



Erasmus+

INTIMATE RESPONSIBILITY - SUPPORT FOR PRO-HEALTH BEHAVIORS OF YOUNG PEOPLE

SCENARIO OF SEXUAL EDUCATION WORKSHOP AIMED AD YOUNG ADULTS

Scenario was co-funded by Erasmus+ Programme as a part of project "Intimate Responsibility - support for pro-health behaviors of young people"

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INTRODUCTION

The script was created during the international training "Intimate Responsibility" realized in the ERASMUS + Program, which was attended by participants from 8 European countries: Greece, Slovakia, Romania, Bulgaria, Germany, Croatia, Portugal and Poland. 26 people saw the need to delve into the topic of building intimate relationships by young people and support them in undertaking safer and responsible behavior.

During the week-long training, specialists discussed a number of issues related to the intimate lives of young people, exchanged experiences and good practices. As a result of cooperation, this scenario was created.

Why was this topic chosen?

Sex education in Europe is a controversial issue; there is a lack of harmonized standards, in many countries there are no classes for young people about their sexual development, which in turn causes numerous social problems.

Lack of reliable sexual education makes young people derive their knowledge about sexual development from the sources, which often carry a harmful and untrue content. Adolescents are easily influenced by the media and peer groups. In result, they are undertaking behaviors that have serious consequences for them - ranging from sexually transmitted diseases through unwanted pregnancies, depression and the experience of sexual abuse.

Meanwhile, young people need to talk about sex life, role models and support in building conscious, positive adulthood.

The script consists of 7 modules: communication, sexual diversity, risky sexual behaviours, sexually transmitted infections, psychoactive substances and pornography and their influence on sexual behaviours, legal aspects.

It was developed for teenagers who, in accordance with the law regulations in individual countries, can engage in sexual behaviours. The material can be used by specialists (who update knowledge of sexuality in accordance with WHO standards) such as psychologists, sexual educators, teachers etc.



Youth for Equality



SECTION 1

WHY COMMUNICATION IS IMPORTANT IN IIMATE CONTACT?

INTRODUCTION

Communication is the basis of sexual education. Without it, we cannot express our doubts or needs, that almost always comes when we building new relationships. The goal of this section is to make it easier for young adults – cause talking about sexuality sometimes may be difficult. We feel shame, we are scared of talking about our needs or about being scared. Objectives are to develop in how to express their feelings, thoughts, needs, boundaries with sexual partners to ensure safe interaction. The result may be easier way to building and maintaining positive relationships and to prevent negative situations that may occur.

Working methods: gameplay, brainstorm, storytelling

Time frame: 1,5 hours

Materials needed: flipchart, markers, sticky notes, paper, condoms, water

TASK 1: “CONDOM CATCH” ICEBREAKER

Trainer fills a condom with a little water, ties it up and use it as a “throw ball” with the group. Pupil one starts with a sexual health word beginning with “A” then throws condom across the circle and the next person has to come up with a word beginning with “B” etc. This game is similar to icebreaker number one, “Name Chain.”

Usually, the condom is fully intact at the end and you can comment on how robust and safe condoms are if used properly. It also means that students can handle condoms in a casual and fun manner, potentially making them less intimidating when used for their intended function.

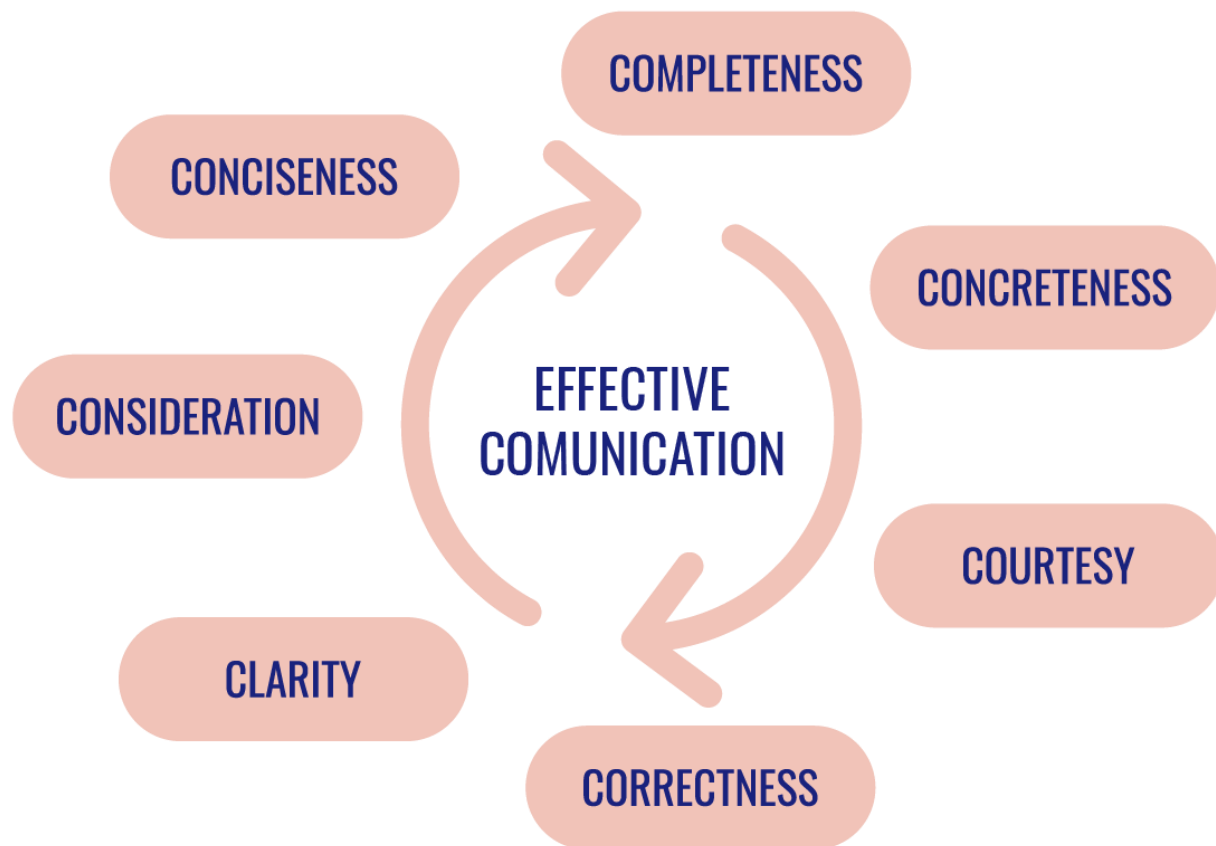


TASK 2: COMMUNICATION BEGINS WITH YOUR NEEDS

Trainer asks the group about communication in intimate contacts and gathers the main points on a flipchart. It also shows what group need to talk about – what is important to them, what they want to explore more.

At each proposal or input, trainer discusses it with the group to make it knowledge framed also with basic rules of communication – the 7c's of communication.

7 C's of Communication



To emphasize on the importance of good communication, the trainer can split groups to 7 pairs and ask them to make examples and contradictory examples of each "C" rule. Each pair is given the theme of conversation. Their task is to construct a dialogue in two ways - according to the principles of communication and without them. Each pair gets a part for processing, which is read later in the group forum and discussed, making a whole story.

Examples of issues to be developed:

1. Talking about expectations and fears related to committing intercourse.
2. A conversation about double consent.
3. Talking about the use of barrier contraception.
4. Talking about the limits of each person (e.g. I don't want to do this or that).
5. A conversation about satisfaction with intercourse.
6. Talking about areas that can be improved (e.g. more communication, proximity, etc.)
7. Talking about ending the relationship.

TASK 3: LANGUAGE AND COMMUNICATION

Each group receives a few words that they will have to explain to the rest of the group.

Words/names are related to intimacy and sexuality, e.g. vagina, anus, menstrual cycle, safety, breasts, types of sexual contact, types of contraceptive precautions, etc.

Each team must explain the meaning of the word by considering:

medical/formal name	common terms
definition	determine the risk level
meaning in the context of intimacy and sexuality	

IMPORTANT:

Communication is often taken for granted and obvious - after all, we all communicate every day. However, the proper use of communication tools is not easy. Initially, resistance and weariness may appear, so it is worth starting this segment by talking why communication is important and why working on it - especially in the area of sexuality, where many topics are treated as taboo.

What should absolutely resound during classes?

- ✓ the issue of double consent (both parties must agree to intimate contacts that respect the borders, sense of security and comfort),
- ✓ legal issue (since when engaging in sexual relations is legally allowed, under what restrictions)
- ✓ the issue of the necessity of communication as an integral part of establishing relationships.

SECTION 2

SEXUAL DIVERSITY – GENDER GATHERINGS

INTRODUCTION

One of the basic assumptions of sex education is the issue of acceptance – oneself as well as other people's. We may not accept certain behaviors, choices or opinions, but we cannot transfer this to the assessment of the other person. A sense of security, comfort and being in harmony with each other are extremely important in building new relationships and relationships. During classes with young people, it is worth raising the topic of sexual diversity to make them sensitive to the fact that not everyone by definition must be a heteronormative person. The aim of the course is to raise awareness of common gender stereotypes that non hetero-normative people face in their daily life, self-reflection on self-attitude towards non hetero-normative people, informing youngsters to have insights and knowledge on diverse sexual identities, promote understanding and embrace diversity of gender and personal differences.

Working method: Roleplay – simulation of different gender identities, brainstorming

Time frame: 1,5 hours

Materials needed: papers, pens, enough space, sticky notes, handout of written different gender identities

The educator starts the class and explains the purpose of it to the participants.

TASK 1: APPROACHES TO DIVERSITY

The game should start with an introduction to the general approach to sexual diversity. To make it easier for the participants, the trainer should briefly discuss with them 4 different approaches to diversity.

Trainer splits the group in 4 smaller groups. Each group will brainstorm one of the categories, which later will be presented to the whole class. The task of the participants will be to try to work on the definition and examples of each category.

Categories should include:

- ✓ Sexual orientation
- ✓ Gender expression
- ✓ Gender Identity
- ✓ Sex

When the groups will be done (it shouldn't take more than 15 minutes) each group presents the results of their research. The teacher adds missing information or corrects false assumptions.

TASK 2: GENDER GATHERINGS

Educator asks the group to form the circle; every participant should stay in the circle facing the opposite to the centre of the circle. When the circle is formed, leader of the workshop sticks the post-it with character info written on it, on participants' forehead. Characters should include:

Cisgender	Transgender	Trans man
Trans women	Gay man	Gay women
Pan-sexual person	Asexual person	Bisexual man
Gender fluid	Intersex	Transsexual
Cross-dressing person	Demi-sexual	Bisexual woman
Queer	Genderqueer	Third sex
Androgynous		

Participants should be informed to keep the characters confidential until all instructions were given. After everyone has their characters, the trainers will give instruction to behave, talk, ask question towards others according to their roles but not making it so obvious for them to guess.

After 10 minutes, the game ends. The task to each participant is to guess what character they have (one by one) and then discuss the results on the forum.

TIPS FOR TRAINERS:

The second part of the exercise is to moderate the group to share their reflections after the play. Questions, which may help to moderate the discussion, may be: how did you feel during the exercise? Did you like the way people behave towards you? Was it easy to guess? What made you think that you have this character? What words, sentences or behaviors made your mind? What do you think about the questions, behaviors and attitudes? What kind of stereotypes could you recognize during the exercise? What attitudes would you change? Were there concepts and gender identities you haven't known before the activity?

At the end of the debriefing, the trainers explain what is a stereotype and acts based on harmful stereotyping. Ending conclusion may focus on that we are all different and valuable and should respect our diversity.

IMPORTANT!

Trainers can help the participants to clarify the roles in case they don't know them so they won't feel lost during the play. Trainers can observe the game to avoid inconvenient situations and if needed – to intervene. Environment and atmosphere should be accurate to take the activity seriously. Trainers should be ready to be able to answer the questions in a professional and serious way, sometimes to refute the stereotypes that may occur during the game.

SECTION 3

RISKY SEXUAL BEHAVIOURS: How to make it safer?

INTRODUCTION:

Nowadays it has been observed that young people and teenagers are more and more engaged in risky sexual behaviours, which lead to undesired consequences such as pregnancies, sexually transmitted infections (STI) and emotional implications (e.g depression e.t.c). There is a variety of factors that cause the abovementioned behaviours, the most common of which are partner's and peer's pressure, lack of confidence and insecurities, family role-models, as well as lack of education. That is the main reason why the role of teachers and educators is more crucial than ever as they can contribute to the prevention of such behaviours via proper sexual education. Therefore, the aim of the present scenario is to provide educators and teachers useful and practical tools in order to fulfil their aforementioned goal.



Trainer should be well prepared to this section – also have to have some part of medical knowledge connected to sexual activities, such as meaning of the term “risky sexual behaviours”, sexual terminology, sexual identities and preferences, causes that lead to risky sexual behaviours and its consequences, means of protection (use of contraceptive methods, regular testing, non-use of alcohol and drugs etc.)

Working methods: applied drama, brainstorming, discussion, group work

Time frame: 3 hours

Materials needed: laptop and projector, markers, pens and pencils, sticky notes, papers, flipcharts

TIPS FOR TRAINER – WHOLE SECTION:

If the youngster will want to talk to you about such a sensitive matter, you should be very well prepared to handle all questions. It's okay that some things you may not know – we are not walking encyclopedias. But, every word you say and every gesture will have an impact on the participants. We don't know about the sexual experiences of the participants. We need to be very gentle while discussing the topic of risky sexual behaviors to avoid hurting anyone of the attendees.

- ✓ Feel comfortable with their own sexuality and sexual life (the trainer)
- ✓ Creating a non-judgemental environment of acceptance, trust and security
- ✓ Encourage the freedom of expression
- ✓ Be sincere and accurate

- ✓ Fear is not a tool for prevention
- ✓ !!! Mind the body language !!!

TASK 1: ENERGIZER (PENGUIN MOTHER-CHILD GAME)

For the group to integrate and also feel safe, it's worth starting with an energizer. It will maintain the trust between the group or be a good start of it.

Trainer divides the group in couples. Each couple is composed of a mother and a child and choose their own sound. The mother guides the child using their sound. The child with closed eyes tries to follow their mother's sound. In the second round of the game, the roles are reversed.

TASK 2: UNDERSTANDING RISKY SEXUAL BEHAVIOURS

The trainer gives each youngster a sticky note to write what they consider as risky sexual behaviour. The trainer should tip the group to focus on 2 issues: definition and example of risky sexual behaviour. They stick them on the flipchart and the trainer reads them all and discuss it with the rest of the participants.

The trainer should ask each example such questions as:

- ✓ Why do you think this behaviour is risky?
- ✓ What can it lead to?
- ✓ Why do people decide to do this or that?
- ✓ Can drugs influence the level of danger?
- ✓ Is this can be done in a safer way?
- ✓ Is this behaviour meant to everyone?

Discussion regarding them takes place and the trainer can add more behaviours – if needed – and further information. The trainer should pay extra attention to consequences of each example; not to scare the participants, but to show things that are rarely spoken about in public, such as the risk of STI, unwanted pregnancy or mental health issues.

TASK 3: CAUSES THAT LEAD TO RISKY SEXUAL BEHAVIOURS

The second part of exercise is creating a context that can lead to risky sexual behaviour . Each youngster writes on a sticky note what are the causes (in their opinion) that lead to risky sexual behaviour – f.e. influence of mass media, the pressure of the peers etc.

When each participant is done, they stick them on the flipchart and the trainer reads them all and discuss regarding them takes place and the trainer can add more causes–if needed– and further information.

Instead of putting post-it notes to a flipchart, the trainer can divide the group in 5 and give them one flipchart to do the task as a group and then ask to present their finding to others.

TASK 3: APPLIED DRAMA BASED ON AUGUSTO'S BOAL FORUM THEATRE

Trainer divides the youngsters in groups of four (it can be adjusted depending on the number of the participants) and gives to each group a case of risky sexual behaviour (e.g. unprotected sex, multiple partners, drugs and alcohol etc.) based on which they have to prepare a performance within a certain timeline– 20 minutes should be more than enough.

Trainer explains what participants should focus on – such as context of the situation that may lead to risky sexual behaviour – not how they doing it.

The trainer also explains to the youngsters that they have to perform their act twice. The second time the audience will stop the acting at the points they think it's crucial in order to change the outcome of the story and prevent risky behaviour. The interventions should lead to contributing discussions.

IMPORTANT

- ✓ applied drama tools require a sense of security and comfort in the group – it involves playing scenes in the forum, which can be difficult for many. If the group is not ready enough to present the scenes, you can replace the exercise with, for example, building a scenario of a risky situation and methods of intervention. They can also be carried out in the whole group – each person adds a sentence to the story, continuing it and also changing the plot.
- ✓ when explaining the task with applied drama method, it is worth adding one rule – the scenes are to present the context of a risky situation, the factors that led to it, the role of individual people and their intentions in a given situation etc. Participants cannot play scenes related to sexual intercourse – it will not be educational. It will change the atmosphere during classes to comedy or offensive to some participants.

✓ more visual materials can be more efficient to remember for young adults. If the group is shy to talk about risky sexual behaviours, you may encourage them to talk using videos:

- The risk of teenagers engaging in unsafe sexual behaviour
- #NaturallyCuriousProject
- #Teens and sexual activity - prevention
- #My story: Struggling, bullying, suicide, self-harm

SECTION 4

PREVENTION OF SEXUALLY TRANSMITTED INFECTIONS

INTRODUCTION

The aim of the course is to provide young people with current knowledge about sexually transmitted diseases and infections. After class, participants should know how to recognize the first symptoms of infection, but also be more aware of how to protect themselves from it. Participants after the workshops should recognize situations and behaviours that can be dangerous for them. Increase in their awareness will be protective also for potential partners with whom they will engage in intercourse.

Participants will also learn how, with what frequency and after what risky sexual behaviours they should undergo control tests for STI and HIV.

Working methods: mini-lecture, brainstorming, team play.

Time frame: 2 hours

Materials: cards, markers, crayons, loudspeaker and music, internet access.

The educator starts the class and explains the purpose of it to the participants. He should also ask if participants have ever heard of STD and SDI.

TASK 1 - WHAT WE CAN SEE AND WHAT WE CANNOT

The leader divides the participants into smaller groups (depending on the number of people participating in the workshop) and gives them cards and markers. The task is to draw a person infected with HIV, according to their knowledge and/or imaginations.

After groups will be done, the educator should discuss the effects of the participants' work. It can be expected that the youth will draw people somehow marked by the disease, according to common stereotypes. The educator should explain that we often think that we can recognize the disease by the appearance of a person. For example, it is difficult to assume that a pretty, young, well-dressed boy or attractive young girl can be infected. Meanwhile, caution is important at every turn. Infections are democratic: they do not apply only to people with a certain orientation or drug users. STI is often asymptomatic in the first stage, and by the fact that not everyone is testing regularly (or even after taking risky behaviour), it's dangerous to depend only on visual symptoms. We often find out about the disease only when its stage is already advanced. During this time, it is very likely to unknowingly infect other people.



TASK 2 – STI PRESENTATION

The leader divides the participants into groups so that six teams are formed.

Each team receives a card with one infection:

- ✓ Syphilis
- ✓ Gonorrhoea
- ✓ Chlamydia
- ✓ HIV
- ✓ HBV; HCV
- ✓ HSV

The participants' task is to collect information on individual infections. The instructor asks participants to collect the data according to the following scheme:

- ✓ routes of infection
- ✓ symptoms (including the first stage)
- ✓ treatment method
- ✓ health consequences of non-treatment

Participants can use computers or mobile phones; it is worth to show participants websites containing verified information.

After work, each group presents the results of their research. The teacher adds missing information or corrects false information.

TASK 3: WHAT CAN PROTECT US?

The first part of the exercise will be based on the brainstorming by the participants. The teacher asks the group, "What protects against infections?". On flipchart, he writes ideas of participants, discussing each of them. The main goal of the task is to make participants aware that condoms are the only protection against STI.

If the group is open to it, the trainer can show to group how to put a condom properly on penis phantom and then each or participants may try to do it by himself. It's good to tell the group about:

- ✓ where is safe to buy condoms (e.g. pharmacy),
- ✓ what is needed to be checked before using (e.g. expiration date, no damage, whether the product is recommended by the EU)
- ✓ how to keep safe the condoms (e.g. protection from solar exposure)
- ✓ how to put them on penis

- ✓ how to not use the condom (e.g. two times, one condom on another, using it also on fat-based lubricants)

Then, the lecturer divides the participants into pairs. Person A has a clenched fist and declares that he will not use condoms. Person B has the task to convince his/her partner that it is worth using this type of contraception, using various arguments. Person A, when he feels convinced, opens his fist and ends the task.

TASK 4 – PARTY TIME

The instructor distributes post-it notes with a certain symbol (circle, star, square, triangle, etc.) to each participant. Then, he introduces the group to the context of the exercise - they are at a party where they do not know other people. The participants' task is to make contacts through simple social conversation. If the participant finds a person whom he has a good conversation with, he arranges to spend the evening with him.

When the majority of participants are paired, the event ends and the cards drawn by them are discovered. Each of the symbols has its own meaning - e.g. a circle is syphilis, a square - chlamydia, etc. It is important that one of the symbols means a healthy person, without infection. The exercise is a summary of the STI workshop block.

IMPORTANT

- ✓ Before starting the workshop, the TRAINER should prepare photos presenting individual infections at various stages. This is important

because young people often do not recognize the beginning of the infection, because of their online search - they usually find photos showing the advanced stage of the infection, which lead to ignore the minor symptoms.

- ✓ The instructor should state that the condom provides 100% protection against STI if it is bought in a safe place, properly stored (e.g. sun protection provided) and put on according to the instructions.
- ✓ While summarizing up the exercise, the instructor should pay attention to the issues of safety, mindfulness in making contacts, caution. Once again, he should emphasize that unprotected contacts by the condom can transmit infections. It is also worth to collect from the group their suggestions and tips on increasing safety during events, parties or everyday activities, or when we establish new intimate relationships - what do they think may have reduced the risk?

SECTION 5

PSYCHOACTIVE SUBSTANCES AND ITS INFLUENCE ON SEXUAL LIFE – drugs, sex and rock'n'roll

INTRODUCTION:

Psychoactive substances can often be associated with sexual behaviour. This is a very risky combination - it is difficult to determine the border between experimenting and harmful use, especially in the early stages of using the substance. The consequences may appear quite late, even too late - damages, losses, injuries occur. Sexual contact under the influence of substances pushes the border - something that we would not do soberly, under the influence of drugs can become a real scenario. Risky situations increase - e.g. unprotected sex, sex without full consent, addiction. This is especially true for stimulants that enhance the sexual experience. This can lead to a situation where sexual contact without enhancement with stimulants ceases to be satisfactory and has great consequences for mental health.

Working methods: brainstorming, presentations, moderated discussion

Time frame: 4 hours

Materials needed: Papers, Pens, Flip shots, Beamer, Laptop

TIPS FOR TRAINER:

Trainers can be honest if he/she doesn't know the answer and can find out and deliver the information /answer later. Trainers should be available during the group work to answer their questions and keep the group focus on the topic.



TASK 1: PSYCHOACTIVE SUBSTANCES – DEFINITION, DISTINCTION, EFFECTS

The trainers divide the participants to a group of 4 and then they receive a task to work on it. Each team has to answer the general question related to their category of drugs: what do you know about the effect of the drugs on physically and psychologically? How does it affect sexual behaviour?

- ✓ Group 1 will work on the "Legal Drugs" (Alcohol, Caffeine and Nicotine etc.)
- ✓ Group 2: Opiates (opium, morphine, heroin, synthetic pain killers etc.)
- ✓ Group 3: Psychedelic drug (marijuana, MDMA-part of ecstasy crystal, LSD, psilocybin-mushroom, ayahuasca - herb)
- ✓ Group 4: Stimulants (cocaine, amphetamine, methamphetamine, mephedrone)

The groups have 30 minutes time to prepare a presentation on the drugs for the other groups.

The trainers will give information about drug-using from the perspective of an expert and discuss the real-life experiences. There will be statistics shown to raise awareness of the increasing drug-use between youngsters. It is important to speak directly about the consequences of using individual substances.

TASK 2: INFLUENCE or CONSEQUENTIONS

The second part of the exercise is working again in groups, with an emphasis on the consequences of drug use. Each group gets a new topic to develop:

- ✓ drug myths and stereotypes,
- ✓ influence on sexual experiences
- ✓ consequences of drug abuse (physical, emotional, environmental),
- ✓ how to help addicts to get out of addiction.

Then group work is discussed in the forum. The trainer's role is to organize the information presented by the groups and to make corrections if necessary.

IMPORTANT:

Young adults have some knowledge of psychoactive substances. This is also associated with stereotypes and myths that invariably appear in common knowledge about drugs - for example, marijuana is not addictive. There is also a tendency to emphasize the "positive" effects of drugs while disregarding the consequences of addiction, mental health or potential losses and damage in one's own life or in the immediate family. The trainer's role is not to scare the participants, because then a counter-situation will arise. Referring to scientific knowledge, research and examples from everyday life - and thus treating participants in partnership - can produce better results than referring to the darkest scenarios.

SECTION 6

MASS MEDIA AND PORNOGRAPHY INFLUENCE ON SEXUAL DEVELOPMENT

INTRODUCTION

In the era of technological progress and the Internet, everyone has very easy access to pornography, especially young people and young adults. Studies show that a large proportion of teenagers derive knowledge of sex and sexuality from pornographic sources. Often, this is - alongside peer knowledge - the only way to get information about sex, as only a small proportion of parents work on this topic at home.



Watching pornography can have serious consequences in the young adults' psychosexual development. The image of intimacy and sexual behaviour is highly different from reality - starting with the appearance of the actors, objectifying the role of a woman or presenting particularly risky sexual behaviour. When it comes to the first real experiences there may appear feelings of dissonance, shame, embarrassment and great anxiety associated with the fact that the intercourse was not similar to that of a pornographic film.

Due to the fact that pornography is widely available, it is worth discussing with teenagers its potential impact on the development of their sexual behaviour.

TIP FOR TRAINERS – points of discussion with the group

- ✓ the body image presented in pornography and most of the mass media is not reflected within the general population (e.g. actors often use plastic surgery such as breast implants, or photos are corrected in graphic programs))
- ✓ sexual practices showed in pornography could be very violent, practised only in niche fetish communities; in the way, there are shown in pornography could be dangerous and largely unsafe - in films, there is no safe context for such practices, they are presented as "common and popular" while in fact, they are requiring more knowledge and preparation than non-fetish practices (imitating them by young people can have negative effects, such as bodily harm, psychological harm),
- ✓ pornography usually promotes sex without protection,

- ✓ the increasing occurrence of revenge porn and similar practices is a serious problem youth could easily face themselves,
- ✓ Sexting and recording of sex videos are very much promoted on social media; a trainer should discuss with group methods of protecting the image on the web, i.e. a discussion about the fact that something that has been posted once on the internet is never lost.
- ✓ mass media sometimes pushes false narratives about sexuality, especially regarding conservative opinions such as the use of abstinence as the only kind of contraception and STI prevention or it goes in the opposite direction – such as “to be cool means having a lot of sexual partners”.
- ✓ Remember about using proper communication (clear and concise, appropriate for the age group) – do not use metaphoric language) with respect to ones who have watched porn. Participants shouldn't feel being judged or bad.
- ✓ Encourage participants to talk to you privately if they have questions they cannot or do not feel comfortable to ask in front of the others.

Materials for the workshop: space with chairs, web connection, laptop, projector, post-it notes, big papers, pens, photos of body parts

Time frame: 2.0–2,5 hours

TASK 1: PORNOGRAPHY – WHAT IS ALL ABOUT?

The trainer gives each participant two post-it notes. The group's task is to write two opinions / associations / disadvantages / advantages / reflection / definition of pornography. Give them enough time to write their ideas and opinions regarding the topic, but mainly - to critically process the content and how it affects their sexuality. Then, the trainer collects the cards, mixes them and distributes again randomly selected cards to each participant. Everyone reads two opinions sequentially, starting the debate about the note they have read. The trainer should give a little time to every distinct opinion and support the group with analyzing written content.

The trainer's role is to moderate the discussion, guide the right aspects and correct misconceptions (e.g. pornography cannot be addicted, pornography gives its own benefits) in a very delicate way. At the same time, the trainer writes on the flipchart the main observations of the participants, thus mapping the problem and showing a complete picture of the issue. This can be done in the form of sorting definitions, disadvantages, advantages, threats, restrictions - depending on the group's contribution.

TASK 2 – VIDEO DISCUSSION

Show the group video of TEDx speech:

<https://www.youtube.com/watch?v=DBTb7IUzPmY>

The trainer discusses the material with the group as a summary of the critical approach to the effects of pornography on young adults. This is a summary of

the discussion. The trainer compares the video content to the group's insights, discussing common and divergent points gathered in the flipchart.

TASK 2: TRUE OR FALSE?

The trainer shows 10 pictures in each of the following categories:

- ✓ examples of natural and post-operational female breasts
- ✓ examples of extremely photoshopped actors and actresses and their real photos

Then, participants in smaller subgroups divide the photos into natural shots and those showing an artificial image, often created by graphic designers or plastic surgeons. The trainer discusses the differences in the pictures and sums up with the group that what we see in the films often deviates from reality.

IMPORTANT

It is worth opening the topic of distinguishing between what is artificially created and what is natural. Research shows that the image presented in pornographic films negatively affects the self-esteem of young adults. They compare their bodies, imperfect, during development to perfect, but created by a plastic surgeon. They also compare their skills to the skills of actors. They often have reproaches, a feeling of shame that they are not so "good", "pretty", "experienced", which is reflected in their sense of self-acceptance and can even lead to depressive states. It is worth emphasizing that what is natural is beautiful and true and skills come with time.

SECTION 7

LEGAL ASPECT OF INTIMACY

INTRODUCTION

We often forget that the sphere of human sexuality is also reflected in the legislative and legal system. It also relates to human rights; also has an international declaration of sexual rights for each individual. When working with young people in this area, it is always worth talking about a legal context – such as the age of consent, legal conditions to engage in sexual contact or consequences.

The goal of this section is to raise awareness among young adults of their sexual rights as citizens of an egalitarian society, as well as the legislation of this topic. Young people receive a range of conflicting and confusing messages about sexuality and gender on a daily basis.

We believe that a thorough and high quality curriculum-based sexuality education programme can help all children and young people navigate these messages, and develop positive beliefs about themselves, about relationships and about their health as well as being a responsible citizen. Although most governments have some types of sexuality education programmes in place, such programmes are often weak or unevenly implemented.

Before the workshop, the trainer may remind the participants of rules of proper communication (since some part of classes may rise to discussions

based on personal opinions) – so-called 7'c of communication (be clear, be concise, concrete, correct, coherent, complete and educated).

Working method: debate, brainstorming, group work

Time frame: 1h30 minutes

Materials needed: a projector, columns, a computer, cardboard, markers

TASK 1: SEXUAL RIGHTS ARE HUMAN RIGHTS?

The goal of the exercise is to bring information about the international approach to basic human and sexual rights of people. It is an introductory type of exercise, just to encourage participants to participate in further conversations and discussions.

Trainer splits the group to 10 smaller ones; each of them will have to present one sexual right and explain to the rest the meaning of it.

After brainstorming, to sum the topic, the trainer can play the video (<https://youtu.be/mPwFRBXVgxl>) to sum up.

Good sources are able to find on:

www.iwhc.org; www.sexualrightsinitiative.com.

TASK 2: LEGISLATION IN MY COUNTRY

As we explained in other sections in our programme, sometimes young adults may be experiencing sexual risky behaviours. One of the consequences may

be an unwanted pregnancy. It's important to talk about it to prevent unsafe abortions among teenagers or young adults.

It's important to clarify that each one of us can have our own opinion about abortion and it is nothing wrong about differences among it. The goal is to raise awareness while it comes to consequences of unsafe procedures (often home-made or in unprofessional places, or from online resources), not to promote abortion or presenting it as a form of contraception!

Trainer divides the participants into smaller groups and each group researches how abortion works – it is legal? Or if yes, under what conditions? The groups, brainstorming, presents the conclusions using the cardboard and the markers.

Tips for trainers from Portugal:

www.apf.pt/aborto-e-interruptao-da-gravidez

www.apf.pt/etapas-no-processo-de-IVG

www.pgdlisboa.pt

TASK 3: ONCE I HAD A FRIEND, WHO...

The trainer presents a vídeo that tells the story of a girl who gets pregnant and then has an abortion. <https://youtu.be/wA2JYVxF48Q> and invites the participants to discuss their reflections after watching a video and discussing in group decision that has been made by the protagonist.

The trainer should moderate the discussion and put on a flipchart bullet points, ideas or views gathered from participants:

- ✓ how can you support a person in such a situation,
- ✓ where can you get help - e.g. psychologist support,
- ✓ what is the difference between a pregnancy in adolescents and adults in terms of the situation, economic, maturity, responsibility, life situation, etc.?
- ✓ how can this be avoided
- ✓ what a person experiences,
- ✓ Abortion issue:
 - National legal regulations
 - Psychological consequences of the procedure,
 - Physical consequences of the procedure,
 - Abortion is not a contraception method.

TASK 5: DEBATE

Trainer divides the group into two groups. One group will defend abortion and the other will criticise it. Each group has 15 minutes to prepare arguments and organize a court in the room afterwards in the form of a simulation.

The goal is to see the teenagers' arguments and create a discussion about abortion and human/sexual rights.

At the end of our workshop the framing of the legislation of our topic should be clear, we have to address what the sexual rights of each citizen are.

IMPORTANT

The purpose of the discussion is not to change your mind - just to present arguments from both sides and to make your own critical assessment.

The moderator plays a special role in the exercise and also controls the course of the discussion. It is important to pay particular attention to words, discussion style, attitudes of participants - to avoid assessing and harming someone's feelings.