

Note to Trainer: The content of this unit on Responsible Sexual Behavior is quite sensitive so it is important that you:

- Work with the staff prior to presenting the unit to get their input regarding appropriateness of each content area.
- Determine the maturity level of your group. The ages suggested are only guidelines and you may want to form your groups in a different way, or you may want to cover only portions of the unit.
- Hold separate sessions for boys and girls.
- Allow for plenty of discussion; teenagers often have many questions about this topic.

Responsible Sexual Behavior Part I should be completed prior to this unit.



Responsible Sexual Behavior Part 2

Ages 16+

Total Time: 2.5 Hours

- PART 1:** Intimacy and Sexual Activity
- PART 2:** Intimacy, Sexuality, and Commitment in a Relationship
- PART 3:** Responsible Sexual Behavior and Consent
- PART 4:** Protecting Yourself
- PART 5:** Question Box
- PART 6:** Follow-Up Activities
- ANNEXURE 1:** Resource Sheet on Responsible Sexual Behavior
- ANNEXURE 2:** Evaluation
- ANNEXURE 3:** Let's Talk
- ANNEXURE 4:** Case Studies
- POWERPOINT:** Intimacy and Commitment Funnels
- POWERPOINT:** Responsible Sexual Behavior





Part 1: Intimacy and Sexual Activity

Time:

30 Minutes

Objective:

Participants will examine the role of intimacy and sexual activity in relationships.

Materials:

- Marker board/chart paper
- Markers

Techniques:

- Group Discussion

TRAINER INSTRUCTIONS:

1. Guide the group as they examine the role of intimacy and sexual activity in relationships. Begin with a definition of intimacy:

A close, affectionate or loving relationship with another person. While it *may* include sexual relations, the key is that intimacy doesn't require sexual behavior. Intimacy incorporates the building blocks of love discussed earlier. Notice that none of the building blocks of love include sexual behavior.

2. Lead a discussion around why teens engage in sexual behavior. Ask the group for their ideas and list on a marker board or chart paper. Add the ideas below if they do not list them. Ask the group to identify which reasons are poor reasons and which are valid. Allow plenty of time for discussion and questions.

General:

- Physical attraction
- It feels good
- Rape or incest
- Pressure
- To prove love
- To prove adult status
- Rebellion
- Curiosity
- Love
- Want to get pregnant
- Drunk or high
- It just happened
- Got carried away

Emotional Needs:

- Wanting to be loved or to belong – doing it just so he/she won't break up with me
- Needing touch - teens don't get hugs as much as when they were younger – yearning for the touch, love
- Not feeling worthwhile - it doesn't matter what I do with my body anyway
- Following in the footsteps of poor role models
- A need to believe in someone even if that person's behavior is inappropriate or unsafe

Peer Pressure:

- Everyone else is doing it and I want to be part of the group
- Guys get pressure to live up to masculine stereotypes

Media Influences:

- TV, movies, music portray sexuality as desirable.



Part 2: Intimacy, Sexuality, and Commitment in a Relationship

Time:

30 Minutes

Objective:

Participants will explore the balance between intimacy/sexuality and commitment in a relationship.

Materials:

- PPT: Intimacy/Sexuality and Commitment Funnels

Techniques:

- Presentation
- Group Discussion

TRAINER INSTRUCTIONS:

1. Explain that in any relationship there needs to be a balance between intimacy/sexuality and commitment. Begin the Power Point showing the levels of intimacy/sexuality and commitment as funnels (**Slide #2**). Note that you slide down the funnels as you progress in your relationship; what is important is the balance between the two funnels.
2. Review the definitions at **Slide #3** of the PPT before discussing the concept of the funnels in detail.

(Note to Trainer: Terms for the various behaviors differ for various groups, so it is important that the teens understand the behaviors being described for each level – they may change the terms if they wish. Also, different cultures have different beliefs about appropriateness of intimate behaviors at different stages of a relationship. For example,

is “making out” reserved for couples who are engaged? Discuss with your group what is acceptable and appropriate.)

3. Now, discuss the funnels in more detail: **Slide # 4** – Explain that just as gravity would naturally pull you down a funnel, making it hard to stay near the top and not slip all the way through, our natural desires urge us on through each level to get to the last one.
 - In the intimacy/sexuality funnel, the body has many signals that urge us to go on from step to step. Only the brain signals “let’s stop.” Nerves in the mouth and tongue during a simple kiss get us thinking about more sexual behavior. Normal embracing during kissing touches nerves that get us thinking about exploring other parts of the body. Each step urges you on to the next step.
 - Refer to the commitment funnel and state that most of us want to belong to someone and have someone belong to us, if not now, in the future. The excitement and thrill of the relationship moves us further and further into the tunnel.
4. **Slide #5** – Girls may think they have everything under control, are enjoying the pleasurable feelings and feeling very womanly, when suddenly they realize that the guy has reached the point of urgent need. She may then find his need for physical release has become stronger than his concern for her, and she may not be able to stop them from slipping down the funnel.
5. **Slide #8** at the first bullet give the following example: if you have your first kiss at age 13 you are more likely to move down the funnel when you are younger and might be pretty committed by the time you are age 16, whereas if you don’t have your first kiss until age 16 you will be older when you have moved down the funnel.

At the third bullet explain that once you have moved way down the funnel (eg, intercourse), it is easier to break off the relationship than to stop having intercourse and only hold hands or kiss.
6. Continue with the PPT, adding the notes at the bottom of each slide as needed and allowing for discussion and questions.
7. At the last slide, invite the teens to brainstorm ways to show affection/attraction other than sexual behaviors.

*Intimacy and Commitment Funnels adapted from Carlfred Broderick and Almer Knowles “Responsible Sexual Behavior” training materials.



Part 3: Responsible Sexual Behavior and Consent

Time:

20 Minutes

Objective:

Participants will understand what is meant by sexual consent, and why it is important.

Materials:

- Power Point: Responsible Sexual Behavior

Techniques:

- Group Discussion

TRAINER INSTRUCTIONS:

1. Begin the power point and ask the group what is meant by sexual consent. (Sexual consent means saying yes to sexual activity).
2. **Slide #3** ask the group: how can you tell if someone has given their consent? Discuss with the group and then review the key points in the following slides.

Slide #4 – It is important to realize that agreeing to one type of sexual activity (eg, kissing) doesn't mean that a person is agreeing to other sex acts. Everyone has the right to decide whether or not they want to do something sexual and to change their mind at any point. Consent only means at this particular time, you would like to engage in this particular sexual behavior. You are free to have a different opinion at another time.

Slide #5 – You can never assume someone is consenting to sexual activity just because they haven't said NO, or because you think you're picking up on something from their

body language. Consent is verbal. This means asking first before you do anything – before the physical need takes control (as described in the concept of the “funnels”).

Slide #6 – Just because you’re on a date or in a relationship, that doesn’t mean there is consent.

Slide #7 – If someone is really drunk or high, they can’t consent to sex. Even if they seem eager to engage in sexual behavior, you should walk away.

Slide #8 – Consent is not about forcing, shaming or begging someone to have sex

Slide #9 – Saying no should never be treated as a game or that someone is “playing hard to get.”

Slide #10 – Engaging in a sexual act without the other person’s consent is considered sexual assault or rape.

3. Explain that “not now” means NO. “Maybe” and “maybe later” mean NO.
 - Ask the group, “What are some other things that mean NO?” (Examples include: “I’ll think about it.” “I’m not sure.” Not responding. Walking away.)
4. Discuss how important it is to have respect for your partner:
 - If your partner tries to pressure you into sex without your consent (or if you are pressuring them into sex), you may want to think seriously about your relationship. Do you want to be with someone who doesn’t respect your wishes? Are you guilty of not respecting someone’s wishes?



Part 4: Protecting Yourself

Time:

20 Minutes

Objective:

Participants will understand the importance of protecting themselves from sexually transmitted infections and pregnancy.

Materials:

- Annexure 1: Resource Sheet on Responsible Sexual Behavior

Techniques:

- Group Discussion
-

TRAINER INSTRUCTIONS:

1. Explain that some infections/diseases can be passed through sexual contact. These are known as Sexually Transmitted Infections (STI's).
 - An STI is an infection passed from one person to another through sexual contact – some can be transmitted during genital touching (syphilis and herpes).
 - Infections are more likely to be passed the more sexual partners a person has.
 - Some infections can be cured and some cannot. They can lead to serious health issues such as problems getting pregnant, during pregnancy or health problems for the unborn baby. They can also lead to infection and organ damage.
 - Common STI's include Chlamydia, Genital herpes, gonorrhea, HIV/AIDS, and Syphilis
 - It can be difficult to tell if someone has an STI. They can be spread even if there are no signs or symptoms. Many STIs have only mild or no signs/symptoms at all.

- STI's are treated with medications. Talk to the doctor if you think you may have been exposed.
2. Discuss effective methods to protect yourself from STI's, HIV/AIDS, and pregnancy:
 - Not having sex is the most reliable way to prevent STI's, HIV/AIDS, and pregnancy
 - Condoms can significantly reduce the risk of getting an STI. Use a condom every time you have sex - Talk to your doctor, social worker or Program Coordinator about condoms and other methods to stay safe.
 3. Distribute Annexure 1 and ask the teens to keep it in their folders for future reference.



Part 5: Question Box

Time:

20-30 Minutes

Objective:

Participants will have an opportunity to have their questions answered in a safe, respectful setting.

Materials:

- Question Box
- Paper, pens/pencils
- Annexure 2: Evaluation

Techniques:

- Discussion
-

TRAINER INSTRUCTIONS:

1. Reassure the group that most people have beliefs based on incorrect information and often it impacts their actions. No question is silly – correct information is important to take care of yourself.
2. Give participants 5 minutes to write any question they have related to this session. They do not need to write their names on the papers.
3. Ask participants to drop the papers into the question box.
4. Once collected, begin answering the questions, one at a time. Encourage the teens to analyze myths and ask more questions if desired.
5. Distribute Annexure 2 and ask the teens to complete the evaluation form regarding this unit.



Part 6: Follow-Up Activities

Time:

Varies by Activity

Objective:

Participants will have the opportunity to practice the skills learned in this session

Materials:

(Depending on Option Selected)

Option One:

- Annexure 3: Let's Talk (one per group)

Option Two:

- Annexure 4: Case Studies (one per group)

Techniques:

- Applying learning to daily life

TRAINER INSTRUCTIONS:

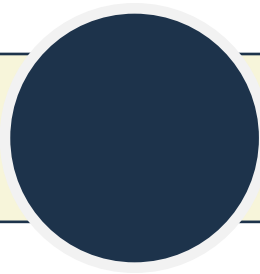
1. Assign one of the options below for this first week. Additional activities will be assigned in the following weeks. (Consider your group's age and maturity when choosing options.)

Option One: Let's Talk – Divide the group into smaller groups of 4-5. Distribute Annexure 2 (one per group) and ask each group to discuss the questions on the annexure, take notes, and be prepared to share their thoughts with the whole group. Allow 20-30 minutes for discussion.

After the groups have answered all questions, ask for a volunteer from each group to share their group's responses. Begin with question #1 and ask each group representative to share. Discuss how similar/different each group's response is, and facilitate further discussion as needed. Continue with the same format for the rest of the questions.

Option Two: Case Studies – Divide the group into 4 -5 smaller groups, and give each group a case study from Annexure 3. Instruct participants to read the case study and answer the questions. After an adequate amount of time, bring the groups back together and ask each group to present their case and discuss with the whole group.

Suggested questions for discussion: How did the people behave in each case study (responsible or irresponsible?). Is getting “physical” a necessary part of a relationship? Is it important to decide on limits in a relationship? Why? Who should decide on the limits – girl or boy? (Responsibility is equal between them)



Annexures

Responsible Sexual Behavior Part 2

Ages 16+

ANNEXURE 1: Resource Sheet on Responsible Sexual Behavior

ANNEXURE 2: Evaluation

ANNEXURE 3: Let's Talk

ANNEXURE 4: Case Studies





Annexure 1: Resource Sheet on Responsible Sexual Behavior

Sexual Consent means saying yes to sexual activity.

It is important to realize that agreeing to one type of sexual activity (eg, kissing) doesn't mean that a person is agreeing to other sex acts. Everyone has the right to decide whether or not they want to do something sexual and to change their mind at any point. Consent only means at this particular time, you would like to engage in this particular sexual behavior. You are free to have a different opinion at another time.

- ✓ You can never assume someone is consenting to sexual activity just because they haven't said NO, or because you think you're picking up on something from their body language. Consent is verbal. This means asking first before you do anything
- ✓ Just because you're on a date or in a relationship, that doesn't mean there is consent.
- ✓ If someone is really drunk or high, they can't consent to sex. Even if they seem eager to engage in sexual behavior, you should walk away.
- ✓ Consent is not about forcing, shaming or begging someone to have sex
- ✓ Saying no should never be treated as a game or that someone is "playing hard to get."

Engaging in a sexual act without the other person's consent is considered sexual assault or rape.



If your partner tries to pressure you into sex without your consent (or if you are pressuring them into sex), you may want to think seriously about your relationship. Do you want to be with someone who doesn't respect your wishes? Are you guilty of not respecting someone's wishes?

Some infections/diseases can be passed through sexual contact. These are known as **Sexually Transmitted Infections (STI's)**.

- An STI is an infection passed from one person to another through sexual contact – some can be transmitted during genital touching (syphilis and herpes).
- Infections are more likely to be passed the more sexual partners a person has.
- Some infections can be cured and some cannot. They can lead to serious health issues such as problems getting pregnant, during pregnancy or health problems for the unborn baby. They can also lead to infection and organ damage.
- Common STI's include Chlamydia, Genital herpes, gonorrhea, HIV/AIDS, and Syphilis
- It can be difficult to tell if someone has an STI. They can be spread even if there are no signs or symptoms. Many STIs have only mild or no signs/symptoms at all.
- STI's are treated with medications. Talk to the doctor if you think you may have been exposed.
- Not having sex is the most reliable way to prevent STI's, HIV/AIDS, and pregnancy
- Condoms can significantly reduce the risk of getting an STI. Use a condom every time you have sex - Talk to your doctor, social worker or Program Coordinator about condoms and other methods to stay safe.



Annexure 2: Evaluation

Unit 13 Part 2 – Responsible Sexual Behavior	Score (Circle a number, 5 is the Best)	 What I Liked/Learned	 What I Didn't Like or Things I'm Confused About
Part 1: Intimacy & Sexual Activity	1 2 3 4 5	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
Part 2: Commitment in a Relationship	1 2 3 4 5	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
Part 3: Consent	1 2 3 4 5	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
Part 4: Protecting Yourself	1 2 3 4 5	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
Part 5: Question Box	1 2 3 4 5	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
Overall Score	1 2 3 4 5		



Annexure 3: Let's Talk

Discuss the following questions with your small group:

What is the difference between love and infatuation?

What is the connection between love and sex?

What are some ways to express love without sex?

What are some things to think about before you decide to have sex?

What are some feelings someone might have after having sex?

How do you deal with peer pressure?

What are some things that might tempt someone to consider having sex?

Does dancing promote sex? Does style of clothing promote sex?

What do you think it means to be sexually responsible?

Why do some teens have sex?



Annexure 4: Case Studies

Case #1 – Pooja’s story

Pooja is 15 years old and is friendly with Rahul a good-looking boy in her class. They have been going around with each other and are considered to be one of the popular couples in school. However, Rahul has asked her to have sex many times and Pooja has been refusing. There are other couples in school who have had physical relations with each other, and though Pooja loves Rahul a lot, she is very confused about what to do. Finally, after a lot of thought she decides that she is an adult and sex is beautiful and fun. Also, she reasons, that they have already decided to marry each other so there cannot be any harm. Right? Therefore, Pooja agrees to have sex with him!

However, a few days later Pooja finds that Rahul is getting close to another girl in the class. Pooja cannot believe it! She feels cheated, angry and guilty about having sex, as a result of which she unable to concentrate on her studies and is terribly depressed.

1. Did Pooja think through her situation? Why do you think so?
2. What options were available to her?
3. What kind of pressures were working on her?
4. What factors could have helped Pooja to not have sex?
5. What should her decision have been in this situation?

Case #2 – Amita’s Story

Amita is 14 year old, and this is her third meeting with Bobby. During the meeting, Bobby gives her a small gift and wants to take Amita to his home. However, as his parents are not at home, Amita does not want to go alone to his house, but feels obliged to go because of the gift. Once at home, Bobby insists that they have sex. Though Amita hesitates a bit, she finally gives in and agrees.

Two months later she gets worried as she misses her periods. She informs her mother who takes her to the Doctor, where after some tests they find out that Amita is 2 months pregnant. Amita is very upset, more so because her mother abuses and curses her. Her friends start avoiding and the school authority want to expel her. Amita feels lonely, depressed and cheated.

1. Did Amita think through enough before getting physically involved with Bobby?
2. What options were available to her?
3. What kind of pressures were working on her?
4. What were the factors she should have considered before agreeing to have sex?
5. What should have been her decision in this situation?

Case #3 – Ravi's Story

Ravi is a 15-year-old boy and is planning to visit a sex worker with some friends, as they have been watching a lot of blue movies and feel the need to experiment with sex.

A few days after visiting a sex worker, Ravi feels pain while urinating and also observes some boils around his genitals. He gets very scared and visits a Doctor, as he is unable to bear the pain. After a medical examination, the Doctor tells him that he has contracted an infection by having sex with someone who is infected. The Doctor also adds that some infections can be fatal, and there might be a possibility that he has contracted HIV. Ravi breaks down-he feels very guilty, ashamed and curses his friends.

1. Did Ravi think through the consequences of having sex with a sex worker?
2. What options were available to him?
3. What kind of pressures were working on him?
4. What factors should he have considered before his actions?
5. What should have been his decision?

Case #4 – Vaibhav’s Story

Vaibhav and Devika are 17-year-old teenagers who like each other immensely and have been going around for the last two years. Vaibhav’s friends always tease him and ask him whether he has had sex with Devika. Vaibhav does not like his friends questioning him and ridiculing him in such a way. But gradually, he begins to think that if his friends are having sex, perhaps he can also try it. He tries reading some pornographic books and also watches blue films to understand everything about sex and then asks Devika whether she is ready. She says no.

One day, all his friends including Devika are having a stay over. The boys are enjoying themselves and drinking. Vaibhav also drinks a lot that night and has sex with Devika. Later, Vaibhav feels very guilty! Meanwhile, two months pass and Devika calls to inform him that she has missed her periods for the last two months and could be pregnant. Vaibhav is shocked and hates himself for his actions.

1. Did Vaibhav think through the consequences of having sex?
2. What options were available to him?
3. What kind of pressures were working on him?
4. What factors could have encouraged him to behave responsibly?
5. What should have been his decision?

Case #5 – Neha’s Story

Neha is 14 years old and both her parents are working. They often tell their neighbor’s son Amit, who is 17 years old, to help Neha with her studies. While helping her, Amit tries and sits very close to Neha, which makes her uncomfortable. One day, he grabs Neha by her shoulders and tries to force himself on her. Neha starts crying and feels very upset. However, she does not tell anybody.

1. Why did Neha remain silent?
2. What options were in front of her?
3. What kind of pressures were working on her?
4. What factors could have helped her to handle the situation differently?
5. What should have been her decision in this situation?