

AMAZE AFRICA

COMPREHENSIVE SEXUALITY

EDUCATION TOOLKIT



amaze.org
#MOREINFOLESSWEIRD



EXECUTIVE SUMMARY:

Growing up is such an exciting process for many young people, and at times it can be daunting. But, with the right advice and guidance, growing up can be a smooth transition into adulthood. Looking forward to purchasing your first bralette, or asking your first crush out on a date can be some of the most exciting experiences to go through while growing up.

As you grow up, go through puberty, and experience bodily changes and needs, it is essential that you are well equipped with the information to make informed decisions about your sexual and reproductive health (SRH).

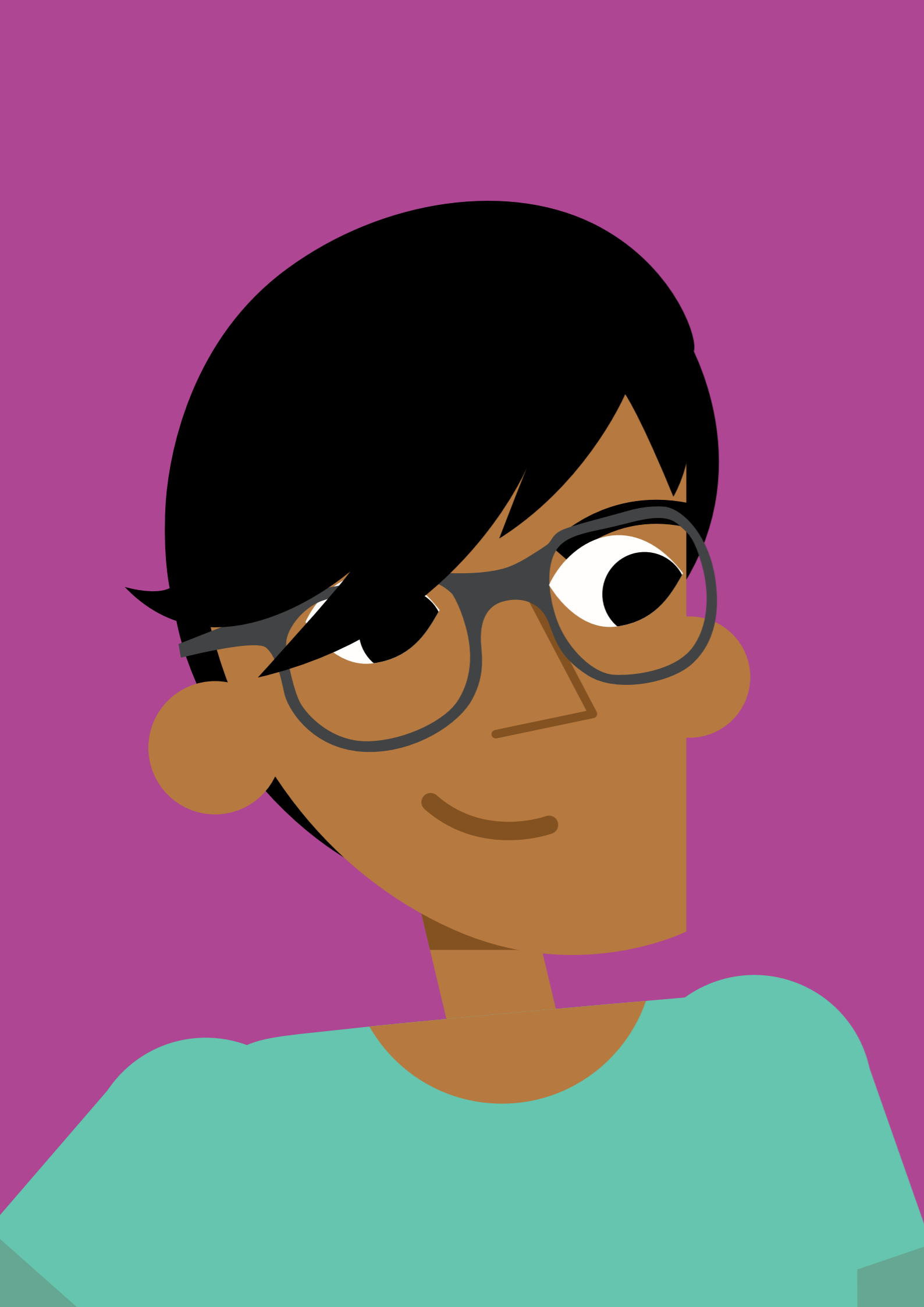
From puberty, menstruation, preventing pregnancy and HIV infections, to acknowledging your sexual and reproductive rights, this toolkit on Comprehensive Sexuality Education (CSE) will ensure that you are equipped with the necessary knowledge to aid you in making healthy and safe decisions about your body and sexuality.

Utilising both [AMAZE](#) content and videos, this toolkit provides a multimedia space with which you as an adolescent can interact. This toolkit is useful for parents and educators too. [AMAZE](#) content harnesses the power of digital media to provide young adolescents, their parents and educators with medically accurate, affirming, and honest sexual health information, regardless of where they live or what school they attend. This toolkit paired with reflective questions, and fun interactive videos, aids young people in developing a thorough understanding of your sexual and reproductive health.



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INTRODUCTION

AMAZE Africa recognises that CSE is essential to know as it equips young adolescents to learn more about their ever changing bodies so that they can make informed decisions about their bodies and their health.

WHAT IS A TOOLKIT?

Basically, a toolkit is an educational resource that contains information on a specific topic, and is presented in an accessible and meaningful manner.

In this toolkit, we have designed a CSE resource that provides practical guidance and information on SRH for adolescents. We hope that this toolkit will help you navigate this exciting time in your life and the changes your body will undergo while growing up.

SO WHAT IS CSE?

CSE provides young adolescents with information and opportunities to build skills and explore values in order to make informed decisions about their bodies, sexual and reproductive health, and well-being. CSE covers a wide range of topics, including puberty, pregnancy, STIs including HIV, gender-based violence, and healthy relationships. It is an important life-changing programme that assists young adolescents in preventing HIV/Aids, preventing unintended pregnancies and combating gender-based violence (GBV) amongst other issues.

CSE is also beneficial to the fulfilment of human rights. It educates adolescents about rights, such as to equality and non-discrimination and to be free from all forms of violence.

Many CSE programmes around the world are informed by international guidelines, called the International Technical Guidance on Sexuality Education (ITGSE) and we have endeavoured to ensure that the topics covered in this toolkit are informed by it.

The ITGSE guidelines cover the following components:

- Relationships
- Values, rights, culture and sexuality
- Understanding gender
- Violence and staying safe
- Skills for health and well-being
- The human body and development
- Sexuality and sexual behaviour
- Sexual and reproductive health



To learn more, check out this article.



DID YOU KNOW?

EASTERN AND SOUTHERN AFRICA (ESA) COMMITMENT:

In 2013, under the leadership of UNAIDS and with the support of the Regional Economic Communities particularly the East African Community (EAC) and the South African Development Community (SADC), the United Nations developed a set of commitments on the SRH needs and rights of young people. These commitments, now known as the Eastern and Southern Africa (ESA) Commitment, have expanded their involvement to include UN partners and civil society organisations from across the EAC and SADC regions. AMAZE international is also part of the ESA commitment, and provides CSE resources to partners of the ESA commitment.

AMAZE aligns with and accepts the ESA commitment while providing CSE resources to members of the ESA commitment. By signing the ESA commitment, members committed themselves to deliver on certain SRHR targets in a given time period. Targets have been set for 2025.

To learn more about the Eastern and Southern Africa commitment check out this article.



The ESA Commitment member countries are; Angola, Botswana, Burundi, Democratic Republic of Congo (DRC), Eswatini, Ethiopia, Kenya, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, Rwanda, Seychelles, South Africa, South Sudan, Tanzania, Uganda, Zambia, and Zimbabwe.



To learn more about the Eastern and Southern Africa commitment check out this article.





WHAT IS AMAZE?

AMAZE is an online initiative that provides free medically-accurate and age-appropriate CSE for young adolescents, parents and educators. The **AMAZE** videos and complementary resources take the awkward out of sexuality education, using videos packaged with accurate info that is fun, animated and gives you all the answers you actually want to know about puberty, your body and relationships.



To learn more about **AMAZE**
check out this video.

This **CSE TOOLKIT** will look at the following components of CSE, namely:

- Sexual and reproductive health;
- Puberty (human body and development);
- Values, rights, and sexuality;
- Understanding gender and gender identity; and
- Gender based violence and staying safe.

WHAT ARE SEXUAL & REPRODUCTIVE HEALTH AND RIGHTS (SRHR)?



According to WHO, SRH is a state of physical, emotional, mental and social well-being in relation to all aspects of one's sexuality and reproduction. In many countries this is a guaranteed right. SRH includes, but is not limited to, topics surrounding sexuality, puberty, relationships, sexually transmitted infections (STIs), family planning, contraception, and pregnancy.

All young people have a right to quality health care, including SRH services that are dignified, confidential, responsive to their needs, and provided without judgement or discrimination. Quality includes respecting confidentiality, giving choices and raising awareness on rights. Quality also goes beyond the service delivery setting to include community acceptance of adolescent sexual and reproductive health.

To ensure that the SRHR of young adolescents are realised, the ESA commitment highlights ten targets, with the first five target set for 2025, and the other five set for 2030.



TARGET 1: 95% of adolescents and young people are reached with good-quality, age-appropriate, culturally-relevant and evidence-based sexuality education through in-and-out-of-school programmes.

TARGET 2: Adolescent and youth-friendly SRHR services are integrated into Universal Health Coverage packages.

TARGET 3: A functional multi-sectoral framework is in place to facilitate linkages between sexuality education programmes for in-and-out-of-school youth and youth-friendly integrated SRH and psychosocial services.

TARGET 4: (SDG target 5.6.2) Number of countries with laws and regulations that guarantee full and equal access to young women and young men aged 15 years and older to SRH care, information and education.

TARGET 5: There is an increased number of youth-led organizations, groups, or networks who are regularly engaged through a systemic approach and participate in policy and decision-making processes relating to adolescents and young people SRHR.

**ESA Commitment targets set for 2025*

TARGET 6: Fast-track regional and country level actions to reduce early and unintended pregnancies (EUP) among adolescents and young people aged 10-24 years by 40%.

TARGET 7: Reduce new HIV infections among adolescents and young people aged 15-24 years by 60%.

TARGET 8: Eliminate all forms of violence including sexual and gender-based violence, against adolescent girls and young women.

TARGET 9: Eliminate harmful practices such as child marriage and female genital mutilation (FGM) among adolescents and young people.

TARGET 10: Establish sustainable financing modalities including direct allocation of domestic resources, innovative and blended financing modalities to mobilize resources to be allocated to all the relevant sectors contributing to the realization of the SRHR of adolescents and young people.

**ESA Commitment targets set for 2030*

Other policy frameworks for strengthening SRH rights on the Africa continent include:

MAPUTO PROTOCOL

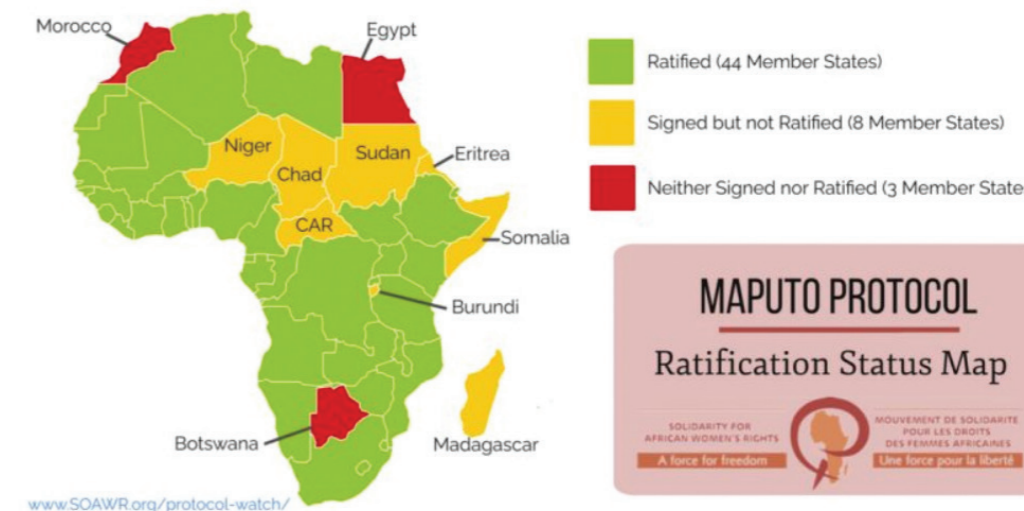
The Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa, also known as the Maputo Protocol, is an international human rights framework established by the African Union. This protocol was drafted in Lome, Togo in March 1995, and

signed in July 2003. The protocol went into effect in 2005. There are 49 country signatories.

Probing questions and lessons learnt:

- What are the intentions of SRH and rights?
- What is the rights based approach to youth friendly SRH?
- Why do you think young people must have their rights to SRH protected?
- What are the ESA commitment?
- Name one of the targets of the ESA commitment.

Keywords: health care; sexual and reproductive health; ESA commitment; Maputo protocol



A graphic of countries that have signed the protocol. Watch the video below to learn SRH rights:



To learn more about the Maputo Protocol, check out this article.



To learn more check out this video: Taking Care of Yourself and Others



2. PUBERTY

WHAT IS PUBERTY:

Puberty is the time in life when a child experiences physical and hormonal changes. It marks a child's transition into adulthood and usually starts at the age of eight for many children and can last up to five years. For girls, this is the process where a girl child will develop breasts and begin menstruation, or start their period. For boys, puberty is noticed when they develop a deeper voice, begin to grow facial hair, amongst other bodily changes.



Puberty is unique to each person and may be awkward for some people. It is perfectly normal to be uncomfortable. It is also perfectly normal to be comfortable. Changes in puberty happen at different ages for everyone.

BODY IMAGE:

How you think about what your body looks like and how you compare it to other bodies you see in the world is called body image. Sometimes how we see and think of our bodies can be influenced negatively by what we see in the media. Images and representation of the "perfect" body type can make us believe that our own bodies are not acceptable and beautiful.

According to the National Institute of Health based in the United States of America, negative body image in young adolescents is associated with mental health, and can cause stress, anxiety, depression, and eating disorders. Also, a negative body image can result in unhealthy eating behaviours, such as an increase in the number of meals, overeating, or restrictive eating, all of which are harmful for young adolescents.

Conversation starter:

Think about the most confident person you know. Why do you think they are confident?

There is a wide range of body sizes and types. Differences are what make us special and this is why it is important to remember that how we look does not define who we are and what we can do.

DEALING WITH REJECTION:

Rejection hurts and it sucks! But it is a normal part of life. That is why it is important to know how to deal with it.

STEPS TO DEALING WITH REJECTION:

Accept the decision of the person who rejected you. They have the right to choose what's best for them.

Focus on yourself. Do not blame yourself for failing, rather congratulate yourself for giving it a shot.

Being rejected does not mean that anything is wrong with you. Do not act out of emotion. Take a breath and talk it out with someone you trust and work through your feelings in a healthy way.

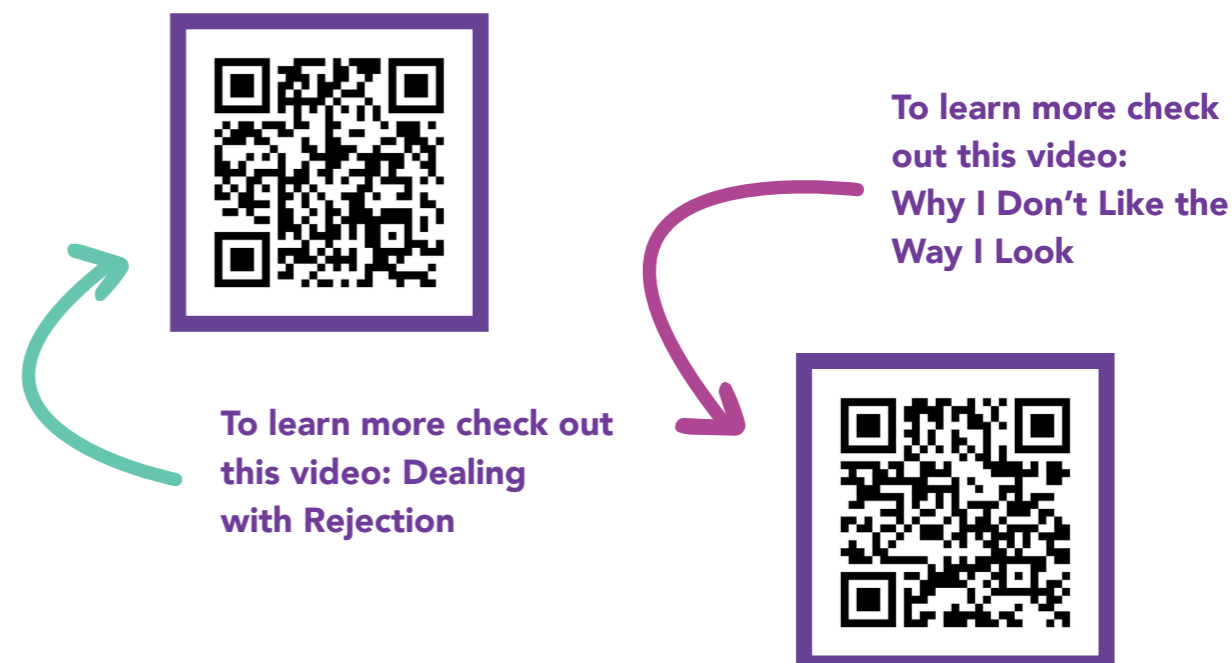
VIRGINITY

The word "virgin" means a person who has never had sex.

True or false: You can tell if someone is a virgin just by looking at their hymen.

The decision to have sex is an important one for anyone to make and having or not having sex does not make anyone a bad person.

Keywords: virginity; body image; puberty; girls; boys; menstruation



Lessons learnt:

- What are some signs you are going through puberty?
- What does virginity mean?
- How would you advise a friend to deal with rejection?



3. MENSTRUATION

Puberty for girls can start as early as age 8 and as late as 13 or 14, but eventually everyone goes through it. During this stage you can begin menstruating, also known as getting your period. This is a normal part of going through puberty for girls. It is part of growing up.

Girls go through a menstrual cycle. The menstrual cycle is the time from the first day of a woman's period to the day before her next period. Menstrual cycles can last anywhere from 21 to 35 days and this can vary from month to month. This is considered normal.

During a menstrual cycle, most girls will have a period which happens around once a month. Menstrual periods usually occur once a month and can last from a few days to a week.

Sometimes girls will experience cramps during their periods while others do not, and this is normal too.

NB: the first time a girl experiences a period, it is a signal to the body that it now has the ability to ovulate, meaning that the body now has the ability to fall pregnant.



To learn more check out this video: **Menstruation - What To Expect**



To learn more check out this video: **Period Hygiene**

Probe: What do you call menstruation or getting your period in your language and at home?

To keep your clothes clean during your period, you can use pads, tampons or menstrual cups to catch the flow of fluid. You can use whichever feels most comfortable to you. You will need to change these a few times a day depending on your flow.

Exercise, warm baths and a heating pad can help ease the pain of periods.

Conversation starter: Think about your first period. How was that experience? What do you wish you knew then?

If you haven't had your first period, how prepared do you feel for that day?

Lessons learnt:

- Different girls have different menstrual cycles. On average, how many days can a girl's menstrual cycle last?
- Do you think it is the same for all girls?
- What can be used to keep the period flow from staining our clothes?

4. PREGNANCY AND REPRODUCTION

Once you start to go through puberty, it is possible to become pregnant or make someone pregnant.

Pregnancy occurs when a sperm combines with an egg and fertilises the egg. If a fertilised egg implants itself in the wall of the uterus, the process of pregnancy begins. Pregnancy lasts about 40 weeks from the first day of a person's last menstrual period. A pregnancy is divided into three sections called trimesters. The first trimester is 1–12 weeks, the second trimester is 13–28 weeks, and lastly the third trimester is 29–40 weeks.

Watch this video to learn more about the stages of pregnancy:

To learn more check out this video: **Stages of Pregnancy**



Probe:

- How do the sperm and egg meet?
- What are some ways people can get pregnant?



To learn more check out this video: **Where Do Babies Come From?**

It is important to know the different ways to prevent pregnancy. This is referred to as contraception. The surest way not to get pregnant is not to have sex. If sexually active, you can use contraception to prevent pregnancy. There are different types of contraceptive methods. Contraception is either administered through medication, a medical device or a barrier like a condom that keeps sperm and an egg from fertilising. Remember, only condoms prevent the spread of HIV and STIs so it is important to use both when having sex and to be able to talk openly and honestly with partners about how you will protect yourselves from pregnancy and sexually transmitted infections and viruses.

Conversation starter:

- Name the two ways that condoms offer protection.
- Do you know what condoms look like?
- Do you know that there are female condoms too?
- Have you ever seen condoms in your local pharmacy or supermarket?
- Which other places can you find condoms?

Some contraceptive methods work to keep the ovary from releasing an egg or ovum, while others help create a barrier at the opening of the cervix to keep sperm from getting inside the uterus (womb) to find an egg. Using a condom and another form of contraception at the same time is called 'dual protection' and is the most effective form of protection.

TYPES OF CONTRACEPTIVES:

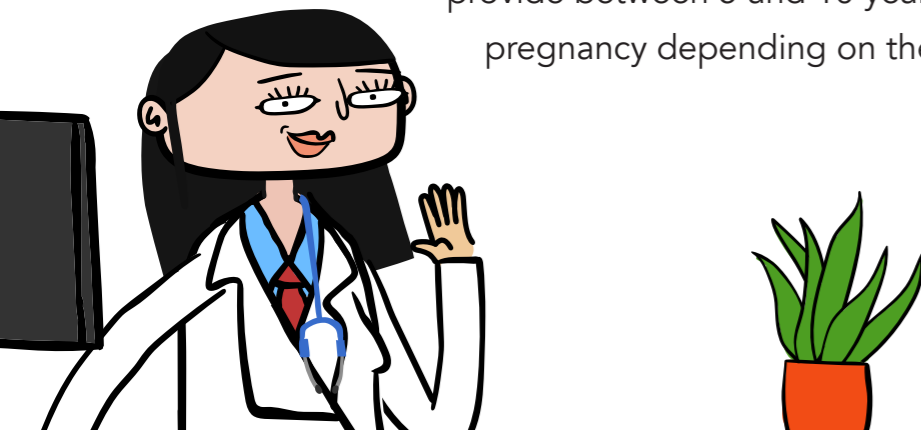
Short-Acting Contraception:

- The pill: Must be taken every day at about the same time. A packet of pills will last a month.
- Patch: Similar to the pill, but is worn for a week at a time (3 weeks of 1 patch per week then 1 week patch free).
- Injection: Two types; two month and three month injections administered by a nurse.

All of these methods are very effective at preventing unintended pregnancy if they are taken as directed. A person needs to go to their health care provider or a clinic to get a prescription for these methods. In some countries, some contraceptives are sold over the counter.

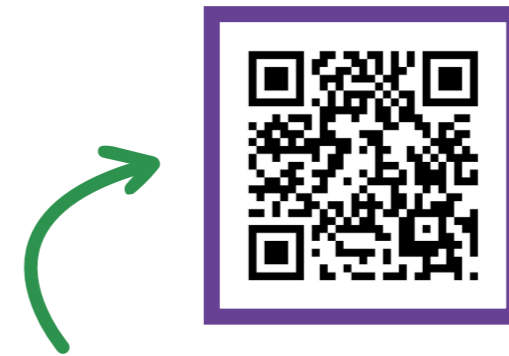
Long-Acting Reversible Contraception:

- Implants: Matchstick-sized bendable silicon rod fitted under the skin of the upper arm by a nurse or doctor. It can provide up to three years of protection against pregnancy
- IUDs: AKA "the loop". A small piece of flexible plastic and copper shaped like a T. A nurse or doctor fits the IUD into the uterus. It can provide between 5 and 10 years of protection against pregnancy depending on the method.

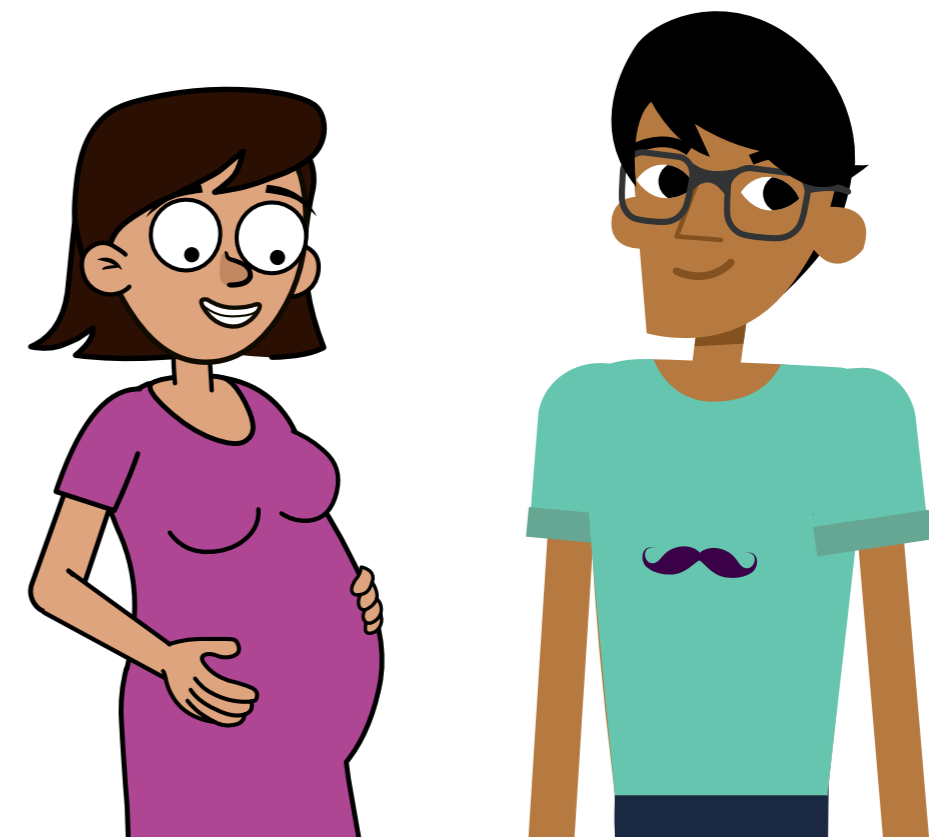


Before deciding to have sex, a couple should discuss how they plan to protect themselves from both pregnancy and STIs, including HIV.

Lessons learnt - open floor.



To learn more check out this video: [So you might be pregnant, what now?](#)





5. CONTRACEPTIVES

Contraception is understood as the deliberate prevention of conception or impregnation by any of the various drugs, techniques, devices or birth control.

It is essential for young people who plan to have, or are already having sexual intercourse, to receive information about the different methods of contraception, including the dual protection (using any modern contraceptive method along with male or female condoms) against pregnancy and STIs.

They need information on how to access male and/or female condoms and use them correctly and consistently; and on the availability of Pre-Exposure Prophylaxis (PrEP) and post exposure prophylaxis (PEP) for persons considered to be at significant risk of HIV infection.

Young people should also be provided with information on, and referrals to, comprehensive youth-friendly SRH services including services related to sexual abuse or assault, such as psycho-social support, Post-Exposure Prophylaxis (PEP) and pregnancy, STI and HIV services.

SHORT TERM CONTRACEPTIVES:

Contraceptive method	Type	Description	Efficacy
Diaphragm	Barrier method	A small, shallow dome-shaped cup inserted in the vagina that blocks the entrance to the cervix to stop sperm from entering the womb. It is used with a spermicide cream or gel.	88%
Female condom	Barrier method	A female condom is a sheath that is placed inside a woman's vagina before sexual intercourse.	79%
Male condom	Barrier method	A condom is a thin film sheath made of latex or polyurethane that is placed over a man's erect penis before having sex. One can use a water-based lubricant with a condom to increase the enjoyment of sex, but oil-based lubricants usually increase the risk of the condom breaking. A condom is for single-use and should never be re-used.	82%
Cervical cap	Barrier method	A cervical cap blocks the entrance to the cervix to stop sperm from entering the womb.	84%
Sponge	Barrier method	A sponge blocks the entrance to the cervix and releases spermicide, both together stop sperm from entering the womb and fertilising an egg.	76%
Spermicide	Chemical method	Spermicides affect the way a sperm travels in the womb making it hard for them to move freely and fertilize an egg.	72%
The injection	Hormonal method	The contraceptive injection is a shot of hormones either in the muscle or under the skin that lasts for one or up to three months.	94%

Regimen	Benefits	Accessibility
24 hours max	Non-hormonal Low cost	Consultation with a clinician or healthcare provider required, prescription required, available at public and private health facilities, available for purchase at pharmacies.
Every single time	STI protection Low cost Free and easy to use	No prescription required, available for free at public health facilities, available at private health facilities, available for purchase at supermarkets and pharmacies.
Every single time	STI protection Low cost Free and easy to use	No prescription required, available for free at public health facilities, available for purchase at most supermarkets, petrol stations and pharmacies.
48 hours max	Low cost Hormone free	Consultation with a clinician or healthcare provider required, requires a prescription, available at private health facilities.
24 hours max	Low cost Hormone free	
Every time	Hormone free Widely available	Does not require a prescription, available for purchase at various pharmacies.
Lasts one to three months	Highly effective	Requires a prescription, available for free at public health facilities, available at private health facilities.

SHORT TERM CONTRACEPTIVES CONT'D:

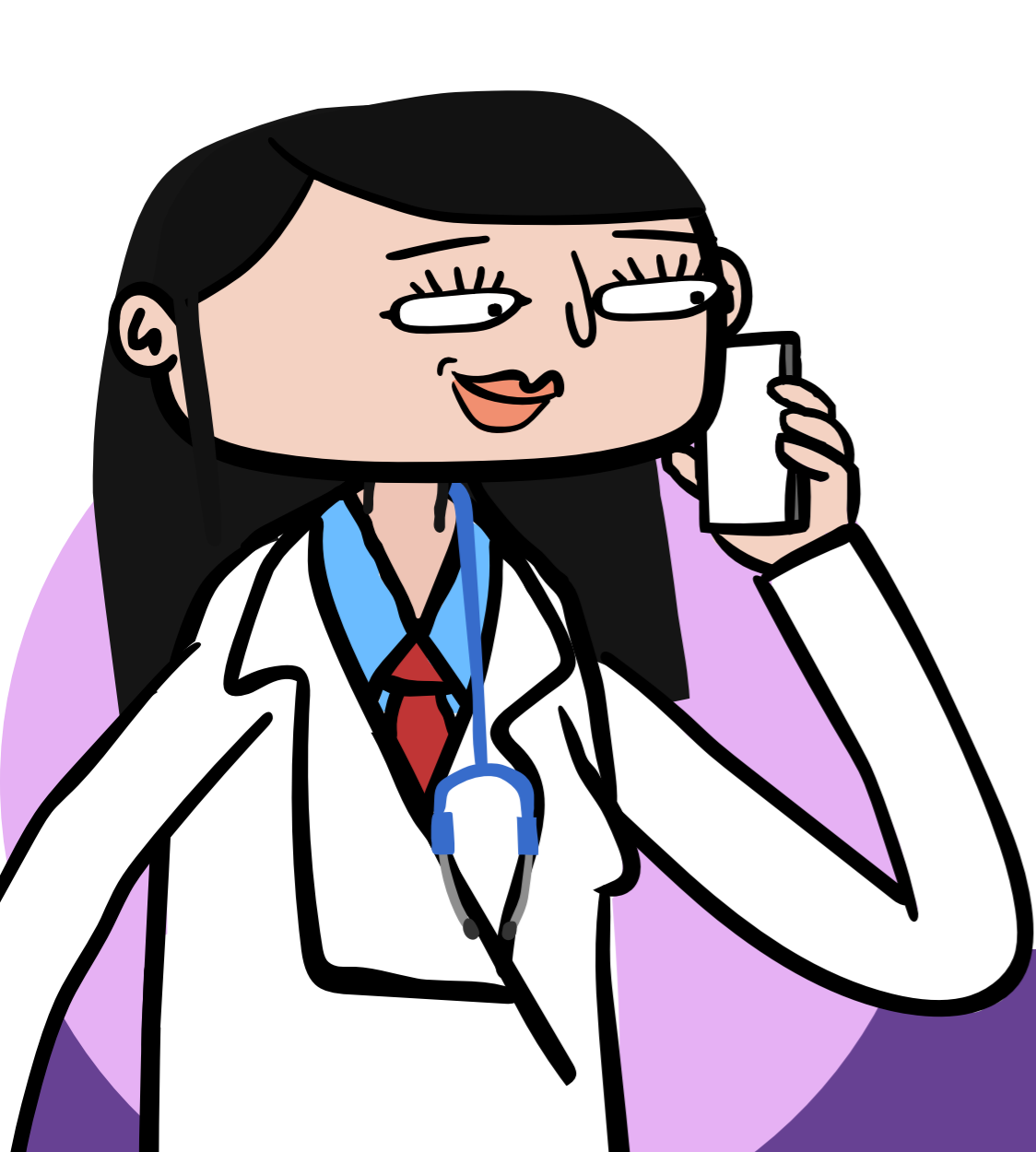
Contraceptive method	Type	Description	Efficacy
The pill	Hormonal method	The pill is a small tablet containing hormones that needs to be taken at the same time every day. There are a variety of oral contraceptives that individuals can choose from that come in 21- or 28-day packs.	91%
The mini-pill	Hormonal method	An oral contraceptive that contains the hormone progestin, the mini-pill also known as the progestin-only pill doesn't contain estrogen. The mini-pill thickens cervical mucus and thins the lining of the uterus preventing sperm from reaching the egg. The mini-pill also suppresses ovulation, but not consistently. For maximum effectiveness, the mini-pill must be taken at the same time every day.	91% - 99%
The contraceptive patch	Hormonal method	A birth control patch that is stuck onto the skin (upper outer arm, abdomen, buttock, back or places of the body that will not be rubbed against by tight clothing). The contraceptive patch does not reduce the risk of contracting STIs, including HIV/AIDS.	91%
The ring	Hormonal method	A flexible plastic ring constantly releasing hormones that is placed in the vagina to assist in preventing ovulation.	91%
Emergency contraceptive		Also known as the morning after pill. Emergency contraception is a birth control measure, taken within 5 days after sexual intercourse to prevent pregnancy. This method of contraception does not cause an abortion, as it only prevents pregnancy from occurring.	95%

Regimen	Benefits	Accessibility
Every day	Highly effective Widely available Easy to use	Requires a prescription, available for free at public health facilities, available at private health facilities and also available for purchase at various pharmacies.
Every day	Prevents pregnancy	Requires a prescription, available at private health facilities and also available for purchase at various pharmacies.
Every week	Prevents pregnancy Highly effective Easy to use	Requires a prescription, available at private health facilities and also available for purchase at various pharmacies.
Every month	Highly effective Easy to use	
Once off	Highly effective within 5 days of sexual intercourse	Does not require a prescription and are readily available at local health care facilities and pharmacies.

LONG TERM CONTRACEPTIVES:

Contraceptive method	Type	Description	Efficacy
The implant	Hormonal method	One or two small hormone releasing silicone rods put under the skin by a healthcare provider.	99%
Copper intrauterine device (Cu IUD)	Intrauterine method	An IUD is a small, flexible, often T-shaped device wrapped in copper that is placed inside a person's womb by a healthcare provider.	99%
Intrauterine system (IUS)	Intrauterine method	An IUS is a small, flexible, T-shaped system that releases low levels of hormones and is placed inside the womb by a healthcare provider.	99%

Regimen	Benefits	Accessibility
Lasts three to five years	Long-acting Reversible Highly effective	Requires a prescription, available for free at public health facility, available at private health facilities.
Lasts five to ten years	Long-acting Reversible Highly effective	Requires a prescription, available for free at public health facility, available at private health facilities.
Lasts three to five years	Long-acting Reversible Highly effective	Requires a prescription, available at private health facilities.



CONTRACEPTION MYTHS

MYTHS ABOUT SIDE EFFECTS

- Birth control will make me gain weight.
 - Birth control can have varying side effects from women to women. While studies have found no direct link between using hormonal birth control and gaining weight, many young women have stated experiencing weight gain.
- The implant causes weight gain.
 - Long-acting contraceptive methods such as the implant contain progestins (a synthetic form of the progesterone hormone that naturally occurs in the body) which do not contribute to weight gain.
- The Depo shot will cause weight gain.
 - Depo Provera can cause an increase in appetite, which can lead to weight gain.
- Depo will cause hair loss.
 - This is a possibility; Depo Provera's manufacturer has reported that one to five percent of women receiving the injections have experienced hair loss or no hair growth.
- Birth control will cause imbalanced hormones and can make one go "crazy."
 - Hormones found in birth control are similar to a woman's natural hormones. Stress has been found to have a greater effect on your hormones than birth control.
- Birth control pills cause cancer.
 - While there is no evidence linking birth control pills to cancer, some birth control options have been shown to reduce the risk of ovarian and uterine cancer.
- Birth control will affect my ability to have children in the future.
 - Studies have shown that long-acting birth control methods have no impact on one's future fertility.

- Intrauterine Devices (IUDs) can cause Pelvic Inflammatory Disease.
 - This is not true. Pelvic Inflammatory Disease (PID) is rare and only occurs in 1% of women with an IUD.

MYTHS ABOUT BIRTH CONTROL

- No one uses birth control methods other than the pill and condoms.
 - While dual protection (pairing birth control pills with condoms) is an effective method of protection, low-maintenance (IUDs and the implant) contraception methods are also available options for women.
- The ring falls out even when inserted properly.
 - The ring will stay in place until taken out once it has been inserted.
- The patch can fall off.
 - The patch is very sticky and once placed should stay put until removed.
- I hear IUDs can tear through the lining of your uterus.
 - This is possible, but not likely and not very common.
- I hear IUDs can get lost in your uterus.
 - It is possible, but not likely. The IUD can occasionally work its way down through the cervix (called expulsion).
- You can only get IUDs if you've already had a kid.
 - IUDs are safe for women, regardless of whether you have a child or not.
- The implant hurts when inserted.
 - You will receive a numbing solution before the implant is inserted and that will probably cause more discomfort than the insertion itself. Your arm may be sore and bruised for a couple of days.

CONTRACEPTION MYTHS CONT'D

- I want the implant but I'm afraid everyone will be able to see it.
 - You will be able to feel the implant if you press your arm near the spot it was inserted. If others are watching your arm as you press it, they may see the implant, but no one has to know it's there if you don't want them to see it.
- I don't have to take birth control because they make male shots/male pills now.
 - Although researchers are studying a number of male birth control options, nothing is on the market as yet. This means that condoms and vasectomies remain the only two birth control options for men.

- I don't need birth control because my partner pulls out.
 - The pull out, known as the withdrawal method is most effective when used correctly each time. It is important to remember that sperm can leak out during sex before ejaculation, so even if he pulls out, you can get pregnant and can also get an STI if you are not using a condom.
- I've had unprotected sex and didn't get pregnant, so I don't need birth control.
 - Having sex without birth control doesn't mean you can never get pregnant. It is important to use birth control to prevent pregnancy.

MYTHS ABOUT HOW WELL IT WORKS

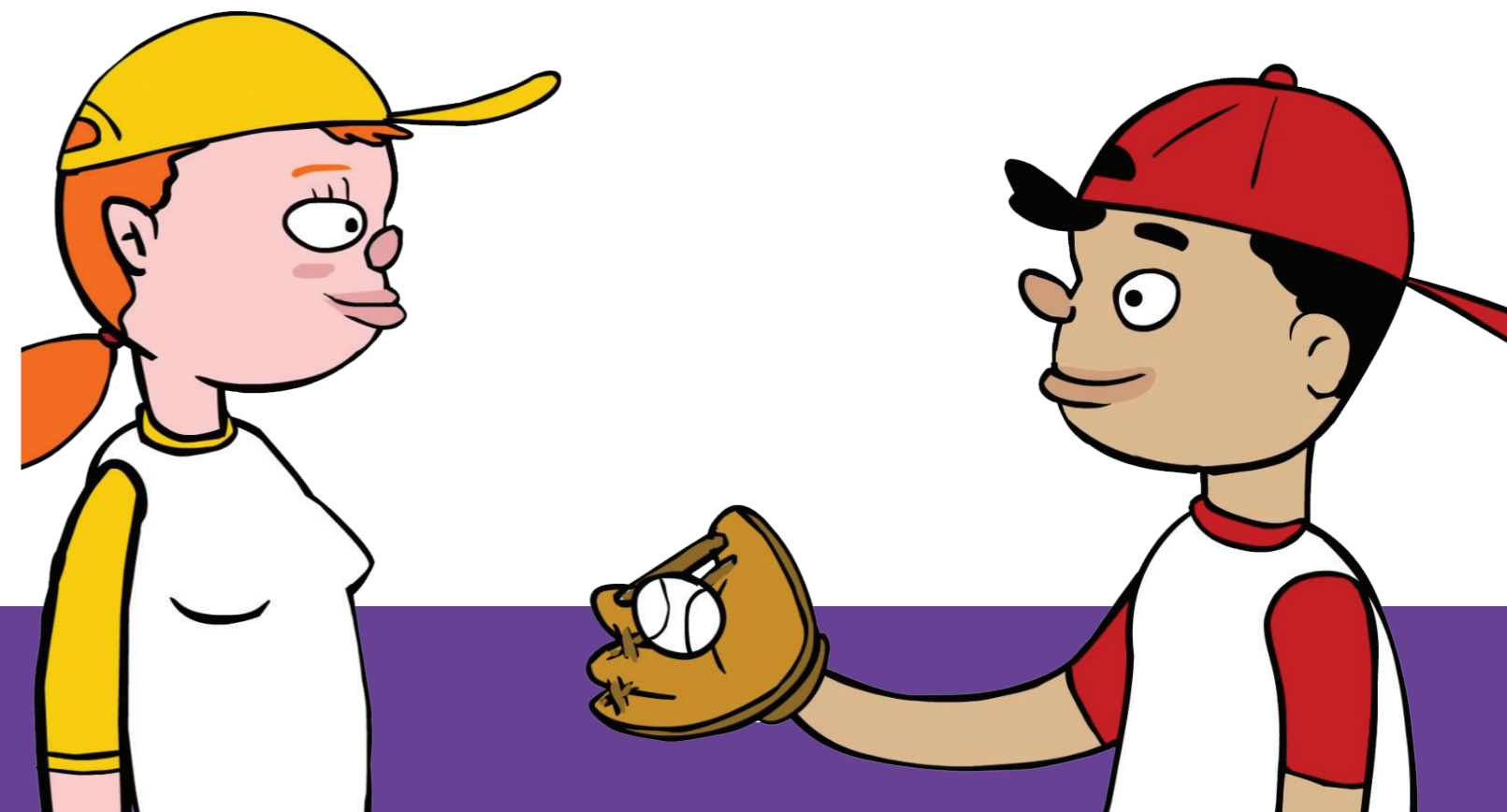
- The pill protects me from sexually transmitted infections.
 - The only available birth control methods that protect against STIs are condoms. Condoms are not completely the most effective method to prevent pregnancy, which is why it is important to use dual protection (pairing condoms and another form of birth control) to prevent STIs and pregnancy.
- If I miss three pills in a row, I can just take three in a day to prevent pregnancy.
 - Anytime you forget to take a pill, you must use a backup method, like the condom. If you constantly forget to take your pills, talk to your healthcare provider about low-maintenance birth control options.

Questions and lessons learnt:

- What is contraception?
- What are the different types of contraceptive methods available?
- Which contraceptive method prevents pregnancy, and STIs including HIV?

MYTHS ABOUT SEX & BIRTH CONTROL

- There are no benefits to birth control if you're not sexually active.
 - There are various reasons that one chooses to use birth control, some of which are unrelated to preventing pregnancy. Reasons may include addressing heavy menstrual bleeding, cramping or acne.



7. SEXUAL VIOLENCE & SAFETY



Everyone has the right to privacy and bodily integrity and someone else should not force themselves on to another.

Everyone has the right to be in control of what they will and will not do sexually, and should actively communicate and recognise consent from their partners. When there is no agreement (consent) between two people that they would like to engage in sex, then it is likely that this is sexual violence.

Sexual violence is any kind of sexual act (including online) where someone uses manipulation, force, harassment, bullying or intimidation to cause physical and emotional harm to another person.

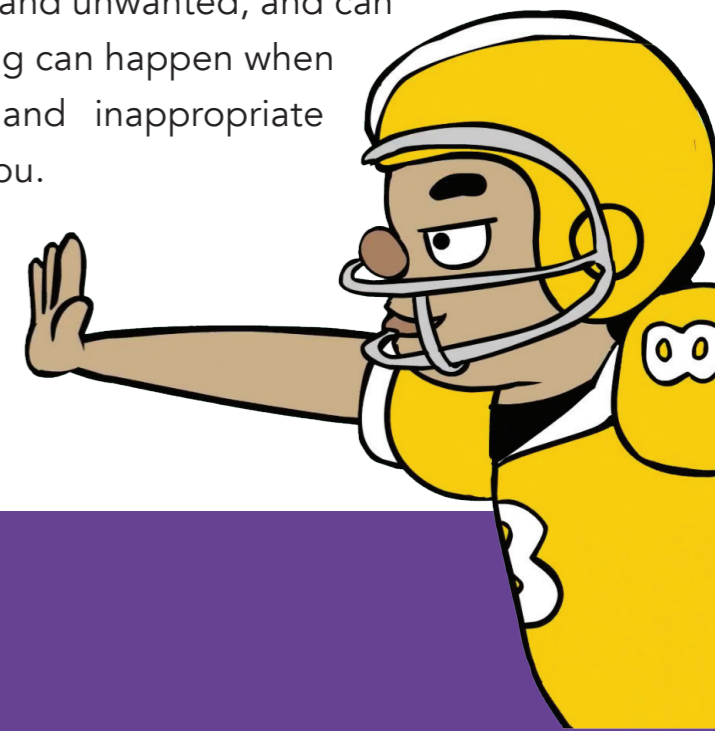
Sexual violence is any sexual act, attempt to obtain a sexual act, or other act directed against a person's sexuality using coercion, by any person regardless of their relationship to the victim, in any setting.

It includes rape, defined as the physically forced or otherwise coerced penetration of the vulva or anus with a penis, other body part or object.

DIFFERENT ACTS OF SEXUAL VIOLENCE INCLUDE:

- Rape
- Assault (hitting, slapping)
- Online sexual harassment (sexting)
- Sexual harassment; this can include forceful and unwanted kissing or inappropriate touching of another and the sharing of unwanted pornographic material or private parts to another
- Female genital mutilation

Sometimes sexual violence can happen on the internet, and social media platforms while engaging in sexting. It is important to understand that some sexting can be inappropriate and unwanted, and can therefore become violent. Violent sexting can happen when somebody is exchanging unwanted and inappropriate online messages of a sexual nature to you.



Sexual violence can cause a lot of harm to others and is never okay. It is therefore important to understand what sexual violence is so you can recognise it if it is happening to you and seek help or so you can avoid engaging in sexual violence by understanding what it is and why it is not okay.

It is also important to note that survivors of sexual violence should seek help and support needed to heal from the trauma that comes with it.

QUESTIONS AND LESSONS LEARNT:

- What is sexual violence?
- What are the different types of sexual violence?
- What is consent?
- What did you understand about the dangers of sexting?



To learn more check out this video: **Sexual Abuse Can Happen to Anyone**



To learn more check out this video: **Teasing and Inappropriate Touching**



To learn more check out this video: **Consent**



To learn more check out this video: **What is Sexual Harassment?**



To learn more check out this video: **Intimate Partner Violence**



To learn more check out this video: **Personal Safety: Sexting**



To learn more check out this video: **What is Sexual Assault?**



To learn more check out this video: **Female Genital Mutilation/Cutting: Times are Changing**



8. SEXUALITY, GENDER, IDENTITY, CULTURAL NORMS & BEHAVIOURS

Our biological sex is usually assigned to us at birth, and you can either be assigned male or female based on your reproductive organ.

Sexuality encompasses sexual orientation, sexual behaviour, sexual feelings, and the capacity for sexual and romantic relationships. It is an integral part of being human and involves biological, emotional, social, and psychological aspects.

Gender refers to the roles, behaviours, activities, and attributes that a society considers appropriate for men, women, and non-binary people. It differs from biological sex, which is based on physical characteristics.

Gender identity is a personal sense of one's own gender, which may or may not align with the sex assigned at birth. Common identities include male, female, transgender, non-binary, and gender queer. Sometimes people's gender identity matches their bodies, and sometimes it does not. Adolescents may explore and assert their gender identity, which can be a source of confusion and challenge due to societal expectations.

If a person identifies with a gender given at birth they are called "cisgender." In another instance, someone may be born with a penis but identify as a girl or born with a vagina and identify as a boy. This person may have a gender identity that is called "transgender or gender expansive". A person's gender identity and gender expression can be different. Who someone is attracted to—their sexual orientation—is not related to gender identity and expression. Everyone has both a gender identity and a sexual orientation."

CULTURAL NORMS AND BEHAVIOURS

1. Cultural Influence:

- Cultural norms shape attitudes towards sexuality, gender roles, and acceptable behaviours.
- Different cultures have varying expectations regarding adolescence, sexual behaviour, and gender expression.

2. Norms and Adolescence:

- Adolescents navigate cultural expectations while forming their own identities. This can lead to conflicts if personal identity does not align with cultural norms.
- Cultural norms can affect access to sexual education and health services.

In another instance, someone may be born with a penis but identify as a girl or born with a vagina and identify as a boy. This person may have a gender identity that is called “transgender or gender expansive”.

When you share your gender identity with the world through clothing, makeup, how you talk, act and more, this is called “gender expression.” A person’s gender identity and gender expression can be different. Who someone is attracted to—their sexual orientation—is not related to gender identity and expression.



Everyone has both a gender identity and a sexual orientation.

Check these videos out for more information:



GLOSSARY:

AIDS - AIDS stands for acquired immunodeficiency syndrome. It can take many years for someone with HIV to develop AIDS, and some people who are HIV positive never develop AIDS.

Body Image - How you feel about and perceive your own body. This can be influenced by your family, friends and images you see on TV, online and in movies and magazines.

Cervix - A tube-shaped tissue that has an opening that creates a passage between the uterus and the vagina.

Contraception - Either medication, a medical device or a barrier like a condom that keeps a sperm and an egg from uniting. Contraception can be short-acting, like the pill, which requires you take it daily to be effective, or be long-acting, like an implant that can be placed once and is effective for several years.

Fertilisation - The joining of a man's sperm and a woman's egg to create an embryo that will eventually develop into a fetus.

Gender expression: describes the ways (e.g., feminine, masculine, androgynous) in which a person communicates their gender to the world through their clothing, speech, behaviour, etc. Gender expression is fluid and is separate from assigned sex at birth or gender identity.

Gender identity: a person's inner sense of being a boy/man/male, girl/woman/female, another gender, or no gender.

HIV - HIV stands for human immunodeficiency virus and is a sexually transmitted infection, meaning it can be spread through unhealthy sexual behaviours. When someone is living with HIV, the virus begins to attack the immune system, which can make someone more likely to get sick from other germs.

Menstruation - Menstruation is also known as "getting your period". It occurs about once a month when your uterus starts creating a thick, lush layer of blood and nutrients inside in case you have sex and a foetus (or baby-to-be) starts to grow in there. If there is no pregnancy, the uterus pushes out the layer of nutrients, called the endometrium, which comes out of the vagina as your period.

PEP - PEP stands for post-exposure prophylaxis and is a medicine that is taken after exposure to the HIV virus.

Pregnancy - When a sperm from one person and an egg from another person join and implant in a uterus. This fetus will develop into a fully functioning baby.

PrEP - PrEP stands for pre-exposure prophylaxis and is a medicine that is taken prior to exposure to the HIV virus, works to prevent transmission of the virus to oneself.

Puberty - The changes that happen when your body changes from a child to a young adult, which usually starts to occur between the ages of 9 and 14.

Sexting - The exchange of sexual messages, photos or videos by text message, social media or email. Some people sext as a way to flirt, to be close to someone without risking pregnancy or a sexually transmitted infection (STI) or simply because they are curious. Some people may think sexting is harmless, but nothing we send on our phones or online is private, including text messages, emails or direct messages.

STI - STI stands for a sexually transmitted infection and can spread through sexual behaviours with someone who already has an STI through the exchange of semen, vaginal fluid, and/or skin-to-skin contact during sexual activity.

Uterus - The part of a female's reproductive organs in which a fertilised egg implants itself to begin growth and development into a fetus.

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