation activity – quiz

Aim of this activity

The aim of this activity is to determine baseline knowledge at the start of the lesson. This 4 question quiz will be repeated at the end of the lesson to determine any changes in knowledge. Answers will **not** be given during this baseline quiz.

What do you need?

- Questions on PowerPoint
- Traffic lights

Steps

Explain to the students that you will be playing a quiz game which will also be repeated at the end. Students are to try their best to answer the questions, even if they don't know the answer. Holding up the traffic lights to signify their

response- true = green, false = red. The co-facilitator is to record the baseline responses in their notebook.

Question	
Having a baby when you are in your 20's or 30's is common in Australia	
It is okay to be pressured into having a baby even when you're not ready	
Abortion is allowed in VIC and young women under 18 can access one without their parents' permission	
Emergency contraception should be taken within 72 hours of unprotected sex	

Activity two: Contraception

Aim of this activity

The aim of this activity is to assist young women to identify different contraceptive methods. It is important for young women to understand what methods are available and how to use them effectively. A condom demonstration is also included in this activity to ensure that students understand the correct way to use a condom. Within this activity we also aim for young women to become aware of contraception options available to them and how to access these methods.

What do you need?

- Samples of pill, implanon, emergency contraception and condoms
- Powerpoint presentation
- Plastic banana for demonstration
- Blu tack to stick cards on board

Steps

1. Encourage the students to discuss what they know about contraception and ask them the following:

Question: What are some names of contraception methods you know?

2. Discussions on the pill, implanon, emergency contraception and condoms will start. Discussion about each contraceptive method should start by showing a sample and inviting students to pass the sample around.
3. Discussion should focus mainly on the following:
 - Name of the contraceptive method
 - How to use it?
 - Why do we use it (e.g. Pregnancy, STI, both?)
 - Where do you get it?

(see Appendix 2: Week 3 Supporting information: Contraception for detailed information)

4. Reiterate that these contraceptive methods are the most accessible for young people, but there are more options available.
5. Demonstrate the correct way to use a condom using a plastic banana. (For steps to correct condom use refer Appendix 2: Week 4 Supporting information: Contraception).
6. Ask the students to find a partner and practice condom demonstration as shown. If some participants are too embarrassed, the facilitator's demonstration will have to suffice.

7. Encourage participants to ask and clarify anything that they didn't understand.

Hints for the facilitator:

Emphasise that among the four contraceptive methods discussed; only condoms protect a person from pregnancy as well as STIs. This part of the discussion can be used to introduce or link into the next topic which discusses STIs in detail. The facilitator can define STIs simply as infections that are transmitted sexually, of which details will be further discussed in the next activity. Highlight the importance of knowing and practising correct and consistent condom use.

Activity three: Say what!?

Aim of this activity

The difficulty associated with negotiating condom use is a reality for many young women. Young women may know how and why it is important to use condoms but be unable to use one for a variety of reasons. A partner's refusal to use a condom is one of the most common reasons why young women are unable to consistently use condoms to protect themselves against pregnancy and STIs. The aim of this activity is to support young women to discuss some of the ways they can communicate and negotiate condom use with their partners.

What do you need?

- PowerPoint scenarios
- Butcher's paper
- Coloured pens or markers
- White board markers

Steps

1. Ask young women to brainstorm answers to the following question:

***What are some of the reasons you might not use a condom?
What might your boyfriend say?***

2. Hand around the cue cards with 'common excuses' – one to each language group and ask the girls to discuss in groups, what they might say back?
3. List their responses on the whiteboard. Add cue cards with 'possible responses' to whiteboard with blu-tack. Highlight that correctly using a condom every time can often be affected by a partner's refusal to use one. Alcohol use or drug use can also affect a person's decision-making skills regarding condom use.

4. Read out the scenarios and invite students to come up with their own resolutions.

Evaluation activity – traffic light risk activity

Aim of this activity

The aim of this activity is to determine how much students have learned from discussions and how they felt about the session. We appreciate all feedback as this will help improve the sessions and ensure that the content and delivery remain responsive to the needs of participants.

What do you need?

- Questions on PowerPoint
- Traffic lights

Steps

Explain to the students that you will be playing the quiz game that you played at the start of the lesson. You will be reading and then giving the answers on the PowerPoint. They must decide whether the statement is true or false and then hold up the traffic light corresponding to their answer. True = green, false = red. Co-facilitator is to record the responses in their notebook.

If time permits, also ask the students the question:

Can you tell us one thing that you have learnt today?

Emojis

Finally, ask the students to place **one** emoji face in to the box at the back of the room before they leave. They can place the remaining emoji's, nametag and traffic lights on the table near the door before leaving.

Hints for the facilitator:

While one facilitator reads out the questions the other should write down the number of students that provide a correct response. These responses are to be added into a spreadsheet for evaluation purposes.

Displaying each question on the PowerPoint as it is read out is a useful tool for ease of interpretation.

Evaluation quiz: Week three

Question	
Having a baby when you are in your 20's or 30's is common in Australia	True
It is okay to be pressured into having a baby even when you're not ready	False
Abortion is allowed in VIC and young women under 18 can access one without their parents' permission	True
Emergency contraception should be taken within 72 hours of unprotected sex	True

Week five: Pathways and prevention of teenage pregnancy

Aim of this session

Teenage pregnancy has been identified as an experience affecting many young women at WELS. As such, the agencies responsible for delivering the program have, in partnership with WELS staff, designed this session in an attempt to assist young women understand the different social and cultural realities of teenage pregnancy and pregnancy options in Australia. Ensuring that young women are supported to make informed decisions about when to become a mother is one strategy adopted throughout this program with the aim of working to prevent teenage pregnancy. This strategy sits along-side other strategies outlined in the program aimed at preventing early pregnancy. These include promoting healthy and respectful relationships and ensuring that young people are well informed about safe sexual practices and contraceptive methods.

At the end of the session students will have a better understanding of:

- Pathways and opportunities available to young people in Australia
- Pregnancy and how early pregnancy can limit young people's opportunities in Australia
- Pregnancy and pregnancy options

Materials that you will need:

- Brief MEA aides and interpreters that today's content includes abortion
- Name tags
- White board markers
- Butcher's paper
- Coloured pens
- Blue tack
- Question box
- The visual representation of the pathways available to young women in Australia
- USB stick containing:
 - Pregnancy options scenarios
 - Evaluation quiz questions

Session overview

Time	Topic	Activity description	Resources
5 minutes (before students arrive)	Set up	<ul style="list-style-type: none"> ▪ Set up prior to the session starting <ul style="list-style-type: none"> ○ Set up laptop and switch on projector ○ Set up chairs in semi-circle ○ Place all student resources on table near door ○ Place emoji box at the back of the room 	<ul style="list-style-type: none"> ▪ Student resources: <ul style="list-style-type: none"> ○ Name tags ○ Emojis ○ Traffic light cards (one green and one red per student) ▪ Emoji box ▪ Laptop ▪ Projector remote
10 minutes	Life goal activity	<ul style="list-style-type: none"> ▪ Question box and introduce the session ▪ Ensure interpreters are sitting where everyone needing their language skills can hear ▪ Acknowledge group rules ▪ Review last weeks' session ▪ Life goals brainstorm 	<ul style="list-style-type: none"> ▪ Question box ▪ White board markers
20 – 35 minutes	Pathways for young people and teenage pregnancy	<ul style="list-style-type: none"> ▪ Activity about pathways available to young women in Australia. 	<ul style="list-style-type: none"> ▪ Butcher's paper ▪ Coloured pens ▪ Visual representation of young women's pathways in Australia
20 minutes	Pregnancy Options	<ul style="list-style-type: none"> ▪ Activity about pregnancy options available in Australia and where to get help 	<ul style="list-style-type: none"> ▪ Scenarios
10 minutes	Evaluation activity	<ul style="list-style-type: none"> ▪ Evaluation quiz 	<ul style="list-style-type: none"> ▪ Evaluation quiz ▪ Two pieces of butchers paper

Activity one: Life goals

Aim of the activity

This session encourages young people to think about their ambitions and life goals. Later in the session we will ask students to consider how early pregnancy could have an impact on their goals for the future.

What do you need?

- White board markers
- A4 Sheets of paper
- Coloured pens

Steps

1. Ask students to think about their dreams for the future and draw their life goals using blank sheets of paper and coloured pens.

Question: What are your goals or aspirations for the future?

2. Ask students to discuss as a large group their future aspirations.
3. List students' aspirations on the smart board or if not available, the white board.
4. Summarise the responses students have provided and thank them for their contributions. Also let them know that you'll be coming back to this activity later in the session.

Hints for the facilitator:

You are aiming for a mix of both short-term goals (e.g. going to mainstream schooling) and longer term goals (e.g. buying a house). If students aren't able to think of an aspiration let them know that many young people don't know what they want in the future and that's okay.

Baseline evaluation activity – quiz

Aim of this activity

The aim of this activity is to determine baseline knowledge at the start of the lesson. This 4 question quiz will be repeated at the end of the lesson to determine any changes in knowledge. Answers will **not** be given during this baseline quiz.

What do you need?

- Questions on PowerPoint
- Traffic lights

Steps

Explain to the students that you will be playing a quiz game which will also be repeated at the end. Students are to try their best to answer the questions, even if they don't know the answer. Holding up the traffic lights to signify their response- true = green, false = red. The co-facilitator is to record the baseline responses in their notebook.

Question	
Having a baby when you are in your 20's or 30's is common in Australia	True
It is okay to be pressured into having a baby even when you're not ready	False
Abortion is allowed in VIC and young women under 18 can access one without their parents' permission	True
Emergency contraception should be taken within 72 hours of unprotected sex	True

Activity two: Pathways for young people and teenage pregnancy

Aim of the activity

The aim of this activity is to get students thinking about the pathways that young people in their culture often follow when they transition from childhood to adulthood and how they might differ from the pathways available to young people in Australia. This activity is about communicating to young women that Australia offers different opportunities that they might not have considered or previously had access to in their home countries. For example, in many developing nations it is a traditional pathway for women to have their first baby during adolescence. In contrast, young women in Australia have a number of opportunities – such as further education and employment. Young refugee women who live in Australia will therefore have access to a number of opportunities or 'pathways', which they might not have had previously. This activity asks students to consider how having a baby when they are a teenager will impact on these opportunities and possibly their life goals.

What do you need?

- Butcher's paper
- Coloured pens

- The visual representation of the pathways available to young women in Australia
- Blu-tack

Steps

1. Explain to students that:

This activity is about considering the different pathways that young women are likely to take in the country where they were born and here in Australia.

2. Show students the visual representation of the pathways that many young women in Australia follow.
3. The facilitator needs to highlight the similarities and differences between the pathways young women take in Australia and in their home countries.
4. Ask students (in their language groups) to discuss/write/draw the possible differences in Australia compared to their home country around the age that young women:
 - Get married?
 - Have a baby?
 - Are there different educational or employment opportunities?
5. Ask one student from each language group to come to board and rearrange timelines/options of their home country on the visual representation
5. Now go back to the visual representation of the pathways that young women in Australia follow, place the picture of the baby over the secondary school picture and ask students to brainstorm what would change if they had a baby when they were at secondary school.

Question: What would change if you have a baby when you are a teenager?

Also ask students to think about their own aspirations that they discussed in activity one.

Question: Would having a baby when you are a teenager impact on your hopes for the future?

6. Summarise the answers that students have provided. Ask if anyone has any questions.

Hints for the facilitator:

The aim of this activity is to encourage young women to think about the physical, emotional and financial impacts associated with having a baby when you are a teenager. During this activity, we also aim to draw a clear link between young women's life goals and ambitions and some of the ways that early pregnancy could affect these. We aim to communicate to young women some of the difficulties and limitations that are associated with teenage pregnancy in Australia so that they can make informed decisions about when to become a mother.

The time for this activity is set at twenty minutes however the time can be extended to 35 minutes so that students have more opportunity to reflect on the activity's key messages.

Activity three: Pregnancy options

Aim of the activity

The aim of this activity is to provide students with accurate information about emergency contraception and various pregnancy options (e.g. parenthood, abortion and adoption) that are available to them in Victoria. The aim of this activity is for young women to think about where they can go for help and support if they thought that they were pregnant.

What do you need?

- Scenarios on PowerPoint

Steps

1. Invite students to sit in a large circle
2. Read out each scenario, providing sufficient time for the interpreters to translate.
3. After you read out each scenario ask students their thoughts and ideas and augment their responses with points from the facilitator prompts with each scenario.
4. After the activity is finished ask students if they have any questions. Let students know that preventing pregnancy will be discussed in more detail in the fourth week's session.

Hints for the facilitator:

Facilitators need to communicate to young women that if they were faced with an unplanned or unwanted pregnancy, if possible seek support from a friend, family member and/or their partner.

For ease of interpretation, the scenarios can be flashed up on the smart board as they are read out. If this option is not available, simply read out each scenario.

Pregnancy options scenarios

Anita has just finished high school and is looking forward to getting a job and going on an overseas trip. Her boyfriend Cameron wants to have a baby straight away. Anita isn't sure if she's ready. What should she do



Talk to Cameron about the fact that she's not ready to have a baby



Anita needs to make a decision that is right for her and their circumstances and which is in keeping with their personal beliefs.

Yasmine and Peter have been in a committed relationship for many years. They are planning to have a family when both of them have finished university in two years. One night they were having sex and the condom breaks. What should they do?

Is this the time that they want to start a family

If they decide that it is, they should visit a doctor to plan for a healthy pregnancy

If they decide now is not the right time to start a family they could access emergency contraception – outline that this is available at the pharmacist and is a pill that needs to be taken within 72 hours

Fatima is pregnant. She doesn't love her boyfriend and is not ready to become a mother. What should Fatima do?



If possible seek support from friends, family, or her boyfriend



Fatima could access an abortion which means ending the pregnancy

- Abortion is safe and legal in Victoria
- Young women can access abortion without their parents consent
- Abortion is available at clinics and hospitals such as the Royal Women's Hospital or the Fertility Control Clinic in East Melbourne
- Medical Abortion is available through some family doctors



Fatima could continue the pregnancy and give the baby up for adoption

Evaluation activity – quiz and emoji’s

Aim of this activity

The aim of this activity is to determine how much students have learned from discussions and how they felt about the session. We appreciate all feedback as this will help improve the sessions and ensure that the content and delivery remain responsive to the needs of participants.

What do you need?

- Questions on PowerPoint
- Traffic lights

Steps

Explain to the students that you will be playing the quiz game that you played at the start of the lesson. You will be reading and then giving the answers on the PowerPoint. They must decide whether the statement is true or false and then hold up the traffic light corresponding to their answer. True = green, false = red. Co-facilitator is to record the responses in their notebook.

If time permits, also ask the students the question:

Can you tell us one thing that you have learnt today?

Emojis

Finally, ask the students to place **one** emoji face in to the box at the back of the room before they leave. They can place the remaining emoji’s, nametag and traffic lights on the table near the door before leaving.

Hints for the facilitator:

While one facilitator reads out the questions the other should write down the number of students that provide a correct response. These responses are to be added into a spreadsheet for evaluation purposes.

Displaying each question on the PowerPoint as it is read out is a useful tool for ease of interpretation.

Question	
Having a baby when you are in your 20's or 30's is common in Australia	True
It is okay to be pressured into having a baby even when you're not ready	False
Abortion is allowed in VIC and young women under 18 can access one without their parents' permission	True
Emergency contraception should be taken within 72 hours of unprotected sex	True

Week five: Safe sexual practices and decision making

Aim of this session

The discussion of sexually transmitted infections (STIs) is a sensitive topic for many WELS students who have migrated from countries with high rates of communicable diseases. Students themselves might therefore be affected or have a family member who is living with a STI. During this session we aim to focus discussion on safe sexual practices and prevention and emphasise the need to consult with a doctor if young women are concerned about having a STI. At the end of the session students will have an understanding of:

- Transmission of sexually transmitted infections and how certain behaviours put people at risk of STIs
- Ways young women can communicate and negotiate condom use

Materials include:

- White board markers
- Name tags
- Coloured pens
- Butcher's paper
- Blue tack
- Condoms (for demonstration)
- Plastic banana (for demonstration)
- Cue cards:
 - Contraceptives
 - STIs
 - Q & A re condom use
- Question box
- USB stick containing:
 - 'Say what' scenarios
 - Evaluation quiz questions

Session overview

Time estimate	Topic	Activity description	Resources
5 minutes (before students arrive)	Set up	<ul style="list-style-type: none"> ▪ Set up prior to the session starting <ul style="list-style-type: none"> ○ Set up laptop and switch on projector ○ Set up chairs in semi-circle ○ Place all student resources on table near door ○ Place emoji box at the back of the room 	<ul style="list-style-type: none"> ▪ Student resources: <ul style="list-style-type: none"> ○ Name tags ○ Emojis ○ Traffic light cards (one green and one red per student) ▪ Emoji box ▪ Laptop ▪ Projector remote
5 minutes	Ice-breaker	<ul style="list-style-type: none"> ▪ 'Have you ever' game ▪ Question box and introducing the session ▪ Ensure interpreters are sitting where everyone needing their language skills can hear ▪ Acknowledge group rules ▪ Review last week's session 	<ul style="list-style-type: none"> ▪ Question box
20 minutes	Sexually Transmitted Infections	<ul style="list-style-type: none"> ▪ Activity about sexually transmitted infections. 	<ul style="list-style-type: none"> ▪ Cue cards of the four sexually transmitted infections ▪ Outline of a man and woman in PowerPoint ▪ Blue tack
15 minutes	Say what?	<ul style="list-style-type: none"> ▪ Activity about communication and negotiation around condom use specific to STIs 	<ul style="list-style-type: none"> ▪ Scenarios on PowerPoint
15 minutes	Evaluation activities	<ul style="list-style-type: none"> ▪ Picture evaluation activity re sexually transmitted infections ▪ Evaluation quiz 	<ul style="list-style-type: none"> ▪ Picture cards ▪ Evaluation quiz questions on PowerPoint ▪ Two pieces of butchers paper

Activity: Have you ever?

Aim of this activity

The aim of this activity is to have fun. It starts the day's activities with an opportunity for the participants to interact in a fun and active manner.

What do you need?

- Space
- Enough chairs for each student, minus one chair

Steps

1. Place chairs in a circle around the room. Make sure there is enough for everyone to sit on, without a chair for you.
2. Explain that you will all take turns asking questions that begin with 'Have you ever...' For example: ***'Have you ever eaten McDonalds?' – from general to specific questions***
3. The students who have eaten McDonalds must get off their chairs and move around until you yell stop and then everyone must sit down on the chair closest to them. Facilitator takes one chair away each time
4. The student who misses out on a chair must then ask a question.
5. Keep playing the game until most students have had a turn or until the time allocated to the activity has run out.
6. Following on from this, address any questions that were in the question box from the week before.
7. Outline what will be covered in this session.

Hints for the facilitator:

Explain to the students that as discussed briefly in the previous week, the decision about when to have sex is a personal one, and many different factors contribute to this decision. While we understand that the decision to have sex may still be a long way off for some, we will be talking about how we can keep ourselves safe from unplanned pregnancy and STIs when we do decide to have sex. These skills can be used throughout life, not just as teenagers.

Baseline evaluation activity – quiz

Aim of this activity

The aim of this week's quiz is to determine recall of contraception options from the previous week and their purpose.

What do you need?

- Questions on PowerPoint
- Traffic lights

Steps

Students are to try their best to answer the questions, even if they don't know the answer. Holding up the traffic lights to signify their response- true = green, false = red. The co-facilitator is to record the baseline responses in their notebook.

Activity two: Sexually transmitted infections

Aim of this activity

The aim of this activity is to communicate to young women how STIs are transmitted so they know whether or not they are putting themselves at risk. Young women also need to understand how and when to see a health professional for STI screening or treatment. At the end of the activity the students will also be able to identify some of the most common STIs. Many STIs, particularly those common amongst young people have no symptoms, so the focus of this conversation should be around transmission, prevention and STI screening rather than discussing STI symptoms.

What do you need?

- Cue cards
- Butcher's paper
- Blue tack
- Body outlines to display on smart board

Steps

1. Ask students to get into language groups and discuss the following questions:

What do you know about sexually transmitted infections?

2. Using an outline of a male and female body, briefly explain the following points regarding sexually transmitted infections:

- **Sexually transmitted infections are infections that can be passed from one person to another through sexual intercourse**
 - **The most common way a STI can be passed from one person to another is through specific sexual behaviours:**
 - **Vaginal intercourse (penis in vagina)**
 - **Anal intercourse (penis in anus)**
 - **Oral sex (mouth on vagina or mouth on penis)**
 - **Men and women of any age can get an STI**
3. Cite the most common STIs if the students are not aware of them. These are:
- Chlamydia
 - Hepatitis B
 - Human Immunodeficiency Virus (HIV)
4. Use the facilitator’s cue cards to highlight the following points regarding each example of STI:
- Transmission
 - What to do if one is at risk
 - Prevention

Refer to Appendix 3: Week 4 Supporting information: Sexually transmitted infections for clarification or if further questions are raised.

5. Ask the students if there is anything they didn’t understand or want to know more about. Remind the students about the question box.

Hints for the facilitator:

Facilitators should be aware whether the students understand the word “sexual intercourse”. If not, “sex” can be used instead of “sexual intercourse”.

Supporting information - Cue cards

Sexually Transmitted Infection	How do I get it?	What must I do?	Prevention
Chlamydia	Sex without a condom <ul style="list-style-type: none">• Vaginal• Anal• Oral	Consult with doctor for treatment	Use a condom every time you have (vaginal, oral, anal) sex
Hepatitis B	Sex without a condom	Consult with doctor for treatment	Use a condom every time you have (vaginal, oral, anal) sex Hepatitis B vaccination
Human Immunodeficiency Virus (HIV)	Sex without a condom	Consult with doctor for treatment	Use a condom every time you have (vaginal, oral, anal) sex

Activity three: Say what?

Aim of this activity

The difficulty associated with negotiating condom use is a reality for many young women. Young women may know how and why it is important to use condoms but be unable to use one for a variety of reasons. A partner's refusal to use a condom is one of the most common reasons why young women are unable to consistently use condoms to protect themselves against pregnancy and STIs. The aim of this activity is to support young women to discuss some of the ways they can communicate and negotiate condom use with their partners.

What do you need?

- Cue cards on laminated cards
- PowerPoint condom negotiation scenarios
- Butcher's paper
- Coloured pens or markers
- White board markers

Steps

1. Ask young women to brainstorm answers to the following question:

***What are some of the reasons you might not use a condom?
What might your boyfriend or partner say?***

2. Hand around the cue cards with 'common excuses' – one to each language group and ask the girls to discuss in groups, what they might say back?
3. List their responses on the whiteboard. Add cue cards with 'possible responses' to whiteboard with blu-tack. Highlight that correctly using a condom every time can often be affected by a partner's refusal to use one. Alcohol use or drug use can also affect a person's decision-making skills regarding condom use.
4. Read out the Vicky and Tom scenario and invite students to share with the larger group what an appropriate response could be – using the list of responses they had come with up and the extra responses supplied.
5. Repeat again with the Marco story

Supporting information

Vicky and her new boyfriend Tom decide to have sex for the first time. Tom tells Vicky he doesn't like condoms, they don't fit, and that they don't need to use one. He said she should trust him.

Vicky could say:

Condoms come in all sizes – big or small!

I don't like the idea of getting pregnant or getting an infection

If you care about me, you'd respect my wishes to use a condom

Let's wait, and go and get tested together

Marco moved to Australia from Nigeria 4 years ago. He has started dating someone, and they want to go and get 'tested' together. Marco doesn't know what this means, where to go, and what things he should be asking about.

**Ask for an STI test
Ask about Hepatitis B**

**Talk to nurse or GP about
safe sex**

Go to a sexual health clinic

Evaluation activity – traffic light risk

Distribute green and red traffic light cards. Ask students to hold up a red light if behaviour is risky for contracting an STI or a red card if it is not risky for contracting an STI. Mindful that some of these items might pose risks in developing nations, but not in Australia (under usual circumstances). Some may also pose a risk for blood borne viruses.

Risk for sexually transmitted infections		
Behaviour	Green Light (Safe)	Red Light Unsafe
Hugging or cuddling	√	
Sharing a meal	√	
Holding hands	√	
Kissing	√	
Mosquito	√	
Tattoo	√ (can be unsafe though for BBV)	
Sharing an injecting needle		√
Having a baby	√	
Sex without a condom		√
Sex with a condom	√	

If time permits, also ask the students the question:

Can you tell us one thing that you have learnt today?

Appendix 1: Supporting information: Rules of sex

Incest and sex between family members

The laws says that people in the same family CANNOT have sex with each other unless they are married or living as a couple. This means that fathers and mothers cannot have sex with their children. Brothers and sisters cannot have sex with each other. Having sex with someone in your family is against the law and is called incest.

What to do if someone breaks the law

Sometimes it can be hard but it is important to tell someone you trust and feel safe if there is something going on in your life that you do not like or feel comfortable with. However, you may not know or feel as though you can't trust anybody. Sometimes no one believes you. You can contact the following organisations:

- Women's Health West 9689 9588
- Western Region Centre Against Sexual Assault 9687 5811 (Counselling) or 1800 806 292 (24 hour crisis line)
- Centre Against Sexual Assault (CASA) 96353610 (Metropolitan) or 9687 8637 (West CASA) or 1800806292 (country freecall)
- The Action Centre 9660 4700 or 1800 013 952

AM I OLD ENOUGH TO choose my own Doctor?

- You can legally choose your own doctor at any age
- You are able to get your own Medicare card when you turn 15 years old
- A doctor is unable to tell your parents any information without your permission, unless they are concerned that you may harm yourself or harm others
- Regardless of your age, if you believe that you have not been treated well by your doctor, contact the Health Services Commissioner on 8601 5200 or 1800 136 066 (country free call).

AM I OLD ENOUGH TO have sex?

The laws on sex apply whether it is between people of the same sex or of opposite sex.

If you are under 12 years old – You cannot have sex with anyone, even if you agree.

Between 12 and 15 years old – The law says a person cannot have sex with you if they are more than 2 years older than you, even if you agree.

Under 18 years old – You cannot have sex if you are under 18 with a person who is caring for you or supervising you e.g. a teacher

Remember:

- Both partners need to agree to have sex
- No one has the right to force you to have sex
- You always have the right to say no

If you don't agree and someone threatens you or touches you without your permission they are breaking the law. You can contact:

- Centre Against Sexual 96353610 (Metropolitan) or 9687 8637 (West CASA) or 1800806292 (country freecall)

AM I OLD ENOUGH TO use contraception?

If you are under 18:

- You can get contraception like the pill from the doctor if the doctor thinks you are mature enough to understand what you are doing and believes that you will use the contraceptive properly.

AM I OLD ENOUGH TO have an abortion?

- In Victoria, abortion is safe and legal and can be accessed at the Royal Women's Hospital and other private clinics in Melbourne.
- Good places to get information about available options are community health services, abortion clinics, nurses, the Royal Women's Hospital or The Action Centre.
- There is no age limit on getting an abortion and you may get an abortion without your parent's or guardian's consent.

Source: Am I Old Enough
Common Legal Issues for Young People
Victorian Legal Aid (August 2010)

Appendix 2: Supporting information: Contraception

The contraceptive pill

How it works: by stopping the chemical that release an egg each month and therefore without the egg you can't get pregnant

How to use it: it needs to be taken at the same time every day. If you miss a pill you must take it before 12 hours have passed. If you do not or you keep forgetting you must either not have sex until you have taken the pill everyday for at least 2 weeks or use a condom.

How safe is it: as long as you take it every day it is 99% safe in preventing pregnancy.

Side effects: for some women the pill can cause nausea, big mood swings, headaches, lethargy and reductions to the immune system. There are now many different types of contraceptive pills, so if you are experiencing side effects its best to consult a healthcare professional and perhaps try a different type of pill

Benefits: Prevents pregnancy 99% of the time if taken regularly. It may reduce the incidence of painful periods. May reduce mood swings, though everyone is different.

How much does it cost? See 'hints for the facilitator.'

Where can I get it? To access the pill you need a prescription, which you can get from a Family Planning clinic, community health Centre, Action centre, GP and then you can go to any pharmacy to get your prescription filled

Implanon

How it works: by stopping the chemicals that release an egg each month and therefore without the egg you can't get pregnant

How to use it: It is a little rod put under the skin in the arm and can stay there for three years. There is no chance of forgetting to take a pill as it stays with you. However it can be removed if it doesn't agree with you. Ideal for women who forget to take pills regularly.

How safe is it?: It is 99% safe in preventing pregnancy.

Side effects: nausea, big mood swings, headaches, lethargy and reductions to the immune system

Benefits: Prevents pregnancy 99% of the time.

How much is it?: See 'hints for the facilitator'

Where can I get it? Family Planning clinic, Community Health Centre, Action Centre, GP

Emergency contraception

Emergency contraception, previously known as the 'morning after pill', is sometimes needed to prevent pregnancy after sex. This may be necessary if you have sex without any contraception, you miss taking the oral contraceptive pill or a condom breaks. It may also be necessary in the case of sexual assault

How it works: Emergency contraception is about 85 per cent effective. It works by:

- Delaying or preventing ovulation
- Preventing a fertilised egg from sticking to the wall of the uterus

How to use it: Emergency contraception is most effective if taken as soon as possible – ideally within 72 hours of unprotected (sex). However, it will still have some (lesser) effect if taken within 120 hours or 5 days.

Side effects: nausea, big mood swings, headaches, lethargy and reductions to the immune system

Benefits: Emergency contraception is about 85 per cent effective.

Where can I get it? Chemists over the counter, Family Planning clinic, community health Centre, Action centre, GP

Steps to correct condom use

1. Check the expiry date
2. Open the packet, being careful not to tear the condom with your fingernails
3. Place the condom on the tip of the penis (when it is erect) so that it will roll outward
4. Lightly squeeze the tip of the condom, and unroll the condom all the way down to the base of the penis
5. After the male ejaculates, he should remove the penis from the vagina, holding on to the base of the condom so it doesn't fall off
6. Gently remove the condom from the penis
7. Tie the condom shut, wrap it in tissues and dispose of in the rubbish bin

Appendix 3: Supporting information: Sexually transmitted infections

Chlamydia

- **How do I get it:** unprotected intercourse and oral sex with somebody else who has the infection
- **Symptoms:** Many women who are infected have no signs or symptoms of chlamydia. If symptoms are present, they include:
 - An unusual vaginal discharge
 - A burning feeling when urinating
 - Pain during sex
 - Bleeding or spotting between periods or bleeding after sex
 - Lower abdominal pain.
- **Long term effects:** can cause pelvic inflammation, chronic pelvic pain, pregnancy in the fallopian tubes and cause infertility (inability to have babies)
- **Treatment:** antibiotics. It can be detected by a urine test, blood test or swab. You can get tested by a nurse, doctor or your local community health centre

Hepatitis B

- **How do I get it:** unprotected intercourse (vaginal, oral or anal), sharing needles or syringe, and sharing razor blades or toothbrushes
- **Symptoms:** Dark urine, yellow skin and eyes (jaundice), flu like symptoms which can include loss of appetite, abdominal pains, nausea, vomiting, tiredness and fever
- **Long term effects:** Can be fatal in very rare cases. A person who recovers from the illness but is not immune to the virus becomes a carrier. Carriers have increased risk of liver disease and cancer
- **Treatment:** Most people recover spontaneously but may need treatment during the illness. Hepatitis B carriers need to have regular check ups

Human immunodeficiency virus (HIV)

- **How do I get:** HIV is most commonly contracted through unprotected sexual intercourse or through sharing needles, syringes and other injecting equipment.
- **Symptoms:** Experiencing flu-like symptoms, extreme and constant tiredness or rapid weight loss for no known reason for a month or longer can be symptoms of HIV. However the symptoms of HIV are similar to those of a number of other illnesses. If you think you have been put at risk of contracting HIV you should contact a doctor or nurse.
- **Long term effects:** HIV causes AIDS and increases your risk to various other illnesses and diseases. That's why it's important to protect yourself by using condoms during intercourse and if you think you may have been exposed to HIV talk to a doctor or nurse about getting tested.

- **Treatment:** There is no cure for HIV. However, there are medications now available that can help a person with HIV to stay healthy and delay the onset of complications, such as AIDS.