

Assessment task: Safer sex quiz questions

Learning objective

Students research and develop quiz questions for young people about safer sex. The questions are combined to create a class quiz for students to complete.

Take Home Messages

- There can be physical and emotional risks to sexual activity
- There are ways to reduce risks by having "safer sex" which may include things like conversations, consent or contraception
- There is a lot of information online about sex and relationships. It's important to know what websites to get trusted information from.

Curriculum Links

[WA Curriculum](#)

Skills and strategies to manage situations where risk is encouraged by others e.g. pressure to engage in intimate relationships

[International technical guidance for sexuality education](#)

- The human body and development.
- Violence and staying safe.

Materials

- Student activity sheet: [Safer sex quiz questions student instructions](#) (display on board and/or 1 copy for each pair of students)
- Student activity sheet: [Safer sex quiz questions student assessment task](#) (1 copy for each pair of students - electronic or hardcopy)
- Teacher resource sheet: [Safer sex quiz questions marking key](#) (display on board and/or 1 copy per student)

Before You Get Started

- Prior to completing this assessment task, students require prior knowledge and understanding of safer sex practices including condom use to prevent STIs and pregnancy ([Safer sex - condoms](#))
- Allow two lessons for the completion of this assessment task.
- Review these websites before providing to students for research.

healthysexual.com.au (WA Department of Health)

getthefacts.health.wa.gov.au (WA Department of Health)

stoptherise.initiatives.qld.gov.au/blog/sexually-transmissible-infections-myths-vs-truths (Queensland Health)

headspace.org.au/young-people/understanding-sex-risks-health-and-contraception (headspace)

Learning Activities

Session 1: Creating quiz questions

45 minutes

1. Divide the class into pairs. Allocate each pair 'Pregnancy/Contraception' or 'STIs' as topics to research.
2. Explain to students:

"You have been given a topic of either 'Pregnancy/Contraception' or 'STIs'. With your partner, use the following websites to research and write five questions and answers that are suitable to ask your class to test their knowledge:

healthysexual.com.au

getthefacts.health.wa.gov.au

stoptherise.initiatives.qld.gov.au/blog/sexually-transmissible-infections-myths-vs-truths

headspace.org.au/young-people/understanding-sex-risks-health-and-contraception

With your partner, write:

- 1 true or false question
- 1 multiple choice question
- 1 definition question
- 1 short answer question
- 1 description question"

Teaching tip: Electronic surveys can be created on programs such as [SurveyMonkey](#) or [Mentimeter](#).

3. Display [Student activity sheet: Safer sex quiz questions student instructions](#) and/or provide students with a copy. Explain each of the questions types.
4. Display [Safer sex quiz questions student assessment task](#) and give each pair of students a copy.
5. Explain:

"When writing your answers:

- give detailed evidence to support each answer
- reference each answer with the website you used
- you must use a minimum of three of the websites listed
- complete the activity sheet including the critical analysis and reflection questions."

6. Display the [Safer sex quiz questions marking key](#) or provide a copy to each student. Discuss the mark allocations so that students are aware of what is required to be successful in this assessment task.
7. Allow time for students to complete the activity sheets and collect at the end of lesson.

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Learning Activities

Session 2: Class quiz

45 minutes

Prior to next session, choose 25 of the students' questions to compile a class quiz. The quiz can be asked orally with students writing answers, or as a written quiz on paper or electronically on programs such as [SurveyMonkey](#) or [Mentimeter](#).

Teaching tip: consider differentiation for students with lower literacy levels. Quiz questions may have picture prompts or the questions recorded to be read aloud. The quiz could be conducted in pairs or groups.

1. Conduct the class quiz as an assessment of the student's learning.
2. Provide the answers and explanations upon completion.

3-2-1 Reflection

Thought shapes

Triangle = The most important thing I have learnt is....

Square = What I have 'all squared away' in my head is... OR The thing I have really understood well is...

Star = What I enjoyed/What I was really good at...

Heart = How I feel about using the skills and ideas I have learnt is...OR The thing I enjoyed most is...

Circle = The thoughts still going around in my head are...

1. Display shapes and questions in classroom to refer to.
2. Students can volunteer to share one answer verbally.
3. A set of cards can be made and picked randomly (or given out selectively by the teacher).
4. Students write down their answers next to each of the shapes on paper or in a journal.

Health Promoting Schools

Background teacher note: [Health promoting schools framework](#).

Partnerships with school staff

- Invite the school nurse to your class to answer some of the question box questions. This serves two purposes - they may be able to answer some of the questions you are unsure of and helps to build a relationships between the students and the nurse.
- The school nurse may like to take small groups of students requiring additional or specialised care to run separate activities with on this topic.

Sexually transmissible infections (STIs)

Learning objective

Students investigate the risks, symptoms and methods of transmission of STIs and safer sex behaviours.

Take Home Messages

Remind students of the take home messages:

- STIs are very common, especially in young people.
- STIs are passed on through vaginal, oral and anal sex.
- Most STIs are passed on by sharing certain body fluids (semen, blood, vaginal fluid).
- Some STIs are passed on by genital skin-to-skin contact.
- Most STIs don't cause any symptoms, so many people don't realise they have one.
- The only way you can be sure you don't have an STI is to have an STI test.
- Left untreated, STIs can cause serious long term health issues.
- Safer sex is about protecting yourself and your partners from STIs (and unintended pregnancy).

Curriculum Links

[WA HPE Curriculum](#)

Sub-strand: Healthy and active communities

- Health information, support services, and media messaging about relationships, lifestyle choices, health decisions and behaviours.

Sub-strand: Interacting with others

- Influences on sexuality and sexual health behaviours, including the impact decisions and actions have on own and other's health and wellbeing

[International technical guidelines on sexuality education](#)

Key concept 7.2 Sexual behaviour and sexual response

- Engaging in sexual behaviours should feel pleasurable and comes with associated responsibilities for one's health and well-being
- Sexual decision-making requires prior consideration of risk-reduction strategies to prevent unintended pregnancy and STIs, including HIV.

Materials

- 1 x piece of paper divided into 4 for each student. Write a small 'g' on the back corner of around 3 or 4 pieces. (Small pieces of paper that have been used on one side works well for this to disguise the 'g' on the back) Butcher's paper and markers. 7 pieces made up with the following questions/statements: STIs are passed on by?; How do I know if I have an STI?; How are STIs treated?; What can happen if STIs are left untreated?; How can I reduce my risk of getting an STI?; How/where do I get an STI test?; Other interesting information. Consider whether to place these up before the lesson starts or before the activity.
- Electronic or printed copies of [SHQ's STI brochure](#) - 1 per student.
- Access to [Get the Facts](#) website.

Before You Get Started

- [Protective interrupting](#) - Teachers need to know and understand how to use this technique to

prevent students from potentially disclosing sensitive information or abuse in front of other students.

- [Dealing with disclosures](#) - Teachers must be aware of the school and legal procedures if a student discloses personal issues, particularly disclosures of sexual abuse.
- [Question box](#) - Have a question box available in every lesson to allow students the opportunity to ask questions that may be too embarrassing or unsafe for them to ask openly in class. See [Setting up the question box](#) for further information. For ways to answer some of the curly questions, see [Scripted answers to FAQs](#).
- Trauma informed teaching - Be aware of the possibility that student may have experiences of STIs, sexual violence or unintended pregnancy and content of this lesson may be triggering. Consider the timing of this lesson, liaise with school health team in case additional support is required.
- Consider your own thoughts, feelings, attitudes and values on this topic and be aware of how they may influence the way you present this activity. Be aware of your own self-care and support networks.
- Refer to the Background teacher notes: [STIs/BBVs](#), [Respectful relationships](#) and [Safer sex and contraception](#).

Learning Activities

Group agreement

5 minutes

Teaching tip: A group agreement must be established before any RSE program begins to ensure a safe learning environment. Read: [Essential tools: Establishing a group agreement](#) for tips on how to create one and what to include.

1. Revise or create the class [group agreement](#).

For this lesson, it is important that students remember the agreement around confidentiality and de-identifying information if sharing a story.

Learning Activities

Introduction: 4 squares (STI transmission exercise)15 minutes

2. Do not explain to students the purpose of this exercise. Present the task as an energiser or 'getting to know you'.
3. Hand out the pre-prepared pieces of paper which were divided into 4 squares. Don't tell students that some pieces have 'g' written on the back to indicate use of glove.
4. Explain that students they will need to move around the room and find someone in the class who they have something in common with, based on the statements you say. When they find someone, they must sign their name in one of their partner's squares. You cannot have the same person twice. At the end of the activity, they will have four different names on their piece of paper - one in each section, each related to a different statement.
5. Say four statements. Some ideas include:
 1. find someone in the room who plays the same sport as you.
 2. likes/hates the same food as you.
 3. likes the same Netflix series as you.
 4. has a letter in their name the same as you.
 5. has the same colour socks on as you.

6. has the same favourite colour.
7. has the same number of letters in their name.
8. street address ends in the same number.
9. has the same shoe size.
10. has the same star sign.
6. Continue asking students questions until everyone has 4 people's signatures on their paper. Remind students that they can't have the same person's name signed twice on their paper.
7. Ask everyone to take their seats.

8. Say

"This activity is actually to show how easily infections can spread. This infection is spread by touching or signing your name on a piece of paper who someone else with the infection has signed or touched. It is a 'Signature Transmissible Infection'. Does anyone want to volunteer to pretend to have that infection for the activity?"

Teaching tip: If you have an additional staff member in the room, you can ask them before the lesson to volunteer. This ensures someone makes an effort to go around the room to speak to different groups.

9. Say: "[Volunteer's name] has been to O-Day at Uni. They signed their name lots that day and a few weeks later saw an advert from the WA Department of Health that said the only way to know for sure if you have the 'Signature Transmissible Infection' is to have a test. So, they go to see their GP to a 'Signature Transmissible Infection' test and a few days later their GP calls and tells them it is positive."

Teaching tip: Use this as positive reinforcement for this young person being responsible for their health and going to get tested for an infection. Getting tested and having check-ups is part of our general wellbeing and important part of keeping us healthy.

10. Say: "Part of following up a positive 'Signature Transmissible Infection' is taking treatment, which is usually antibiotics, and contacting people who you may be at risk - so anyone whose paper you signed or vice-versa is at risk. So, if you have [Volunteer's name] signed on your piece of paper, please stand up. You are all at risk of having the 'Signature Transmissible Infection'."
11. Ask: The students who just stood - how do you feel about being told you might have 'Signature Transmissible Infection'? (Worried, angry, upset, not bothered, ambivalent, anxious)

Teaching tip: Some students may blame the volunteer, as they perceive that the volunteer had 'Signature Transmissible Infection' first. Use this as a teaching point and ask "How do we know that [Volunteer's name] had it first? They were the only one to get tested for it and told you all that you are at risk so now you can do things to look after yourself and get treated."

12. Now ask the students sitting to stand if they have the names of any of the people standing on their paper. And so on. Very quickly, most/all of the class will be standing.
13. Say: "Turn your piece of paper over. If you have a 'g' written in the corner, you wore a glove when you signed your name. You are not at risk of the 'Signature Transmissible Infection'. You can sit down."
14. Ask: Students sitting down because they wore a glove - how do you feel? (Relieved, proud of myself for being safe, not bothered, etc) What do you think the 'Signature Transmissible Infection' represents? (Sexually transmissible infection, STI)

Teaching tip: Explain that we don't use the term 'STD' (i.e. disease) anymore as not all infections cause disease, especially if treated early.

What does the glove represent?(Condom or dental dam)

Learning Activities

Thumbs up/thumbs down quiz10 minutes

15. Have students respond to the following statements using a [thumbs up, thumbs down](#) voting strategy and discuss their voting with someone close by. Clarify misconceptions as they appear. Stress that some of the statements are about their opinions while others have a correct and incorrect answer. STIs are only passed on through vaginal and anal sex. (False: some STIs can be passed on by oral sex and genital skin-to-skin contact.) I would know if I had an STI because it would be painful or I would be able to see something. (False: most people don't experience any symptoms from STIs or the symptoms can be so mild they don't notice) You don't need to wear a condom with someone who has only had sex with a couple of people. (False: Anyone who has ever had vaginal, oral or anal sex can be at risk of an STI. Condoms are also an effective form of contraception) STIs aren't very common, I'm not really at risk of getting one. (False: STIs are very common, especially in young people 15-29 years. About 1 in 3 people will get an STI in their lifetime.) All STIs can be cured. (False. All STIs can be treated and managed. Some STIs can be cured (e.g., chlamydia, syphilis, gonorrhoea), usually through antibiotics. Those that cannot be cured (e.g., HIV, herpes) can be managed to reduce the symptoms and/or significantly reduce the likelihood of transmission. People can be reinfected which means that can get an STIs again after it has been cured.) There are vaccines available for some STIs. (True. There is a vaccine for HPV - the virus that causes genital warts and cervical cancer, and a vaccine for hepatitis B. There are no vaccines for other STIs like HIV, chlamydia, gonorrhoea or syphilis.)

Learning Activities

Graffiti walk15 minutes

16. Students go around the room and use [SHQ's STI brochure](#) and/or [Get the facts](#) to add information to the pre-prepared butcher's paper around the room that say:
17. Either ask a student to read the information off of one butcher's paper or paraphrase the key information on each. Ensure to correct any incorrect information present.

3-2-1 Reflection

Reflection

18. Ask students what is one thing they learnt today. You can get them to share with the whole room, groups or pairs.

Question box

19. Provide students with time to write a question/s to put in the question box.

Teaching tip: If the question box is already set up, you may like to choose some questions related to the lesson to answer. You can answer the new questions at the end of the lesson or save them for the start of the next lesson. Remind students of the '[Ask a question feature](#)' on [Get the Facts](#) and the [free STI testing](#).

Health Promoting Schools

Background teacher note: [Health promoting schools framework](#)

Partnerships

Partnerships with external agencies

- SHQ does [group visits](#) for classes - this provides students an opportunity to see what a sexual health service looks like, see find out about what is involved with an STI test, ask a nurse and/or educator sexual health questions.

Partnerships with parents

- Run a parent workshop prior to delivering RSE lessons so that parents can see the resources used, ask questions and find out how to support the school program by continuing conversations at home.
- Add the [Get the Facts](#), and [Talk Soon. Talk Often](#) links to your website/e-news for parents.

Partnerships with school staff

- Invite the school nurse to a class or an assembly to introduce them to the students and let them know what their roles are and how they can help the students.

Education

- Collaborate with the Science teachers to look at how different infections are transmitted, treated and their impact on the body.
- Collaborate with the Humanities and Social Sciences teachers to look at the history and impact of STIs on different communities at different times.
- Collaborate with Science or Math teachers to review and investigate the number of notifications of STIs in WA on the WA Notifiable Infection Disease Dashboard.

Safer sex - condoms

Learning objective

Students use the Laugh and learn video to initiate discussions around safer sex. They develop an understanding of the term 'safer sex' and the importance of using condoms to prevent STIs and pregnancies by brainstorming the reasons why people choose or choose not to use condoms and listing life skills and strategies needed for condom negotiation and use.

Take Home Messages

- 'Safer sex' means using a condom to prevent STIs and unintended pregnancies.
- Being able communicate with your partner about using condoms is part of a respectful sexual relationship.
- To encourage better (and more) use of condoms we need:
- knowledge about how and why to use condoms
- positive attitudes and values towards using condoms
- life skills, including being able to communicate with a partner about having safer sex.

Curriculum Links

[WA HPE Curriculum](#)

Personal identity and change

- Impact of societal and cultural influences on personal identities and health behaviour.

Staying safe

- Skills and strategies to manage situations where risk is encouraged by others.

Interacting with others

- Skills and strategies to promote respectful relationships.
- Influences on sexuality and sexual health behaviours, including the impact decisions and actions have on own and others' health and wellbeing.

[International technical guidelines on sexuality education](#)

Key concept 7.2 Sexual behaviour and sexual response

- Sexual decision-making requires prior consideration of risk-reduction strategies to prevent unintended pregnancy and STIs, including HIV.

Key concept 8.3 Understanding, recognising and reducing the risk of STIs, including HIV.

- Communication, negotiation and refusal skills can help young people to counter unwanted sexual pressure or reinforce the intent to practise safer sex (i.e. consistently using condoms and contraception).

Materials

- [Laugh and learn video - condoms](#) (2min 23sec)
- [Attitudes and values teacher answer sheet](#) (1 for teacher)
- [Life skills student activity sheet](#) (1 per pair) - electronic or hard copy
- [Life skills teacher answer sheet](#) (1 for teacher)

Before You Get Started

- [Protective interrupting](#) - Teachers need to know and understand how to use this technique to prevent students from potentially disclosing sensitive information or abuse in front of other students.
- [Dealing with disclosures](#) - Teachers must be aware of the school and legal procedures if a student discloses personal issues, particularly disclosures of sexual abuse.
- [Exploring my own values](#) - Consider your own thoughts, feelings, attitudes and values on this topic and be aware of how they may influence the way you present this activity.
- [Question box](#) - Have a question box available in every lesson to allow students the opportunity to ask questions that may be too embarrassing or unsafe for them to ask openly in class. See [Setting up the question box](#) for further information. For ways to answer some of the curly questions, see [Scripted answers to FAQs](#).
- Preview the [Laugh and learn - condoms](#) (2min 23sec) video to determine suitability for your students.
- Before facilitating this lesson ensure you are familiar with the laws about sexual consent in WA.

For essential information about consent, safer sex and taking selfies go to:

- [Youth Law Australia - Consent](#) (external site)
- [Get the Facts - Sex and the law](#)

Learning Activities

Group agreement

10 minutes

Teaching tip: A group agreement must be established before any RSE program begins to ensure a safe learning environment. Read [Essential tools: Establishing a group agreement](#) for tips on how to create one and what to include.

1. Revise or create the class [group agreement](#).
2. Remind students that throughout the lesson they can write any questions down and add them to the question box at the end of the lesson (if they do not wish to ask them during the lesson).
See [Essential information - Setting up a question box](#).

3. Say:

"This lesson covers topics that can sometimes be difficult for people. If you feel uncomfortable, you may like to take a break from the room.

Before we start, let's check that everyone knows where to go for help if you want to check anything that this lesson raises for you."

4. Ask:

Who are some trusted adults you can talk to?

(Possible answers: parents, grandparents, teacher, older siblings, doctor, other family members, etc)

Teaching tip: It is important not to tell students who their trusted adults are or should be. You can offer a list of suggestions of who they might be. For some students, some of the people you suggest, may not be people that are safe for them to talk to. Students should not be made to share their list of trusted adults publicly unless they wish to do so.

Who are some people at this school that you can talk to?

(Possible answers: class teacher, other teachers, school psychologist, community health nurse, youth workers, etc)

What services and online support is available?

(Possible answers: [Sexual Assault Resource Centre \(SARC\)](#), [Kidshelpline](#), [Headspace](#), GPs, [Sexual Health Quarters](#), [Beyond Blue](#), [Lifeline](#), [1800 Respect](#))

Introduction

5 minutes

3. Using the [One minute challenge](#) teaching strategy students complete this sentence, "To me, safe sex is.....".

4. Share in small groups.
5. Ask for volunteers to share with the class. (Some of the answers may be humorous and that's ok!)
6. Say:

"What we will be covering in this session may not be new to many of you. But I am sure that you will all find at least one new and different piece of information – if not more! Everyone needs reminders at different times about keeping ourselves and others safer."

7. Explain:

"The terms 'safe' and 'safer' are often used interchangeably. In this video the term 'safe' is used however the more accurate term is 'safer' as no sexual activity is 100% safe. Safer sex means protecting the health of both ourselves and others. This means preventing sexually transmitted infections (STIs) and unintended pregnancy."

For more detailed explanation see [What is safer sex?](#) (external link) and [Get the Facts - Safer sex](#).

Laugh and learn video - condoms

10 minutes

8. Watch [Laugh and learn video - condoms](#) (2min 23sec).
9. Ask:

Why do you think humour is used in this video?

(e.g. negotiating condom use can be difficult and embarrassing; lots of people have negative thoughts and myths about condoms; sex can be embarrassing and people use humour to cope with their embarrassment and/or lack of knowledge)

Does it help get information across? How?

What is the main message/information you got from this video?

Seriously, what is 'safer sex'?

(Using a condom (internal or external condom) to reduce the risk of STIs and pregnancy. Remember, safer sex really starts right at the beginning – talking to your partner and being sure that you both want to have sex and are ready.)

Say:

"Did you know: Some STIs can be passed on through oral sex. External condoms (sometimes referred to as male condoms) can reduce the risk of STI transmission during oral sex. [Dental dams](#) (external link) can also be used. This is a piece of latex (or polyurethane) that can be used between the mouth and vagina or mouth and anus during oral sex.

[Internal condoms](#) (sometimes referred to as female condoms) are another contraceptive that prevents both STIs and unintended pregnancy."

Survey statistics

10 minutes

10. Say:

"Some of you may have already had some sessions in the past about condoms. Today we are going to revise that and also look at some other issues associated with condom use and safer sex."

11. Ask:

In 2021, what percentage of Australian Year 10 – 12 students knew that condoms prevent STIs and pregnant? Take some answers.

(89%)

What percentage reported that using condoms makes sex less stressful? Take some answers.

(77%)

So, with those stats in mind, what percentage of young people who have had sex reported always using condoms?

(38% - 34% reported sometimes or often using condoms, and 28% reported rarely or never using condoms)

What do you think are some of the reasons why young people did not use condoms?

(Too embarrassed; condom not readily available when required; using a different contraceptive method; partner didn't want to use; didn't think about it; didn't think they would have sex at that moment; not prepared; I don't like them; my partner doesn't like them; I trust my partner; we've both been tested; I know my partner's sexual history; it's not my responsibility; we both haven't had any sexual activity with anyone else before.)"

(Reference: [The 7th National Survey of Secondary Students and Sexual Health, 2021](#))

Attitudes and values

10 minutes

12. Say:

"It's important to understand that knowledge alone isn't always enough for people to make the safest choices. They need to believe that the behaviour is really important and they need to value the outcome – whether that is not getting an STI or having an unplanned pregnancy.

And then people need specific skills to be able to put into practice their knowledge and attitudes and values.

So, Knowledge + Attitudes/Values + Skills (might) = Healthier/safer behaviour."

13. Say:

"Let's think about using a condom.

We already know that you have lots of knowledge about how to use condoms and why they should be used.

Let's look at attitudes and values.

Working in pairs make a list of attitudes and values, beliefs, feelings and opinions that might underlie why some people (especially young people) may choose to use or not use condoms."

Show students the headings and provide an example.

People value _____ so might use condoms	People value _____ so might NOT use condoms
not getting an STI	family (e.g. they may want to have a baby)

Teaching tip: It is important to consider diversity of sexual identity and sexual behaviours when discussing sexual health topics like condom use. Some people may have sexual experiences with people of the same sex and not identify as lesbian, gay or bisexual.

14. Discuss answers as a whole group. See [Values and attitudes teacher answer sheet](#) for possible answers. Point out that different people have different values and individuals have values that may change depending on their stage of life.

Teaching tip: It is important to unpack responses around valuing reputation and relationship as reasons to choose not use condoms. Lead discussion about the importance of respectful relationships and gender expectations (refer to background note [Respectful Relationships](#)). Example questions include:

- Are the expectations around buying condoms the same for everyone? (Typically it is an expectation for men and less expected for women)
- Are the potential reputation impacts of carrying condoms the same for everyone? (Typically the seen as a positive for men ('stud') and negative for women ('slut') in line with gendered expectations about sex and relationships)
- What are important features of respectful relationships? Are these present when a partner is feeling pressured to not use condoms? (Feeling safe. trust, honesty. being valued and cared for, being able to disagree and say no without fear of being unsafe or hurt. No, pressure to not use condoms is not respectful

Life skills

10 minutes

15. Say:

"Just because people have knowledge about the correct way to use a condom, and they think that it is important to use condoms, people still need a variety of skills in order to use condoms properly, consistently and respectfully."

16. Display [Life skills Student activity sheet](#) or provide as a handout for students to complete (1 per pair).
17. Working in pairs, ask students to suggest examples of the life skills being practised when negotiating condom use and using condoms. See [Life skills - answers sheet](#) for possible answers.
18. Ask for volunteers to give their examples.

3-2-1 Reflection

19. Ask:

Do you think it is important to speak to your partner about condom use before sex?

(Yes)

But when is a good time?

Say:

"The sooner the better. This is easier to do with a long-term partner as you probably feel more comfortable to speak to them and maybe have been building up conversations about feeling ready to have sex. It might be trickier with someone you just met say at a party. But it is still important to talk about condoms, along with always checking in with consent for sexual activities and contraception too.

20. Remind students that [Get the Facts](#) has a completely confidential 'ask a question' service that they may wish to use. All questions are answered by a qualified health professional within a week.

Health Promoting Schools

Background teacher note: [Health promoting schools framework](#).

Partnerships

Partnerships with parents

- [Talk soon. Talk often: a guide for parents talking to their kids about sex](#) is a free resource that can be bulk ordered by schools. Send a copy home to parents prior to starting your RSE program. The booklet offers age and stage appropriate information so that parents can reinforce the topics covered in class. ([How to order hardcopies](#).)
- Run a parent workshop prior to delivering RSE lessons so that parents can see the resources used, ask questions and find out how to support the school program by continuing conversations at home.
- Add the [Get the Facts](#) and [SECCA app](#) links to your website/e-news for parents.

Partnerships with school staff

- Invite the school health professionals and pastoral care staff (school nurse, school psychologist, chaplain, boarding house master, etc) to a class or an assembly to introduce them to the students and let them know what their roles are and how they can help the students. For example:
 - If you have concerns about relationships, you can go to...
 - If you have more questions about sexual health, you can go to...

Blood-borne virus safety

Learning objective

Students complete a true/false pre-quiz on blood-borne viruses (BBVs). The Laugh and learn video and websites (provided) are used to research how BBVs can be transmitted and prevented. Findings are

reported via a choice of radio advert/social media post/whole class display

Take Home Messages

- BBVs are transmitted from person to person through blood-to-blood contact.
- Some BBVs such as HIV and hepatitis B can also be sexually transmitted.
- BBVs often don't have symptoms for many years which means many people don't realise they have a BBV.
- If left untreated, BBVs can cause serious long term health problems
- BBVs are easily preventable by; using a condom when having sex; not sharing needles; getting piercing/tattoos from reputable places that use safe blood practices. Hepatitis B is preventable by vaccination.
- BBVs can be treated and managed, and some can be cured. People living with BBVs can live long and healthy lives.

Curriculum Links

[WA HPE Curriculum](#)

Sub-strand: Staying safe

- Analysis of health information and content related to:
 - alcohol, drugs and other harmful substances
 - body image
 - processed food
 - road safety
 - relationships

Sub-strand: Healthy and active communities

- Health information, support services and media messaging about relationships, lifestyle choices, health decisions and behaviours.
- Health promotion designed to raise awareness, influence attitudes, promote healthy behaviours and increase connection to the community.

[International technical guidelines on sexuality education](#)

Key concept 8.2 HIV and AIDS stigma, treatment, care and support

- With the right care, respect and support, people living with HIV can lead fully productive lives across the lifespan.

Materials

- Teacher resource: [BBVs safety quiz questions and answers](#) (1 copy for teacher)
- Scrap paper for T/F quiz answers
- [Laugh and learn - BBV safety video](#) (1min 46sec)
- Teacher resource: [BBV safety example of display](#).
- Preferred media to record and display research

Before You Get Started

- [Protective interrupting](#) - Teachers need to know and understand how to use this technique to prevent students from potentially disclosing sensitive information or abuse in front of other

students.

- [Dealing with disclosures](#) - Teachers must be aware of the school and legal procedures if a student discloses personal issues, particularly disclosures of sexual abuse.
- [Exploring my own values](#) - Consider your own thoughts, feelings, attitudes and values on this topic and be aware of how they may influence the way you present this activity.
- [Question box](#) - Have a question box available in every lesson to allow students the opportunity to ask questions that may be too embarrassing or unsafe for them to ask openly in class. See [Setting up the question box](#) for further information. For ways to answer some of the curly questions, see [Scripted answers for FAQs](#).
- Preview [Laugh and learn - BBV safety video](#) (1min 46sec) to determine suitability for your students.
- Background teacher notes/guides provide content knowledge for teachers prior to lesson delivery: [STIs and BBVs](#); [Body art: tattoos and piercings](#); [BBV related risks: Needles and syringes](#); [Human Immunodeficiency Virus \(HIV\)](#).
- Other background reading: [Needle and syringe programs](#); [Ins and outs of sexual health](#).

Learning Activities

Group agreement 5 min

Teaching tip: A group agreement must be established before any Relationships and Sexuality Education (RSE) program begins to ensure a safe learning environment. Read [Essential Tool: Establishing a group agreement](#) for tips on how to create one and what to include.

1. Revise or create the class [group agreement](#).
2. Trigger warning - Say:

"This lesson covers topics that can sometimes be difficult for people. If you feel uncomfortable, you may like to take a break from the room."

Introduction - true or false quiz 15 minutes

1. Ask students: what do you think the acronym BBV stands for? Take answers (some answers may be humorous and that's ok)
2. Say:

"BBV stands for blood-borne virus. BBVs are transmitted from person to person through blood-to-blood contact, for example HIV and hepatitis C. We're going to start with a true or false quiz to see what you already know about BBVs. By the end of the lesson, you will have the information to answer all the questions correctly, but for now the quiz is purely for you to assess your own pre-existing knowledge."

3. Ask students write 1-10 on a piece of scrap paper. Tell students that they do not have to reveal their answers or put their names on the sheet, and that they can throw the sheet in the bin when complete. The quiz is for their own learning and reflection.
4. Ask students each of the 10 True or False questions in [Teacher resource: Blood-borne virus quiz and answer sheet](#). As each question is asked, wait for students to write T or F and then give the answer only as True or False explaining that students will find out the reasons for the answers by the end of the lesson.

Laugh and learn video - blood-borne virus safety 15 minutes

5. Watch the [Laugh and learn video - blood-borne virus safety](#) (1min 46sec).
6. Ask:

Why do you think humour is used? What do you think of the use of humour?

(e.g. lots of people have negative thoughts and myths about BBVs; break the ice/tension of a serious topic; issues like BBVs can be sensitive and embarrassing, and people use humour to cope with their embarrassment and/or lack of knowledge)

Does it help get information across? How?

What is the message/information you got from this video?

(e.g. BBVs can be transmitted through tattoos, piercings, needles and unprotected sex; some BBVs can also be sexually transmitted; chlamydia is not a BBV; to prevent BBVs, avoid blood to blood contact)

7. Provide access to the [Blood Aware animation](#) for the whole class. This click through animation should take approximately 2-3 minutes to read.

8. Ask:

What new piece of information did you learn from that animation?

(e.g. Blood cannot enter the body through the skin; blood can carry viruses such as HIV and hep C; blood can only enter the body through a break in the skin or lining of the mouth, vagina, penis or anus; once inside the break in the skin, it can mix with the blood and may result in the transfer of a virus; the ways that you can come into contact with someone else's blood include: unsafe injecting drug use, unsterile tattooing equipment, not using condoms when having sex, sharing razors and toothbrushes, needlestick injury, unsterile body piercing; blood particles can be too small to see without magnification (so you may not see the blood)).

9. Explain:

Virus present + body fluid (e.g. blood) + activity (e.g. unsterile body piercing) + point of entry (e.g. broken skin) = risk

"Blood can also carry the hep B virus. Some BBVs (HIV and hep B) are also transmitted through other body fluids (semen and vaginal fluids) which is also why condoms need to be used. People can come into contact with someone else's blood in other ways such as sporting injuries which is why it is important to let an adult know if someone is bleeding, following the sports blood rule and appropriate first aid procedures."

Group research 15 minutes

10. Divide the class into groups of 4. Each group will need access to the website getthefacts.health.wa.gov.au/bloodsafe as a reliable source of information for the activity.

11. Ask:

Why do you think you have been given this website and not asked to search for your own information?

(Anyone can write anything online and when looking for health information it is important to check who is writing material and that it comes from a reliable and credible source and is up to date and relevant to Western Australia (as laws, services, etc can differ from state to state and country to country). The Get the Facts website is written by WA Department of Health and aims to provide accurate and reliable information on sexual health, blood-borne viruses and relationships for young people in Western Australia. Its specific target group is 13-17 year old people. It is regularly updated to maintain current

information.)

12. Give each group 10 minutes to research answers to one of the following questions on the Get the Facts website.
13. Ask each group to write what they think are the 5 most important pieces of information that all people should know about their topic.

- What are BBVs - hep B?
- What are BBVs - hep C?
- What are BBVs - HIV/AIDS?
- How can BBVs be spread? Unprotected sex
- How can BBVs be spread? Body piercings
- How can BBVs be spread? Body tattoos
- How can BBVs be spread? Injecting drug use
- How can BBVs be prevented?

14. Have each group report their findings to the whole class.

Teaching tip: Allow students to ask student presenters questions of the information presented to clarify points.

Suggestions for class reporting

- Complete student activity sheet to be combined into a display about being Blood Aware (See example Teacher resource: [BBV safety example of display](#)).
- Create 20-30 second radio adverts they can record and play back to class. This must get the 5 clear messages across and appeal to a target audience (e.g. young people).

3-2-1 Reflection

15. [3-2-1 Reflect](#) - ask students to individually complete the following (on the board/on a sheet/verbally).

- 3 things I learnt
- 2 things I found interesting
- 1 question I have

16. Ask students to share information with a partner or in a small group.
17. Ask for volunteers of pairs or small groups to share their questions or add the questions to the question box. (For tips on how to set up a question box see [Essential information: Question box](#)).
18. Ask:

Thinking about your score on the quiz at the beginning of the lesson, do you think your score would change if you took the quiz now? Why?

Health Promoting Schools

Health Promoting Schools

Background teacher note: [Health promoting schools framework](#).

Partnerships

Partnerships with school staff

- Invite the school nurse to your class to answer some of the question box questions. This serves two purposes - they may be able to answer some of the questions you are unsure of and helps to build a relationship between the students and the nurse.

Partnerships with agencies

- Someone from [WAAC](#) or [HepatitisWA](#) can come and deliver an education regarding HIV and hepatitis, respectively.

Environment

- School culture does not stigmatise people living with BBVs.

Health campaigns - sexual health

Learning objective

Students explore the purpose of health campaigns and identify the components of a successful campaign. In groups, they develop their own campaign with a sexual health theme.

Take Home Messages

- Health literacy is having the knowledge to find, understand and use information about our own health and health care.
- Understanding health information helps us to make healthier and safer decisions.
- It's important to get health information from credible sources such as health websites.

Curriculum Links

[WA Curriculum](#)

[ACPPS095](#): Critically analyse and apply health information from a range of sources to health decisions and situations

[ACPPS096](#): Plan, implement and critique strategies to enhance health, safety and wellbeing of their communities

[International technical guidance on sexuality education](#)

- Skills for health and wellbeing

Materials

- Student Activity Sheet: [KWL – Health campaigns](#) [one per student]
- Student Activity Sheet: [Health campaign case studies](#) [one per pair]
- Teaching Resource: [Health campaign topics PowerPoint slides](#) [one per student/group]
- Student Activity Sheet: [Health campaign plan](#) [one per student/group]
- Student Activity Sheet: [Campaign evaluation](#) [one per student/group]

Before You Get Started

- This is a recommended 4-6 week unit of work. Students will require access to the internet. Prior to starting the unit, check websites and associated campaigns are accessible on school networks.
- Teachers need to understand the concept of health promotion to facilitate the delivery of this learning activity.

The World Health Organization defines health promotion as

“...the process of enabling people to increase control over, and to improve, their health”.¹

Health promotion interventions include policy development; legislation and regulation; re-orienting health services; community development; creating healthy environments; and raising public awareness and engagement through health campaigns. This learning activity focuses on the impact of health campaigns on changing health behaviours through the use of mass media, social media and/or community events.

¹ [World Health Organization](#). Retrieved 16/07/2024

Learning Activities

Exploring health campaigns 20 minutes

Students explore their understanding of health campaigns and determine what they need to know in order to develop a health campaign of their own.

1. Give each student a copy of the Student Activity Sheet: KWL – Health campaigns. Allow 5 minutes for each student to complete the ‘What I know’ about health campaigns section individually. Discuss student answers as a class.
2. Explain to the class what a health campaign is:

A health campaign aims to raise awareness and understanding of a health issue, and often aims to change people’s health behaviours. This can be done in a number of ways including mass media, social media and community events.

3. Allow 2 minutes for each student to complete the ‘What I want to know’ section of the KWL chart. Discuss student answers as a class.

Note: Students will complete the ‘What I have learnt’ section at the end of this unit of work so should be encouraged to keep in a place easy to find later.

Campaign case studies 25 minutes

Access to a computer lab and internet will be required for this activity as students will investigate case studies of local and national health campaigns. They will then develop a health campaign of their own on one of five sexual health and/or relationships topics: Growing Bodies; Respectful Relationships; Staying Safe; Emotional Wellbeing and/or Diversity.

1. Students form a pair or group of three. Provide each pair/group with one of the case studies from the Student Activity Sheet: Health campaign case studies.
 - Ask the students to visit the campaign website and familiarise themselves with the campaign. They then complete the activity sheet by identifying the target group; the positives, negatives and issues of the campaign; and if the campaign worked.
 - All students who worked on the same campaign are then joined together in a larger group to discuss their results. Each group then nominates a spokesperson to present their findings to the class.
2. Explain to students that they will be developing their own health campaign on a sexual health and/or relationship topic of their choice. This can be done individually, in pairs, or in small groups.
 - Display the Teaching Resource: Health campaign topics PowerPoint slides. Discuss ideas for health campaigns that can be developed for each of the topic areas. Explain that students will need to decide on a topic area and then a subject for their health campaign.
 - Distribute the Student Activity Sheet: Health campaign plan to each student or group. Explain each section of the activity sheet.
 - Each student/group has 4-6 weeks to research and develop their health campaign.

3-2-1 Reflection

1. Students present their health campaign to the class or to others (e.g. peers, parents, school or other community members).
 - Seek feedback from the audience as to how effective they thought your campaign was using a Rating Scale: use Student Activity Sheet: Campaign evaluation (students may decide to design and use their own format to seek feedback).
2. Students complete the 'What I have learnt' section of their KWL chart to describe what they have learnt from this activity.

External related resources

[The practical guide to love, sex and relationships](#)

A teaching resource from the Australian Research Centre in Sex, Health and Society, La Trobe University.

[Topic 8: Authenticating online information](#)

Accessing and evaluating information on sexual health and relationships online.

Consent: Communication and safety in sexual situations

Learning objective

Students explore legal, physical, social and emotional safety, and respectful relationships using a placemat strategy and the Laugh and learn video as a stimulus.

Explores the importance of communicating with a partner about readiness for sex, consent and

Take Home Messages

- Communicating with your partner about readiness for sex, consent, STI prevention and contraception before sexual activity is essential.
- Keeping yourself and your partner safe in sexual situations means thinking about all aspects of safety and wellbeing including physical, emotional, social and legal.
- It is important for partners to communicate about their expectations before sexual activity.

Curriculum Links

[WA Curriculum](#)

[ACPPS093](#): Skills and strategies to promote respectful relationships

[International technical guidance on sexuality education](#)

- Violence and staying safe
- Skills for health and wellbeing

Materials

- [Laugh and learn video - keeping safe](#) (2min 8sec) (external link)
- Student activity sheet: [Placemat activity sheet keeping safe with sexual activity](#) (1 per group of 4 students enlarged to A3 size)
- Teacher resource: Placemat [activity answer sheet](#) (1 for teacher)

- Optional: [Take home activity reliable RSE websites](#)

Before You Get Started

- It is beneficial to complete to following lessons prior to this lesson, or ensure students have the appropriate knowledge:
 - [Sexual consent and the law](#)
 - [Safer sex - condoms](#)
 - [Sexting: To send or not to send](#)
- [Protective interrupting](#) - Teachers need to know and understand how to use this technique to prevent students from potentially disclosing sensitive information or abuse in front of other students.
- [Managing disclosures](#) - Teachers must be aware of the school and legal procedures if a student discloses personal issues, particularly disclosures of sexual abuse.
- [Exploring my own values](#) - Consider your own thoughts, feelings, attitudes and values on this topic and be aware of how they may influence the way you present this activity. Be aware of your own self-care and support networks
- [Question box](#) - Have a question box available in every lesson to allow students the opportunity to ask questions that may be too embarrassing or unsafe for them to ask openly in class.

See [Setting up the question box](#) for further information. For ways to answer some of the curly questions, see [Scripted answers to FAQs](#).

- Preview [Laugh and learn - keeping safe](#) (2min 8sec)
- Background teacher notes/guides provide content knowledge for teachers prior to lesson delivery: [Respectful relationships](#); [Safer sex and contraception](#); [Sex and alcohol and other drugs](#); [Sex and the law](#); [Discrimination](#)
- Visit these external sites for further essential information on consent, safer sex and taking selfies:
 - [Sex and the Law | Get the Facts](#) (external link)
 - [Sex & Dating | Legal Support in Western Australia | Youth Law Australia](#) (external link)
 - [King Edward Memorial Hospital - Sexual Assault Resource Centre \(SARC\)](#) (external link)

Learning Activities

Group agreement 5 min

Teaching tip: A group agreement must be established before any Relationships and Sexuality Education (RSE) program begins to ensure a safe learning environment. Read [Essential Tool: Establishing a group agreement](#) for tips on how to create one and what to include.

1. Revise or create the class [group agreement](#).

Laugh and learn video - safer sex 30 minutes

1. Say:

"In this video there are some words and phrases that need some thinking about and discussing before we get to see the video."

6. Divide the class into groups to discuss the following questions. Ask for responses from each group.

What do you think 'ramification' means? Use a dictionary if you don't know.

(Consequence, result, aftermath, outcome, effect.)

Thinking about the topic of 'staying safe in a sexual situation' - what do you think would be covered in a 'proper talk'?

(e.g., Communicating about individual wants; consent; STI and pregnancy prevention.)

What do you understand 'safe sex' measures to be?

(Using a condom to prevent STIs and/or pregnancy and using a contraceptive method to prevent pregnancy.)

7. Explain:

"The term 'safe sex' and 'safer sex' are often used interchangeably. In this video the term 'safe sex' is used, however, the more accurate term is 'safer sex' as no sexual activity is 100% safe."

For a more detailed explanation see [Safer sex](#) (external link) and [What is safer sex?](#) (external link).

9. Watch [Laugh and learn - keeping safe](#) (2min 8sec)

10. Ask:

What do you think of the use of humour in this video?

Does it help get information across? How?

What is the message/information you got from this video?

(e.g. it is important to talk about safer sex beforehand; both partners need to be ready; the age of consent in WA is 16; partners should be aware of what each other want; consent is vital)

11. Say:

"While humour is useful and we can laugh at some aspects, there is a serious side to keeping safe that we need to look at. We're going to look at some of the important considerations around, and possible 'ramifications' (consequences) of, sexual activity."

Ask:

There were a number of positive key words you may have seen or heard in the video. What were they? (Give clues by writing these words with some letters missing.)

- communicate/communication/talk
- consent
- comfort/comfortable
- conversation
- wants/expectations

So why is it important to talk about safe sex beforehand?

(e.g., ready; comfortable; can be difficult because it is out of comfort zone; both need to be aware of each other's expectations.)

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Learning Activities

Placemat: Keeping safe with sexual activity 20 minutes

12. Say:

"There are several aspects to keeping safe in sexual situations that need to be considered.

There are different areas that need to be considered when people are thinking about keeping themselves and their partners safe in sexual situations. As we have discussed, safety and wellbeing related to sexual activity is about more than just STI and pregnancy prevention. It is important to think about the issues and impacts related to all areas:

- physical (including sexual health)
- emotional
- social
- respectful relationship with partner
- the law

Many of the issues and consequences considered in each area overlap and link with other areas.

13. As a whole group, revise the legal aspects of consent in WA (legal age of consent in WA is 16; consent must be mutual, freely given, informed, certain, coherent, clear and ongoing; consent can be withdrawn at any time).

Teaching tip: For essential information about consent, safer sex and taking selfies go to the [Youth Law Australia](#) website (external site) and [Get the Facts - Sex and the law](#) (external site).

14. Teaching strategy: [Placemat activity](#) In groups of 4 students complete [Student activity sheet: Keeping safe with sexual activity](#). Have each group discuss and record possible issues and ramifications associated with different aspects of keeping safe in sexual situations:

1. physical (including sexual health)
2. emotional
3. social
4. respectful relationship with partner
5. the law

15. Have groups share ideas with the whole class. See [Teacher resource: Placemat activity answer sheet](#) for possible answers.
16. Remind students that the Sexual Assault Resource Centre (SARC) is a free service available for people who have experienced sexual assault. Display the [SARC website](#) and crisis line phone numbers (08) 6458 1828 or free call 1800 199 888. Posters can be put up in class and other places around the school.

3-2-1 Reflection

17. Ask students to write one new thing they have learnt from this lesson.
18. Ask for volunteers to share what they wrote.
19. Remind students that Get the Facts has a completely confidential '[ask a question](#)' service that they may wish to use. All questions are answered by a qualified health professional with a week.

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3-2-1 Reflection

Optional: Take home activity

Provide students with the [Take home activity: Reliable RSE websites](#) (electronic copy if possible). Remind them that it is best to use credible Western Australian and Australian websites to answer health questions rather than doing an internet search.

Health Promoting Schools

Background teacher note: [Health promoting schools framework](#).

Partnerships with parents

- [Talk soon. Talk often: a guide for parents talking to their kids about sex](#) is a free resource that can be bulk ordered by schools. Send a copy home to parents prior to starting your RSE program. The booklet offers age and stage appropriate information so that parents can reinforce the topics covered in class. ([How to order hardcopies.](#))
- Run a parent workshop prior to delivering RSE lessons so that parents can see the resources used, ask questions and find out how to support the school program by continuing conversations at home.
- Add the [Get the Facts](#) and [SECCA app](#) links to your website/e-news for parents.

Partnerships with school staff

- Invite the school health professionals and pastoral care staff (school nurse, school psychologist, chaplain, boarding house master, etc) to a class or an assembly to introduce them to the students and let them know what their roles are and how they can help the students. For example:
 - If you have concerns about relationships, you can go to...
 - If you have more questions about sexual health, you can go to...