Educator Orientation Guide on Scripted Lesson Plans for Comprehensive Sexuality Education in Life Skills and Life Orientation CAPS

Participant Resource Manual
Grades 4 to 12
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ACKNOWLEDGEMENTS


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This manual will be updated periodically. As such, comments and suggestions are welcome and should be sent to The Director General, Department of Basic Education, for the attention of the Health Promotion Directorate, Private Bag X 895, Pretoria, 0001.

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INTRODUCTION

Welcome to the Educator Orientation Guide (EOG) for educators on the scripted lesson plans comprehensive sexuality education (SLPs) for Life Skills and Life Orientation for Grades 4–12. This material was developed specifically for educators who have the responsibility, and exciting opportunity, to educate learners using sexuality and HIV prevention education content. The South Africa School-Based Sexuality and HIV Prevention Education Activity, (hereafter referred to as “the Activity”), supports the Department of Basic Education (DBE) to implement HIV prevention education; support life skills, and provide care and support for learners in public schools.

Activities will address age-appropriate sexual and reproductive health (SRH) education and HIV-related life skills delivered through curricular means in schools. Activities will be focused on improving learner knowledge and achievement in targeted areas of the life skills programme. The activities will focus, particularly, on topics that address adolescent sexual reproductive health (ASRH), safe sexual behaviour, the mitigation of issues related to sexual gender-based violence, reduction of teenage pregnancy, increased retention of learners in schools and the improvement of education achievement levels.

Although the programme concentrates on sexuality education and HIV prevention education, it is recognised that HIV and AIDS do not occur within a social vacuum. To implement an effective strategy, it is necessary to deal with both causal and resultant behaviours. To this end, the scripted lesson plans have been designed to reach beyond the basic knowledge of HIV and AIDS, to address values, skills and attitudes through life skills topics which are aligned to the Intermediate (IMP), Senior and Further Education and Training (FET) phases (Grades 4–12) Life Skills and Life Orientation Curriculum Assessment and Policy Statement (CAPS).

THE SOUTH AFRICA SCHOOL-BASED SEXUALITY AND HIV PREVENTION ACTIVITY

The School-Based Sexuality and HIV Prevention Education Activity has five closely related objectives:

1. Increased number of educators qualified to teach sexuality education.
2. Strengthened capacity of the Department of Basic Education (DBE) to provide education and training for educators to teach sexuality and HIV education lessons in the classroom and improve life skills programme
3. Improved quality of school-based sexuality and HIV education programs – evidence informed and effective to reduce risky behaviours amongst school-going youth; improved learner knowledge and achievement in targeted areas of the life skills programme
4. Increased DBE capacity to work in partnership with the Department of Health to implement the Integrated School Health Program (ISHP); reduce teenage pregnancy levels, and increase retention of girls in school and increased potential to complete high school
5. Improved systems to evaluate the effectiveness of the sexuality and HIV education programme.

THE EDUCATOR ORIENTATION GUIDE (EOG) PARTICIPANT RESOURCE MANUAL

This manual is designed to provide educators, that are being trained in comprehensive sexuality education as taught through the use of the scripted lesson plans, with direction as they receive their training. The manual is structured according to the prescribed training agenda and participants can follow the instruction as each activity is presented by the facilitator. This manual can also be used as a resource for educators in the classroom.
## THE THREE-DAY TRAINING AGENDA AT A GLANCE

<table>
<thead>
<tr>
<th>DAY ONE</th>
<th>DAY TWO</th>
<th>DAY THREE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registration and pre-training assessment</td>
<td>Welcome plenary session</td>
<td>Welcome breakaway rooms</td>
</tr>
</tbody>
</table>
| Opening plenary session | **MODULE 4**: Teaching using scripted lesson plans in line with CAPS  
- The structure of the SLPs  
- Trainer demonstration of Lessons 4.1, 7.1 and 11.1  
- SLP practice preparation: Lessons 4.2, 5.1, 6.1, 7.2, 8.1, 9.1, 10.5, 11.4 and 12.2  
- SLP practice session: Lessons 4.2, 5.1, 6.1, 7.2, 8.1, 9.1, 10.5, 11.4 and 12.2  
- Debrief of SLP practice session: Lessons 4.2, 5.1, 6.1, 7.2, 8.1, 9.1, 10.5, 11.4 and 12.2 | **MODULE 5**: Gender norms and gender-based violence  
- Power and control: How men and women mistreat each other | **MODULE 7**: Communication and prevention  
- SLP practice preparation: Lessons 4.3, 5.2A, 6.2, 7.5, 8.3, 9.5, 10.3, 11.7 and 12.4  
- SLP practice session: Lessons 4.3, 5.2A, 6.2, 7.5, 8.3, 9.5, 10.3, 11.7 and 12.4  
- Debrief of SLP practice session: Lessons 4.3, 5.2A, 6.2, 7.5, 8.3, 9.5, 10.3, 11.7 and 12.4  
- Trainer demonstration of Lesson 9.3: Safer sex: Using condoms |
| Overview of the training | **MODULE 1**: Introduction to comprehensive sexuality education; Exploring our values, behaviours and attitudes regarding sexuality education  
SLP practice preparation: Lessons 4.7, 5.9, 6.7, 7.3, 8.4, 9.8, 10.3, 11.7, 12.3 | **MODULE 6**: Health and environmental responsibility  
- Trainer demonstration of Lessons 4.9, 8.5, 10.8 | **MODULE 8**: Contextualising the SLPs in the South Africa School-Based Sexuality And HIV Prevention Activity  
- Implementation of the Activity package  
- Ongoing support for SLP implementation  
- Monitoring and evaluation activities for SLP implementation  
- Planning and next steps |
| Overview of the policy background | **MODULE 2**: Exploring our attitudes regarding our own sexual development  
SLP practice session: Lessons 4.7, 5.9, 6.7, 7.3, 8.4, 9.8, 10.3, 11.7, 12.3 | Post-training assessment |
| Overview of CAPS and development of the scripted lesson plans | **MODULE 3**: Human sexuality and comprehensive sexuality education pedagogy  
Debrief of SLP practice session: Lessons 4.7, 5.9, 6.7, 7.3, 8.4, 9.8, 10.3, 11.7, and 12.3 | Training evaluation |
| Training introduction | Lesson practice assignment for Day 2 and Review of Day 1  
| **Closing** | **Closing** | **Closing** |
DAY ONE
Scripted Lesson Plans for
Comprehensive Sexuality Education in
Life Skills and Life Orientation
<table>
<thead>
<tr>
<th>Module</th>
<th>Schedule</th>
<th>Time</th>
<th>Topic</th>
</tr>
</thead>
</table>
| **OPENING** | 08:00 – 08:30 | 30 mins | Registration  
Pre-training assessment |
| | 08:30 – 08:45 | 15 mins | Moment of silence and blessings for the workshop.  
Introduction of the speaker giving the opening remarks  
Opening remarks by provincial official |
| | 08:45 – 09:15 | 30 mins | Overview of the policy background |
| | 09:15 – 10:00 | 45 mins | Overview of CAPS and the development of the SLPs  
BDI logic model |
| **10:00 – 10:30** | **TEA BREAK** | | |
| **TRAINING** | **INTRODUCTION** | 10:30 – 11:00 | 30 mins | Training introduction  
• Group introductions (bingo activity)  
• Participant expectations and ground rules  
• Housekeeping  
• Pandora's box |
| **MODULE 1:** | **INTRODUCTION TO COMPREHENSIVE SEXUALITY EDUCATION; EXPLORING OUR VALUES AND BEHAVIOURS** | 11:00 – 11:30 | 30 mins | Introduction of CSE  
• Building an understanding of CSE  
• Examining our personal and professional values  
• The comprehensive sexuality education core |
| **MODULE 2:** | **EXPLORING OUR ATTITUDES REGARDING OUR OWN SEXUAL DEVELOPMENT** | 11:30 – 12:00 | 30 mins | • Reconstructing the six dimensions of psychosexual development  
• The stages of adolescence |
| **12:00 – 12:45** | **LUNCH BREAK** | | | |
| **MODULE 3:** | **HUMAN SEXUALITY AND COMPREHENSIVE SEXUALITY EDUCATION PEDAGOGY** | 12:45 – 13:00 | 45 mins | Human sexuality discussion: Binaries and boxes |
| | 13:00 – 14:00 | 30 mins | Effective pedagogical strategies for sexuality education  
Benefits of interactive teaching and learning for comprehensive sexuality education |
| | 13:30 – 14:00 | 30 mins | Creating a safe learning environment and the role of the educator  
Discomfort and sexuality education: Walking the line |
| | 15:00 – 15:45 | 45 mins | Discussion on the role of educators in modelling behaviour and attitudes  
Creating a safe space for learners in the classroom |
| | 15:45 – 16:15 | 30 mins | Child Protection and Disclosure protocol |
| | 16:15 – 16:30 | 15 mins | Lesson practice assignment |
| **16:30** | **END OF DAY ONE** | | |
OPENING OF THE TRAINING

1. REGISTRATION
1. Complete all the sections in the database registration form, that will be provided by the facilitator.
2. If you arrive late, make sure that you complete the database registration form before joining the proceedings of the day.
3. Submit the completed database registration form to the facilitator.

2. PRE-TRAINING ASSESSMENT
1. Answer all of the questions in the pre-training assessment form, that will be provided by the facilitator.
2. If you arrive late, make sure that you complete the pre-assessment form before joining the proceedings of the day.
3. Note that the pre-training assessment form requires a unique personal identifier, which will be used for record-keeping and to track your progress, after the training. The identifier may be your national ID, Persal or SGB number. Please make sure to use the same personal identifier on both pre- and post-training assessments.
4. Submit the completed pre-training assessment form to the facilitator.

NOTE TO THE PARTICIPANT

The pre-training assessment form is designed to pose questions to evaluate your knowledge and understanding of sexuality education before you start the training. You must complete this form on your own without assistance or collaboration. After the training, you will be asked to complete the same form. Please take note of your unique personal identifier, as you must use the same identifier for the post-training assessment form.

Read the poem and discuss its relevance to sexuality and HIV prevention education, with the person sitting next to you.


YOU TAUGHT ME
You taught me the names of the cities of the world
BUT
I don’t know how to survive in the streets in my own city

You taught me about the minerals that are in the earth
BUT
I do not know what to do to prevent my world’s destruction

You taught me to speak and write in 3 languages
BUT
I do not know how to say what I feel in my heart

You taught me all about reproduction in rats
BUT
I do not know how to prevent pregnancy

You taught me how to solve maths problems
BUT
I still can’t solve my own problems

Yes, you taught me many facts, and thank you,
I am now quite clever
BUT
Why is it that I feel I know nothing?
Why do I feel I have to leave school to learn about coping with life?

4. OPENING PLENARY SESSION

The facilitator will start the training with a moment of silence to ask for blessings upon the activities of the day and introduce the guest speakers.
5. OVERVIEW OF THE TRAINING

The facilitator will introduce the training team and present the goals and outcomes of the training programme, followed by a brief discussion of the training methodology that will be used. The facilitator will then introduce the EDC, their partners and the Activity.

5.1 Training goals and objectives

5.1.1 Training goals

The overall goal of this training is to build educators’ teaching capacity by strengthening the knowledge, skills and comfort levels that are required to teach the 80 scripted lesson plans for comprehensive sexuality education that have been designed for South African public schools.

5.1.2 Training objectives

By the end of the training, you will be able to:

- briefly describe how the 80 SLPs fit together across the intermediate, senior and FET phases to make up a comprehensive sexuality education focus within the Life Skills (LS) and Life Orientation (LO) CAPS;
- demonstrate the ability to align the SLPs with the topics in the Life Skills and Life Orientation curriculum for Grades 4–12;
- state the core messages of the sexuality education focus, and explain the importance of reinforcing these messages throughout the curriculum;
- clarify their personal values related to sexuality and describe how to manage these personal values when implementing the LS and LO CAPS with learners;
- use the key instructional methods of the SLPs and report comfort in using them to:
  a) lead group tasks (e.g. introducing and transitioning activities, giving clear instructions, managing time, etc.);
  b) facilitate large group discussions;
  c) facilitate small group work;
  d) facilitate role playing;
  e) facilitate simulations;
  f) delivering brief lectures; and
  g) manage sensitive and/or challenging classroom situations.
- demonstrate the ability to follow the steps suggested in the SLPs for each of the topics.
5.2 Training methodology
The main methodologies that will be used during the training are:

- plenary and smaller groups
- demonstrations and micro-teaching sessions
- group work and collaborative discussions
- brief lectures
- self-reflection
- presentation sessions and role-plays
- class discussions and report back sessions.

5.3 Training agenda
The facilitator will review the 3-day training agenda with you. Remember that the agenda is merely a guide to ensure an efficient flow of the training. The facilitator will allow for teachable moments that may result in not following the agenda meticulously. However, all the items on the agenda will have been covered by the end of Day 3 of the training.

5.4 Tools for monitoring and evaluation of the training
The facilitator will explain each of the monitoring and evaluation tools that you will complete during the training. You must understand when and why each form is to be completed during the training. The monitoring tools include the following:

- attendance register
- database registration form,
- pre- and post-training assessment forms
- training evaluation form.
6. OVERVIEW OF THE POLICY BACKGROUND

As an educator, it is important that you understand how you contribute to the implementation of the policies related to comprehensive sexuality education. In this session you will be discussing the following policies:

<table>
<thead>
<tr>
<th>Year</th>
<th>Policy/Document</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005</td>
<td>Sections 110 and 150 of the Children’s Act, 2005 (Act 38 of 2005), (as amended by the Children’s Amendment Act, 2007 (Act 41 of 2007), which require that information on sexual violence be reported to relevant authorities.</td>
</tr>
<tr>
<td>2012</td>
<td>Integrated School Health Policy (ISHP)</td>
</tr>
<tr>
<td>2012</td>
<td>DBE Integrated Strategy on HIV, STIs and TB 2012–2016</td>
</tr>
<tr>
<td>2013</td>
<td>The East and Southern African Countries (ESA) Commitment</td>
</tr>
<tr>
<td>2015</td>
<td>The National Youth Policy 2015–2020</td>
</tr>
<tr>
<td>2017</td>
<td>National Adolescent and Youth Health Policy 2017</td>
</tr>
<tr>
<td>2017</td>
<td>Department of Basic Education, National Policy on HIV, STIs and TB for Learners, Educators, School Support and Officials in all Primary and Secondary Schools in the Basic Education Sector</td>
</tr>
<tr>
<td>2017</td>
<td>The National Strategic Plan for HIV, TB and STIs 2017–2022</td>
</tr>
<tr>
<td>2018</td>
<td>DBE Protocol for the Management and Reporting of Sexual Abuse and Harassment in Schools</td>
</tr>
<tr>
<td>2018</td>
<td>Draft DBE National Policy on the Prevention and Management of Learner Pregnancy</td>
</tr>
<tr>
<td>2019</td>
<td>Standard Operating Procedures for the Provision of Sexual and Reproductive Health Rights and Social Services in Secondary Schools</td>
</tr>
</tbody>
</table>

The South African policy documents can be found on the Department of Basic Education website: www.education.gov.za

The ESA Commitment details can be found on the Young People Today Initiative website: www.youngpeopletoday.org


OUTCOMES

At the end of this session, you will be able to:

- identify the goal in the National Strategic Plan for HIV, TB and STIs 2017–2022 (NSP), under which the DBE is required to report on the implementation of comprehensive sexuality education;
- describe and understand the role of the scripted lesson plans (SLPs) on CSE in the implementation of the DBE National Policy on HIV, STIs and TB and the Draft DBE National Policy on the Prevention and Management of Learner Pregnancy in Schools; and
- identify the key objectives in the National Adolescent and Youth Health Policy 2017, under which the DBE will work with the Department of Health (Doh) and Department of Social Development (DSD) to provide sexual and reproductive health (SRH) services to learners.
ESTIMATED TIME: 30 minutes

METHODOLOGY:

1. The facilitator will take you through the policies listed above, using a PowerPoint presentation. After each policy has been presented, you will have an opportunity to ask questions about the policy.

2. Please note that the Draft DBE National Policy on the Prevention and Management of Learner Pregnancy is still being finalised, but it is important for you to start engaging with it.

3. It is beneficial for you to familiarise yourself with the policies that underpin the CSE content.

7. OVERVIEW OF THE CAPS AND THE DEVELOPMENT OF THE SCRIPTED LESSON PLANS

In this session you will be taken through the process of developing the SLPs and how they are linked to the CAPS. This session needs your undivided attention as it forms the basis of the implementation of the SLPs in the classroom. You will be engaging with the CAPS and the SLPs throughout the training. As the facilitator explains the structure of the SLPs, you will see how each section of the SLPs fits into lesson as a whole. Feel free to ask questions as the facilitator is conducting the presentation.

OUTCOMES

At the end of this session, the participants will be able to:

- describe the behaviour-determinant-intervention (BDI) logic model and how it was used to develop the scripted lesson plans;
- describe the development of the scripted lesson plans and the research framework that informed their development;
- demonstrate an understanding of the link between the CAPS topics and subtopics and the scripted lesson plans for Grades 4–12;
- recognise the CAPS topics and subtopics that are taught using the scripted lesson plans in alignment with the Annual Teaching Plan (ATP);
- identify the structure of the scripted lesson plans; and
- explain how scripted lesson plans are assessed.

ESTIMATED TIME: 45 minutes
7.1 The BDI logic model and the SLP development research framework

A behaviour-determinant-intervention (BDI) logic model provides an evidence-based approach to identifying the gaps in the curriculum’s content for teaching comprehensive sexuality education. It links policy health goals to targeted behaviours, that need to be changed or reinforced, and connects these to the comprehensive sexuality education content that needs to be taught in schools, in order to make an impact on adolescents’ choices regarding their sexual and reproductive health.

The BDI logic model strongly emphasises identifying the determinants (risks and protective factors) that will help to change behaviour and then proposes the intervention that will strengthen the teaching of comprehensive sexuality education.

The SLPs are the intervention that will be used to ensure that policy health goals are addressed, at the classroom level, with the aim of changing the decisions that the learners will make during their adolescence and beyond.

**METHODOLOGY:**

1. The facilitator will explain the BDI logic model and draw the connections to the development of the SLPs, as well as how the comprehensive sexuality education content is linked to the CAPS Life Skills and Life Orientation content.

2. At the end of the presentation, you may ask questions or make comments.

3. The facilitator will ask you to come up with an example where you target a specific behaviour that is relevant to your own context using the same health goals as presented in the BDI logic model below. Use the space provided in the table below.

<table>
<thead>
<tr>
<th>Teen sexual behaviours</th>
<th>Health goal(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Which teen sexual behaviors are directly related to the health problem presented and are amenable to change through a curriculum-based intervention?</td>
<td>What is the public health problem we want to ameliorate and in which population?</td>
</tr>
</tbody>
</table>
| | • A reduction in teenage pregnancy  
| | • A reduction in HIV and other STIs |

<table>
<thead>
<tr>
<th>Curriculum activities</th>
<th>Determinants</th>
</tr>
</thead>
<tbody>
<tr>
<td>What types of learning activities could be designed to deliberately change each of the determinants in our logic model? Note that one activity is likely to affect more than one determinant. Depending on the determinant, it may take more than one activity to change it.</td>
<td>What are the important determinants that affect the teen sexual behaviours selected for the logic model? Remember that these determinants should be amenable to change through a curriculum-based intervention.</td>
</tr>
</tbody>
</table>
7.2 The Curriculum and Assessment Policy Statement (CAPS) and the link to the SLPs

METHODOLOGY:

1. The facilitator will take you through a presentation on the link between the CAPS and the SLPs.
2. You will be asked to split into groups of four or five people and the facilitator will show you a slide of all of the scripted lesson plans for Grades 4–12 (Appendix 1: 80 scripted lesson plans at a glance: Grades 4–12).
3. Turn to the first SLP in the educator guide of the grade that you teach. For example, if you teach Grade 4, you should turn to Lesson 4.1 in the applicable educator guide etc.
4. Identify which CAPS topics and subtopics are addressed in the lesson. Repeat this exercise for 2 more lessons.
5. After 10 minutes, your group will present what you have identified to the rest of the participants.
6. The facilitator will refer you Appendix 2: Alignment of the SLPs to CAPS topics and subtopics for each of the phases, to clarify the link between the CAPS and the SLPs.
7. The facilitator will address any mistakes that you may have made during your presentation.
8. You may ask questions or make comments that need to be addressed before moving on.

7.3 The structure of the SLPs

METHODOLOGY:

1. Turn to the SLP that the facilitator has selected in your educator guide. The facilitator will use this lesson to explain how an SLP is structured.
2. It is important to draw the connections between the steps outlined for each lesson and the corresponding handouts and the posters, which are attached to the lesson plan.
3. Please note that it is imperative to follow the steps given in the SLPs and to take note of the participatory methods that are employed by the prescribed steps.
4. Discuss which participatory method is most effective in the classroom, especially for the assessment tasks.
7.4 Assessment in the SLPs

Assessment is integral to teaching and learning. Assessment is planned together with what must be taught and what must be learnt throughout the academic year. Assessment in the SLPs needs to be phase and age-appropriate, and support the learners’ ability to acquire knowledge throughout the different phases. Various assessment tasks are provided for each SLP and are used to support the teaching and learning of content across all grades, and serve to model best practices for assessment.

Identifying the best formats for assessment of specific content, and the skill being targeted, will have direct links to what is contained in the LO and LS annual teaching plans (ATPs). The assessment tasks that are designed for each SLP have the potential to provide teachers with substantial guidance on how to model both formative and summative assessments.

METHODOLOGY:

1. The facilitator will present a slide on the requirements of assessments in the SLPs.
2. Split into groups and go through the SLPs and find four assessment activities.
3. Discuss and agree on which methods are most effective for assessment in the classroom.
TRAINING INTRODUCTIONS

8. INTRODUCTIONS

NOTE TO THE PARTICIPANT

At this point of the training, you will start interacting fully with the other participants away from the plenary. The bingo activity will help you to build a rapport amongst yourselves; this will be important for the success of the training.

For the group agreements, you will be asked to express what you would like to get from the training and in return, you will be asked to identify what should happen during the training in order for it to be a success. These agreements will be displayed on the wall throughout the training and you will come back to them at the beginning of each day and whenever there is a violation of an agreement.

You will be asked to share your experiences in HIV prevention and comprehensive sexuality education at the school level. This will help you to reflect on the importance of the training and to look forward to the knowledge and skills which will be imparted to you.

OUTCOMES

At the end of the session, you will be able to:

• introduce yourselves to each other;
• begin feeling more comfortable with each other;
• start using language related to sexuality education that you may not be comfortable using (e.g. condom, sexual intercourse);
• participate in establishing ground rules for the training;
• express what you would like to gain from the training;
• express what you are prepared to contribute to ensure optimal learning for all involved;
• use “Pandora’s box” to ask difficult or seemingly embarrassing questions without compromising your anonymity;
• introduce “Pandora’s box” in their own classrooms; and
• create an environment that feels welcoming, respectful and supportive to all learners.
8.1 Introductions: The bingo activity

ESTIMATED TIME: 10 minutes

METHODOLOGY:

1. You will each receive a bingo card (Appendix 3: Bingo card). The objective of the game is to fill up your card with the signatures of people who meet the criteria written in the boxes. For example, when you find someone who has the same shoe size as you, that person should sign that box.

2. Move on to another person to ask another question.

3. When you have all nine signatures, you should yell out, “Sex!” The first person to do so is the winner, and this is the end of the game.

4. The facilitator will then ask you to introduce yourself to the person standing next to you. You have five minutes to do this.

5. You will then introduce the person you have introduced yourself to, to the rest of the group.

8.2 Establishing group agreements

Participant expectations and ground rules

ESTIMATED TIME: 10 minutes

METHODOLOGY:

1. Think for a minute about what you want to get from the facilitator and the other participants in the group, through this training process. Be prepared to share with the entire group.

2. Think about what you are willing to give, for the training programme to be of the greatest benefit to everyone involved. Think about behaviours that will:
   a) make the learning environment productive and comfortable for everyone;
   b) show respect for each person (how to treat each another); and
   c) help the training group to succeed.

3. Share your thoughts on what you are willing to give, as well as what you need from others. The facilitator will write these “Gives” and “Gets” on a flip chart and display them in the training venue.

4. The facilitator will ask you to agree to live by these rules throughout the training. Therefore, make sure that you review the list on the flip chart to see if you need any of the agreements to be clarified or modified.
NOTE TO THE PARTICIPANT

Note that the rule concerning “confidentiality” will be listed as “no gossiping”. Confidentiality is a term used in a therapeutic environment – we are not advocating the establishment of a therapeutic environment here. Nor are we suggesting that the content of the lessons should be kept a secret. Rather we are advocating the respectful behaviour of not talking about one another, in or out of the classroom. Because of the nature of the training, you may find yourselves sharing information which is private, and everyone needs to appreciate the privilege they are being given. Therefore, it is important not to share this private information outside the training.

8.3 Housekeeping

ESTIMATED TIME: 5 minutes

The facilitator will explain the housekeeping rules, where to find the restrooms and what time and where meals will be served.

8.4 Pandora’s box

ESTIMATED TIME: 5 minutes

METHODOLOGY:

1. Sometimes you may not feel comfortable asking questions in front of the whole group, especially those related to sexuality, HIV and AIDS or other STIs. If you find yourself in this situation, you can write the question on a piece of paper and put it in the box.

2. The facilitator will read the questions and respond to them the next day during the morning review.

3. “Pandora’s box” is based on a Greek myth where Pandora, the first woman, was instructed by Zeus not to open a box that was given to her on her wedding day. Curiosity got the best of her and she opened it. Out flew the evils of the world: envy, sickness, hate, disease, etc. She shut the box and one thing remained inside – hope. Therefore, your questions do not represent the evil; they represent hope.

4. By sharing and discussing the questions, there is hope that both you and your learners will get the information you need, in order to make good decisions about sexuality, HIV, safe sexual relationships etc.

5. Please consider using a Pandora’s box/question box in your classroom. The anonymity of your learners is protected, should they want to ask difficult or worrisome questions. This approach in the classroom also gives you an opportunity to research the answers to difficult questions that your learners may ask. If you feel uncomfortable answering a question from one of your learners, you can talk to your colleagues who may be willing to discuss the uncomfortable question with your learners.
MODULE 1: INTRODUCTION TO COMPREHENSIVE SEXUALITY EDUCATION, EXPLORING OUR VALUES, BEHAVIOURS AND ATTITUDES REGARDING SEXUALITY EDUCATION

OUTCOMES

At the end of this module, you will be able to:

• construct a working definition of comprehensive sexuality education to guide discussions and debates during the training sessions;
• identify your personal values regarding sexuality education topics;
• identify the core sexuality education values that the DBE has incorporated into the scripted lesson plans;
• review your personal and professional values;
• understand the importance of providing sexuality education to your learners in an objective, non-judgmental manner, despite your own personal and/or professional values;
• identify the core sexuality education messages to be emphasised throughout the curriculum; and
• understand that one or more of the core messages needs to be integrated into EVERY sexuality education scripted lesson.

ESTIMATED TIME: 30 minutes
1. **BUILDING AN UNDERSTANDING OF COMPREHENSIVE SEXUALITY EDUCATION**

**METHODOLOGY:**

1. The following provides clear explanations of what CSE includes:
   a) DBE (2011) CAPS: Sexuality education (SE) content is included in the subject Life Skills (LS) in the Foundation and Intermediate phases and in Life Orientation (LO) in the Senior and Further Education and Training phases.
   b) The Life Skills and Life Orientation programmes are central to the holistic development of learners. In the LO CAPS, HIV and SE fall under the heading of “Personal and Social Well-being”. Sexuality education is embedded in learning about relationships, gender and power.
   c) UNESCO defines comprehensive sexuality education (CSE) as “a curriculum-based process of teaching and learning that include a focus on the emotional, cognitive, physical and social dimensions or aspects of sexuality. It aims to equip children and young people with knowledge, skills, attitudes and values that will empower them to:
      - realise their health, well-being and dignity;
      - develop respectful social and sexual relationships;
      - consider how their choices affect their own well-being and that of others; and
      - understand and ensure the protection of their rights throughout their lives.”
   d) Kirby describes CSE as “an instruction method based on a curriculum that aims to give students the knowledge, attitudes, skills and values to make appropriate and healthy choices in their sexual lives.”

2. Using the explanations provided in statements above, construct a mind map, in your groups, to show the working definition of comprehensive sexuality education.

3. What are the implications for teaching and learning that are raised in the mind map? Discuss this in your groups.

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2. EXAMINING OUR PERSONAL AND PROFESSIONAL VALUES

In this session, you will be asked to reflect on your personal values in relation to the DBE values regarding sexuality education. It is essential that you work at separating your personal beliefs (including your religious and cultural values) from your professional values. Your work involves working with young people who have the right to scientifically accurate and age-appropriate information regarding their sexual development. They also have the right to medical interventions for adolescent sexual and reproductive health.

OUTCOMES

At the end of this session you will be able to:

- identify your personal values regarding sexuality education topics;
- identify the core sexuality education values that the DBE has incorporated into the scripted lesson plans;
- review your personal and professional values;
- understand the importance of providing sexuality education to your learners in an objective, non-judgmental manner, despite your own personal and/or professional values;
- identify the core sexuality education messages to be emphasised throughout the curriculum; and
- understand that one or more of the core messages needs to be integrated into EVERY sexuality education scripted lesson.

METHODOLOGY:

1. The facilitator will hang three signs on the wall, labelled “AGREE”, “DISAGREE” and “UNCERTAIN” respectively.

2. Your facilitator will read out a series of statements, focusing on one statement at a time. If you agree with it, you should move to the side of the room with the “AGREE” sign. If you do not agree you should move to the side of the room that has the “DISAGREE” sign. If you are not certain, you must stand by the “UNCERTAIN” sign.

3. These statements are the ten values that have been incorporated into the scripted lessons and are promoted by the DBE. As educators, you need to be able to embrace these values, to teach comprehensive sexuality education effectively.

4. As a self-assessment, examine your personal and professional values by responding in writing to the questions listed below:

Questions for reflection: My own values

a) How do your values concerning sexuality education make you an effective educator?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
b) What can an educator do to manage a personal value or belief that is inconsistent with the DBE curriculum?

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________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

c) Have you ever managed personal values or beliefs while teaching a curriculum before? How did you do it?

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________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

d) Is it the educator’s role to be completely non-judgmental? Explain.

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________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
3. THE COMPREHENSIVE SEXUALITY EDUCATION CORE MESSAGES

The core messages are simple value statements that learners can use as reminders of the behaviour changes they will be guided through, by way of the activities in the SLPs. The behaviour changes being targeted through the SLPs will not be changed easily, nor will these changes happen through the content used in the SLPs alone. These messages will be a thread that runs through the structure of the activities for each SLP.

The core messages that the SLPs are centred on are important messages which should be reflected and restated throughout the training. You must ensure that these messages are reinforced in your teaching of the SLPs.

**NOTE TO THE PARTICIPANT**

In this session, you will discuss the core messages. Find ways to make these messages come alive for your learners. The learners should remember and be able to recall these messages easily. Coming up with creative ways of teaching these messages will help your learners to engage easily, and ensure that they remember the messages.

**METHODOLOGY:**

1. For this activity you will be working in groups, preferably according to the phase that you teach.
2. The facilitator will give each group one sheet of flip chart paper, coloured pens and other materials to make a poster. Each group will pick one core message.
3. Pick one person in the group to be the timekeeper.
4. Each group has ten minutes to design a poster using the core message. The core message should fill the entire sheet of paper. Use the materials available to make the poster bright and colourful.
5. After decorating the poster, compose a rap/song about the core message that is no more than 90 seconds long. Practise the rap/song, with the necessary sound effects.
6. Each group will have an opportunity to present their poster and perform their rap/song.
7. After the presentations have been done, stick your poster up on the wall, where they will remain for the rest of the training.
8. Discuss how this activity can be done with your learners.
9. All of the scripted lessons link to at least one or more of the core messages. These messages should be repeated at every opportunity with your learners – at the beginning, middle and end of every lesson.
MODULE 2: EXPLORING OUR ATTITUDES TO OUR OWN SEXUAL DEVELOPMENT

OUTCOMES

At the end of this module, you will be able to:

• list the dimensions of psychosexual development;
• pair the dimensions of psychosexual development with the correct definitions;
• have a better understanding of the psychosexual development of your learners; and
• reflect on your own psychosexual development.

ESTIMATED TIME: 30 minutes

1. RECONSTRUCTING THE SIX DIMENSIONS OF PSYCHOSEXUAL DEVELOPMENT

ESTIMATED TIME: 15 minutes

METHODOLOGY:

1. Your facilitator will split you into groups of no more than five people and give each group an envelope containing a table that has been cut into pieces.
2. First, find the headings of the table and then arrange the explanations under the corresponding headings.
3. The first group to reconstruct the table correctly will win a small prize.

NOTE TO THE PARTICIPANT

By reflecting on our own psychosexual development, we can enhance our understanding, not only of our own development process, but also that of our learners. Psychosexual development is a critically important area of human growth, whether a person marries or remains single. We can say that psychosexual development is another word for “growing up” in our relationships. It is our personal journey toward integration as embodied human beings.

Psychosexual development refers to that dynamic interplay of experiences, circumstances, phases, tasks, awareness, and decisions that lead us toward mature and loving relationships. It is a process of growth that embraces all aspects of our human reality.

Healthy psychosexual development includes six dimensions. When any of these six dimensions are absent or limited, or if they develop in unhealthy ways, our journey toward sexual integration will in some way be hindered or slowed down, leading to our sexual energy being expressed in ways that are harmful to others and to ourselves. To become psychosexually mature, a person must pass through a series of stages and phases, each comprising developmental tasks that are normal and natural.
2. **THE STAGES OF ADOLESCENCE**

Adolescence refers to the period of human development and growth that takes place between childhood and adulthood. Adolescence begins at around 10 years old and ends around 21 years old.

Adolescence can be broken into three different developmental stages: early adolescence, middle adolescence, and late adolescence.

This understanding of the stages of adolescence has implications for how we consider the development of learners within the different age groups and how the grades are organised in each of the phases. In our education system, the different phases are organised as follows:

<table>
<thead>
<tr>
<th>Phase</th>
<th>Grades</th>
<th>Age Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intermediate Phase</td>
<td>4–6</td>
<td>10–12 years old</td>
</tr>
<tr>
<td>Senior Phase</td>
<td>7–9</td>
<td>13–15 years old</td>
</tr>
<tr>
<td>Further Education and Training (FET) Phase</td>
<td>10–12</td>
<td>16–18 years old</td>
</tr>
</tbody>
</table>

There may be slight discrepancies in age within these phases depending on the age that learners started school. The implications of the different stages of development and the corresponding ages are elaborated in the preamble of the educator guide for each phase. The stages of development help to determine the desired learning outcomes, the content of the lessons, the teaching approaches and what kind of learning styles can be incorporated in the activities.

**METHODOLOGY:**

1. The facilitator will divide you into three groups and ask one person in each group to read the text provided for each stage. Everyone else in the group must listen closely and memorise the key points/words for each stage. You may refer to Appendix 7: *The stages of adolescence* if you struggle to recall the points.
2. The facilitator will set up three flip charts with the following headings: “Early Adolescent Stage”, “Middle Adolescent Stage” and “Late Adolescent Stage”.
3. Start at one flip chart and write down the corresponding age group for the stage and the associated characteristics.
4. You will have 2 minutes to write as many points as you can recall for each stage.
5. Move on to the next flip chart and add the characteristics that you think are associated with that stage. Do not repeat what the previous group has written; however, if you think the previous group got the age group wrong, you may add the age group that you think is correct to the chart.
6. After 2 minutes, move on to the next flip chart and do the same at which point each group should have had a turn to add to each flip chart.
7. The facilitator will review each of the flip charts with you and respond to any questions.
MODULE 3: HUMAN SEXUALITY AND COMPREHENSIVE SEXUALITY EDUCATION PEDAGOGY

1. HUMAN SEXUALITY DISCUSSION: BINARIES AND BOXES

Comprehensive sexuality education enables children and young people to develop relevant, accurate and age-appropriate knowledge, attitudes and skills, and encourages positive values, including respect for human rights, gender equality and diversity. The importance of learning the attitudes and skills that contribute to safe, healthy and positive relationships is a critical aspect of learning in comprehensive sexuality education, and the opportunity to practise these attitudes and skills becomes an indispensable part of discussions in the classroom.

Educators need the appropriate teaching methods and approaches to facilitate learning of the content covered in comprehensive sexuality education. When educators do not have adequate knowledge and the appropriate teaching methods and approaches, the danger is that they may be tempted to shift focus from comprehensive sexuality education to sex education. It is vital to note that comprehensive sexuality education is NOT sex education.

This module will cover the importance of the relevant pedagogical approaches, content and skills that have been chosen to assist you to teach your learners effectively.

NOTE TO THE PARTICIPANT

If you are to succeed in teaching CSE, you need to understand the terms that you are using and be able to explain the content using the correct terms. This activity may take you out of your comfort zone, as it discusses topics such as sex, gender, sexual orientation, sexual play, dual contraception, delay of sexual debut, the identification and symptoms of STIs, HIV and AIDS. However, the goal is to increase the your knowledge and comfort, so that when you work with learners, you do not avoid discussing the very things learners need to know about most!

This section of the training has been designed to share knowledge about the behaviours that are a greater risk for learners and to elaborate on areas where learners are most vulnerable regarding sexual and physical abuse. In light of this intention, the concept of “sexual play” is discussed. You must not, under any circumstance, teach these concepts to your learners. They are not part of the sexuality education content curriculum.

NB: This session is for your own information and not a part of the SLPs.
OUTCOMES

At the end of the session, you will be able to:

- define the terms sex, gender, sexual orientation and sexual play;
- differentiate between sex, gender and sexual orientation;
- identify risky sexual behaviours and how to minimise that risk; and
- recognise that understanding the different terminology and acknowledging that your learners have different sexual orientations and experiences, will help you to teach sexuality education effectively.

ESTIMATED TIME: 45 minutes

METHODOLOGY:

1. The facilitator will take you through an exercise to better your understanding of the definition of the terms related to sexuality. Note that this activity is not appropriate for your learners; it is only suitable for this training environment.


   “...a central aspect of being human throughout life encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, roles and relationships. While sexuality can include all of these dimensions, not all of them are always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, cultural, legal, historical, religious and spiritual factors.”

Below is the ITGSE definition:

Comprehensive sexuality education (CSE) is a curriculum-based process of teaching and learning about the cognitive, emotional, physical and social aspects of sexuality. It aims to equip children and young people with knowledge, skills, attitudes and values that will empower them to: realize their health, well-being and dignity; develop respectful social and sexual relationships; consider how their choices affect their own well-being and that of others; and, understand and ensure the protection of their rights throughout their lives (ITGSE, 2018: 16)

2. This activity is a model of sexuality education terms that was developed to clarify definitions.

3. The facilitator is going to draw a large square divided into four sections, each with one of the following as headings: sex, gender, sexual orientation and sexual play.

4. The facilitator will ask you to share what comes to mind when the word “sex” is mentioned.

   Sex refers to the biological characteristics that define human beings – whether male or female.

5. Under the section labelled “SEX” the facilitator will write down the biological characteristics that distinguish male and female human beings.

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3. This definition does not represent an official WHO position, and should not be used or quoted as WHO definition.

6. Below this, the facilitator will write a sub-heading, “INTERSEX”.

Intersex refers to people with reproductive or sexual anatomy and/or a chromosome pattern that does not fit the typical definitions of female or male. For example, a person may have genitalia that appear to be female externally but having mostly male-typical anatomy internally. Sometimes a person may have genitalia that fall between the typical male and female anatomy, so it is hard to define whether the person is female or male. See Appendix 8.

7. The second section is labelled “GENDER”. Share what you understand by the term “gender” and what is considered out of the norm regarding gender. The facilitator will write some of your examples on the chart.

8. The facilitator will take a moment to discuss how society dictates gender norms and explain the terms transgender, transvestite and transsexual.

9. The third box is labelled “SEXUAL ORIENTATION”. Share what you understand by the term “sexual orientation”.

10. The facilitator will ask you to raise your hand if you are in a relationship and may ask a few of you to describe the kind of things you do with your partners. After a few people have shared some examples the facilitator will take a moment to explain terms like homosexual, heterosexual and bisexual and clarify that relationships are about more than just sex.

11. The sexual relationship is not where the risk of pregnancy, HIV and others STIs lies, even in a homosexual relationship. The risk lies in the sexual behaviours that are practiced within sexual relationships. Many relationships include the practice of sexual play. We need to discuss sexual play in the context of the terms: sex, gender and sexual orientation.

12. Please note that although this is part of the training content, it must not, under any circumstance, be taught in the classroom. This activity is designed to share knowledge about the behaviours that are a greater risk for learners, and to elaborate on areas where learners are most vulnerable regarding sexual and physical abuse.

13. The following activity engages you in a discussion about these terms. The last box is labelled “SEXUAL PLAY”. The facilitator will ask which body parts can be used in sexual play (e.g. penis, vagina, breasts, mouth and anus). You will discuss which parts can be used together: e.g. penis and vagina; penis and breasts; penis and mouth; anus and penis, and so on. The facilitator will take a moment to discuss anal sex.

14. For each combination, ask if it is a low-risk activity or high-risk activity. Talk about how to reduce risk (e.g. use condoms and get tested for STIs and HIV).

15. The facilitator will ask you to share assess each combination, i.e. whether it is a low-risk activity or a high-risk activity. Share your thoughts on how you can reduce risk during sexual play (e.g. use condoms and get tested for STIs and HIV).

16. It is important to the importance of understand these terms. Remember that the risk of pregnancy, and contracting HIV and other STIs does not lie in the type of sexual relationship, sex, gender and sexual orientation BUT in the behaviours practiced within the relationship.
2. EFFECTIVE PEDAGOGICAL STRATEGIES FOR SEXUALITY EDUCATION

In this activity, the effectiveness of participatory learning and teaching methods in teaching CSE is emphasised. Participatory teaching is a reflective teaching method and involves creating opportunities for learners to interact and work together towards solving a problem or understanding a subject or topic. The approach taken is learner-centred, where learners are taken through a process of constructing knowledge for themselves and encouraged to consider their own, immediate contexts. The teaching approaches and learning styles selected motivate learners to draw on their own experiences and skills to solve problems, using everyday situations or interests as part of their learning.

The training models within this activity explore the nature and type of teaching methods that you can use in the classroom to facilitate participatory learning.

OUTCOMES

At the end of this session, you will be able to:

• explain the importance of using interactive methods when teaching CSE;
• describe interactive and participatory teaching methodologies; and
• discuss the key factors to ensuring the success of CSE using participatory teaching methodologies.

ESTIMATED TIME: 30 minutes

2.1 Benefits of interactive teaching and learning for comprehensive sexuality education

METHODOLOGY:

1. Brainstorm on what you understand by interactive or participatory teaching. The facilitator will write down your responses on a flip chart.
2. The facilitator will ask you to give examples of interactive or participatory methods that can be used in the classroom and write down your responses on a flip chart.
3. Using Appendix 9: Effective pedagogical strategies for comprehensive sexuality education as a reference, work in pairs and choose a method from the list and discuss how it works. The facilitator may ask a few of you to share what you have discussed, so be prepared to share.
4. The whole group will take a moment to discuss the extent to which you are able to use these methods in the classroom and identify the successes and challenges of these methods.
5. What are the implications of these methods for classroom management? The whole group will discuss this question by answering the following questions:
   a) How do these methodologies affect classroom management?
   b) How best can you ensure that you are able to manage your class when you use these methodologies?
6. The facilitator will end the discussion by explaining the importance of interactive methods in CSE and the
key factors required to ensure the success of CSE.

2.2 Creating a safe learning environment and the role of the educator

An environment that is conducive to learning is an environment devoid of any physical intimidation and emotional frustration, which allows for a free exchange of ideas. This is an important consideration when teaching comprehensive sexuality education.

Part of creating a safe learning environment is providing relevant content, clear learning goals and feedback, opportunities to build social skills, and strategies to help students succeed. In a safe, structured and open learning environment, learners feel free and are responsible for their own learning, while feeling comfortable enough to participate fully in group or individual activities.

OUTCOMES

At the end of this session, you will be able to:

• explore your level of comfort when it comes to teaching CSE;
• explain how to manage the classroom for the effective implementation of the SLPs;
• discuss the role of educators in modelling behaviour, attitudes, etc.;
• discuss the Child Protection and Disclosure Protocol;
• discuss the scripted lesson plans in the context of your role as an educator and how you can create a safe space for learners in your classroom; and
• discuss the Disclosure Protocol and how it is an important tool when learners are exposed to sexuality education content.

ESTIMATED TIME: 1 hour

NOTE TO THE PARTICIPANT

This activity, like lessons on sexuality education, can be extremely challenging for you as participants, since it may push comfort levels and personal boundaries to their limits. Should you not feel comfortable to participate in the activity, you will be allowed to observe and share your thoughts with the rest of the group.

“Walk the Line” is an activity to build empathy and understanding through movement and reflection. Some strong feelings may come up like sadness or anger. All feelings are important. We need to be respectful and caring about one another’s feelings so that everyone feels safe while we do this activity.

2.2.1 Discomfort and sexuality education: Walking the line

ESTIMATED TIME: 1 hour

METHODOLOGY:

1. Teaching lessons on sex and sexuality is not easy. We all have different levels of comfort, knowledge, skills and values that may hinder or help us to teach about sex and sexuality, successfully and without any bias.

2. This activity will endeavour to create an experience in which everyone will be confronted with different levels of uneasiness, feelings of dissonance and differences of opinion. Remember we are all in the same position. Once we have experienced and have managed our feelings in this activity, you will have a better understanding of your levels of discomfort when teaching sexuality education lessons.

3. The facilitator will place a strip of tape on the floor in the middle of the room. The facilitator will split you into two groups and ask each group to face each other at opposite ends of the room.

4. The facilitator will read out a series of statements, ranging from less to more personal. If you have experienced or identify with the statement, you should silently take one step towards the tape that has been placed on the floor and stop.

5. If you do not feel comfortable to move forward, you can remain in your position.

6. Take note of how it feels to move towards the tape and how it feels to watch other people move towards the tape. Observe who is with you and who is not with you.

7. After about five seconds of silent reflection, return to your starting position for each new statement.

8. At the end of this activity you will return to your seats and reflect on the activity with the facilitator.

9. The facilitator will use the following questions as prompts to guide the discussion:
   a) Can anybody tell me what just happened?
   b) How did you feel doing this activity?
   c) What would you do differently?
   d) Why do you think empathy is important for a teacher/parent/leader?
   e) What do you like about an environment where empathy is part of the way people are?
   f) How are you feeling right now?

NOTE TO THE PARTICIPANT

The activity was designed to show you that as much as you have been through some good and bad experiences, so have your learners. It is important for you not to judge, and to be empathetic at all times. It is important for you to identify the available resources within the DBE where your learners can be referred for further assistance.
2.2.2 Alternative activity: I love my neighbour

**METHODODOLOGY:**

1. For this activity there will be chairs set up in a circle, facing the centre of the circle. Take a seat on the chairs in the circle and note that one person will be left without a seat.

2. The facilitator will put a list of statements in the middle of the circle.

3. The person without a seat will stand in the middle of the circle and pick up one statement from the list and read it out to the entire group. For example: “I love my neighbour who has a car.” Anyone who is seated for whom this statement is true, must stand and move to another chair. No one is allowed to remain in their chair.

4. Because the person in the middle of the circle is also looking for a chair, this will leave one person without a chair. The person who does not have a seat after everyone moves, must go to the middle and continue the game by reading another statement.

5. The game continues so that everyone gets at least one turn to make a statement. Remember that not everyone will have a chance to read a statement due to time constraints.

6. The facilitator will lead a group discussion to wrap up the activity, using the questions below as prompts:
   a) What did you learn about the other participants?
   b) Were you surprised when people jumped up for certain prompts?
   c) How did it feel to be up there alone?
   d) How did it feel when you discovered others shared your experience?
   e) Why do you think empathy is important for a teacher/parent/leader?
   f) What do you like about environment where empathy is part of the way people are?
   g) How are you feeling right now?
2.3 Discussion on the role of educators in modelling behaviour and attitudes

**ESTIMATED TIME:** 30 minutes

**METHODOLOGY:**

1. Reflect on the previous activity and identify what it says about your role as educators.
2. Reflect on your own role as an educator in modelling behaviour and changing attitudes.
3. The facilitator will lead you in a discussion of the role of educators in modelling behaviour and changing the attitudes of their learners.
4. In the space below write down what you consider your role to be, in modelling behaviour and changing the attitudes of your learners.
5. The facilitator will lead you in a discussion of how your role applies to comprehensive sexuality education.

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2.4 Creating a safe space for learners in the classroom

**ESTIMATED TIME:** 15 minutes

**METHODOLOGY:**

1. Work in pairs and discuss the following:
   a) What a “safe space for learners” means to you.
   b) How you can create a safe space for learners in your classrooms.
2. The elements of a safe classroom environment are:
   a) ensuring that all learners respect each other regardless of their background;
   b) being non-judgemental towards learners;
   c) allowing learners to express their views without putting them down;
   d) using disciplinary measures, which allow learners to grow and learn from their mistakes without making the situation worse;
e) responding to all questions regardless of what your perceptions of the questions are; and
f) building a rapport with learners so that they can feel confident to approach the educator with any challenge they are facing.

3. Write down your thoughts about how to create a safe space for your learners below:
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NOTE TO THE PARTICIPANT
CSE goes hand-in-hand with creating a safe space where learners feel free to ask questions and participate in their learning, without fear of judgement. Once learners feel free to share their concerns with their educators, they will start disclosing their challenges to them. Therefore, you need to familiarise yourselves with the Disclosure Protocol. See Appendix 10: Child Protection and Disclosure Protocol.

2.5 Child Protection and Disclosure Protocol

ESTIMATED TIME: 30 minutes

METHODOLOGY:

1. In pairs, discuss your understanding of child protection and disclosure in the context of child abuse.
2. The facilitator may ask a few people to share what they have discussed with the rest of the group, so be prepared to share.
3. Refer to the Child Protection and Disclosure Protocol (Appendix 10) and discuss how you can use the protocol during teaching and learning.
3. LESSON PRACTICE ASSIGNMENT

ESTIMATED TIME: 10 minutes

METHODOLOGY:

1. Group yourselves according to the grade of LO or LS that you teach.
2. Most of the training will be focused on practising teaching the SLPs, so you will be given homework, in the form of an SLP to prepare for presentation.
3. The SLPs will be allocated as follows:
   - Grade 4: Lesson 4.2: Respect the bodies of others
   - Grade 5: Lesson 5.1: Body image
   - Grade 6: Lesson 6.1: Body image: My body is changing
   - Grade 7: Lesson 7.2: Appreciation and acceptance of self and others
   - Grade 8: Lesson 8.1: Setting goals and reaching your potential
   - Grade 9: Lesson 9.1: Setting goals and reaching your potential
   - Grade 10: Lesson 10.5 My changing life roles and life goals
   - Grade 11: Lesson 11.4: Living a balanced healthy lifestyle, staying in control
   - Grade 12: Lesson 11.2: Human factors affecting our health and what we can do about them
   - Take time to read the lesson that you have been allocated as you will be presenting it to the rest of the group.
4. The facilitator will demonstrate one of the SLPs before you present the one you have been allocated.
4. CLOSING: REFLECTION ON DAY 1

OUTCOMES

At the end of this session, you will be able to:

- understand the content covered, through reflection; and
- share feedback on the activities of Day One.

ESTIMATED TIME: 5 minutes

METHODOLOGY:

1. Reflect on the following:
   a) What did we achieve today?
   b) What did we agree on in the session?
   c) How are you going to use what you learned today?

2. The facilitator will ask all the participants to stand close together in a circle. They will ask one person to place their right arm, outstretched, into the middle of the circle and say something that they found enjoyable about the day and then something that they found challenging. Use the phrases: “I liked it when...” and, “I did not like it when...”

3. The facilitator will ask another person to do the same, i.e. to place their right hand on top of the hand already in the middle, and repeat what the first person did by sharing what they liked and did not like.

4. You will continue this process, around the circle, until everyone has their right hands placed on top of one another’s hands in the circle to form a tower.

5. This tower of hands represents the strength of working together as a group.
DAY TWO
Scripted Lesson Plans for Comprehensive Sexuality Education in Life Skills and Life Orientation
## DAY TWO TRAINING AGENDA

<table>
<thead>
<tr>
<th>Module</th>
<th>Schedule</th>
<th>Time</th>
<th>Topic</th>
</tr>
</thead>
</table>
| **WELCOME AND OPENING** | 08:00 – 08:15 | 15 mins | Welcome to Day 2  
• Review of Day 1  
• Pandora’s box  
• Overview of the agenda for Day 2 |
| **MODULE 4: OVERVIEW OF CAPS AND SCRIPTED LESSONS PLANS (SLPs)** | 08:15 – 08:30 | 15 mins | Teaching using scripted lesson plans in line with CAPS  
The structure of the SLPs |
| | 08:30 – 09:15 | 45 mins | **Lesson demonstration:**  
Lesson 4.1: Why should I respect others and myself?  
Lesson 7.1: Setting goals and reaching your potential  
Lesson 11.1: My priorities and life goals |
| | 09:15 – 10:00 | 45 mins | **SLP practice preparation:** Lessons 4.2, 5.1, 6.1, 7.2, 8.1, 9.1, 10.5, 11.4 and 12.2 |
| 10:00 – 10:30 | 30 mins | **TEA BREAK** |
| 10:30 – 13:30 | 3 hours 30 mins | **SLP practice session:** Lessons 4.2, 5.1, 6.1, 7.2, 8.1, 9.1, 10.5, 11.4 and 12.2  
**Debrief of SLP practice session:** 4.2, 5.1, 6.1, 7.2, 8.1, 9.1, 10.5, 11.4 and 12.2 |
| 13:30 – 14:15 | 45 mins | **LUNCH BREAK** |
| **MODULE 5: GENDER NORMS AND GENDER-BASED VIOLENCE** | 14:15 – 15:45 | 30 mins | Power and control: How men and women mistreat each other |
| **MODULE 6: HEALTH AND ENVIRONMENTAL RESPONSIBILITY** | 15:45 – 16:15 | 30 mins | **Lesson demonstration:**  
• Lesson 4.9: Transmission of HIV  
• Lesson 8.5: What young adults need to know about HIV/AIDS  
• Lesson 10.8: I know what I want |
| | 16:15 – 17:00 | 45 mins | **SLP practice preparation:** Lessons 4.7, 5.9, 6.7, 7.3, 8.4, 9.8, 10.3, 11.7 and 12.3  
• Lesson 4.7: Culture, society and sexuality  
• Lesson 5.9: Dealing with the stigma of HIV  
• Lesson 6.7: Bullies can change  
• Lesson 7.3: Is there a difference between gender and sex?  
• Lesson 8.4: Sexuality is more than sex  
• Lesson 9.8: Sexual consent  
• Lesson 10.3: Gender, equality and healthier relationships  
• Lesson 11.7: Gender, power and violence  
• Lesson 12.3: STIs: Protecting ourselves, protecting our future |
| | 17:00 – 17:30 | 30 mins | **SLP practice session:** Lessons 4.7, 5.9, 6.7, 7.3, 8.4, 9.8, 10.3, 11.7 and 12.3 |
| | 17:30 – 17:45 | 15 mins | **Debrief of SLP practice session:** 4.7, 5.9, 6.7, 7.3, 8.4, 9.8, 10.3, 11.7, and 12.4 |
17:45 – 18:00  15 mins  

Lesson practice assignment for Day 3:
• Grade 4: Lesson 4.3: Dealing with conflict
• Grade 5: Lesson: 5.2A: I can choose my relationships
• Grade 6: Lesson 6.2: Body image: “I am who I am”
• Grade 7: Lesson 7.5: Healthy and unhealthy relationships
• Grade 8: Lesson 8.3: Making healthy sexual choices and knowing your limits
• Grade 9: Lesson 9.5: One partner at a time
• Grade 10: Lesson 10.3: Gender, equality and healthier relationships
• Grade 11: Lesson 11.7: Gender, power and violence

18:00  END OF DAY TWO

1. WELCOME TO DAY 2

OUTCOMES

At the end of this session, the you will be able to:
• recap what you have learned during Day 1;
• ask questions related to comprehensive sexuality education and HIV prevention; and
• review the agenda for Day 2.

ESTIMATED TIME: 15 minutes

1.1 Review of Day 1

METHODOLOGY:

1. The facilitator will ask you to share one thing that you remember from Day 1.
2. You will also use this time to recite the core messages, which you presented on Day 1.

1.2 Pandora’s box

METHODOLOGY:

1. The facilitator will remind you of the Pandora’s box/question box. If there are any questions in the box, the facilitator will respond to the questions during this time.
2. The facilitator may not have time to answer all the questions during this time, but they will find time to address any outstanding questions during the course of the day.

1.3 Overview of the agenda for Day 2

METHODOLOGY:

1. The facilitator will go through the agenda for Day 2 with you so that everyone is clear on what they will be doing throughout the day.
2. If any changes have to be made to the agenda, this is the time to address those changes.
MODULE 4: TEACHING USING SCRIPTED LESSON PLANS IN LINE WITH CURRICULUM AND ASSESSMENT POLICY STATEMENTS (CAPS)

The SLPs are comprehensive lessons with activities and assessment tasks that help educators to teach content specifically related to sexuality education (SE) in line with their annual teaching plans (ATPs). The SLPs have been designed to align with the Life Skills and Life Orientation CAPS outcomes, topics and subtopics, and the content that educators need to teach for the year.

The activities in each SLP prescribe the kind of teaching approach, learning strategies and assessment types that will support you to teach sexuality education in an age-appropriate and accurate manner.

The SLPs target a change in certain behaviours and provide core messages that learners can remember when thinking about their sexual health. Through the SLP activities learners are encouraged to think deeply about how they can stay safe by avoiding risky sexual behaviours.

The purpose of providing scripted lessons is that all the necessary lesson planning and preparation has been done for you, to support you in your teaching of comprehensive sexuality education (CSE) content.

NOTE TO THE PARTICIPANT

This session is a repeat of what was presented on Day 1. It is important for you to internalise how the SLPs are structured to ensure that you maintain fidelity in your implementation. The structure of the SLPs will be explained in the context of the CAPS. Therefore, you will be shown the topics addressed in the SLPs against the actual topics in the CAPS.

1. THE STRUCTURE OF THE SLPs

ESTIMATED TIME: 15 minutes

METHODOLOGY:

1. Turn to the SLP that the facilitator has selected in your educator guide. The facilitator will use this lesson to explain how an SLP is structured.
2. The facilitator will go through the entire structure of the SLP, step by step, (i.e. CAPS topics addressed by the SLPs, activities, assessments etc.).
3. Open the CAPS document and identify the topics, which have been covered by the SLP, and indicate in which term the SLP must be taught.
4. Ask questions as the facilitator goes through each of the sections.
5. It is important to draw the connections between the steps outlined for each lesson and the corresponding handouts and the posters, which are attached to the lesson plan.
6. Please note that it is imperative to follow the steps given in the SLPs and to take note of the participatory methods that are employed by the prescribed steps.
7. Discuss which methods are the most effective in the classroom, especially for the assessment tasks.
NOTE TO THE PARTICIPANT

The most important aspect of this training is showing you how to use the SLPs. The practice of these lessons in the training will be drawn from the demonstrations that the facilitator will do.

This lesson is likely to take an hour. However, even though the lessons are designed to take one hour, there are natural breaks that show where the lesson can be stopped, if necessary. Lesson demonstrations will be followed by a discussion and a lesson practice session.

1.1 Demonstration of a scripted lesson plan

OUTCOMES

At the end of the session, you will be able to:

- understand how to present a lesson using the SLPs; and
- experience participatory teaching methods as shown in the SLP.

ESTIMATED TIME: 45 minutes

METHODOLOGY:

1. The facilitator will demonstrate a lesson in its entirety, using one of the lessons below according to which phase you teach:
   - Lesson 4.1: Why should I respect others and myself?
   - Lesson 7.1: Setting goals and reaching your potential
   - Lesson 11.1: My priorities and life goals

2. While the facilitator demonstrates the lesson, you will play the role of the learners in the class.

3. You will find the steps that the facilitator is using in the educator guide. Observe the methodologies that the facilitator uses during the lesson.

4. The facilitator will conduct a debrief of the lesson by asking the following questions:
   a) What was your impression of the lesson?
   b) What kind of teaching and learning methodology was used?
   c) How was the participation level of the “learners”?
   d) What are the challenges that you see with the methodologies used?
   e) How might you adapt the methodologies in your classroom?

5. You will now prepare a lesson to practise from the SLPs.
1.2 SLP practice preparation: Lessons 4.2, 5.1, 6.1, 7.2, 8.1, 9.1, 10.5, 11.4, and 12.2

**NOTE TO THE PARTICIPANT**

After observing the demonstration, you will now prepare to practise teaching a lesson from the SLPs. Ensure that you have copies of the SLPs for your grade level. You will prepare by reading through the lesson and discussing how you can implement the lesson. Note the following:

- In most schools, a period lasts for 30–45 minutes. The participants should cover their lessons within that specified period length.
- The SLP shows where a break in the lesson can be taken, if necessary.

**OUTCOMES**

At the end of this session, you will be able to:

- read through and plan to teach an SLP.

**ESTIMATED TIME:** 45 minutes

**METHODOLOGY:**

1. Split into groups according to the grade level that you teach. The facilitator will allocate the lessons below according to the respective grade level:
   a) Grade 4: Lesson 4.2: “Respect the bodies of others”
   b) Grade 5: Lesson 5.1: Body image
   c) Grade 6: Lesson 6.1: Body image: “My body is changing”
   d) Grade 7: Lesson 7.2: Appreciation and acceptance of self and others
   e) Grade 8: Lesson 8.1: Setting goals and reaching your potential
   f) Grade 9: Lesson 9.1: Setting goals and reaching your potential
   g) Grade 10: Lesson 10.5 My changing life roles and life goals
   h) Grade 11: Lesson 11.4: Living a balanced healthy lifestyle, staying in control
   i) Grade 12: Lesson 12.2: Human factors affecting our health – and what we can do about them

2. Your task is to prepare the lesson as if you are teaching your learners. Those not teaching the lesson will play the role of the learners. The lessons have been created to assist you with teaching CSE content. Each member of the group should get an opportunity to teach by the end of the workshop. Prepare the lesson in your group and choose the person who is going to present it.

3. Read the lesson through from beginning to end and then prepare to teach it. One person will be the educator and the rest of the group, the learners.
4. It is important to use this resource when preparing for the lesson. Remember that the scripted lesson plans are meant to make your work easier. Follow the steps systematically.

5. Note the pedagogical strategies used in the lesson. After the lesson presentation, the person presenting will be asked to list these strategies on a flip chart.

6. The facilitator will move around the room, answering any questions and making sure that you are following the steps of the lesson.

7. Prepare your lesson to be conducted within a 30-minute period. Inform the participants that they should prepare their lessons to be conducted within a 30-minute period.

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**NOTE TO THE PARTICIPANT**

You will practice your lessons in groups and then present to the rest of the participants. Presentation of the lessons will be through the *fishbowl technique*. This calls for your group to play the role of a class and to conduct the lesson among yourselves, while your colleagues observe and take notes on the lesson demonstration. After all the groups have presented, the facilitator will ask for comments on each of the presentations. You are encouraged to engage with each other, on each of the lessons, and give constructive feedback, which will be helpful to your colleagues.

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1.3  **SLP practice session: Lessons 4.2, 5.1, 6.1, 7.2, 8.1, 9.1, 10.5, 11.4 and 12.2**

**OUTCOMES**

At the end of this session you will be able to:

- demonstrate your ability to implement an SLP; and
- give and receive feedback on the lessons you are presenting and on the lessons presented to you.

**ESTIMATED TIME:** 3 hours

**METHODOLOGY:**

1. In your group, the person who has been chosen to play the role of the educator should teach the lesson. The rest of your group will play the role of the learners. Your group should be positioned in such a way that everybody else in the room is able to see you.

2. The person selected to lead the lesson should follow the steps of the SLP and use what they learned from the practice session.

3. The rest of the participants will note their observations as the lesson progresses, using *Appendix 11: Observer or “critical friend” checklist*, as a guide. Their notes will serve as an evaluation of what they have observed in the lesson presentation and how well the educator from your group followed the steps in the SLP.

4. As soon as the lesson is finished, fill out your own observer checklist. You will also use *Appendix 11: Observer or “critical friend” checklist* and you will have 5 minutes to do this.

5. The facilitator will ask you to share your observations. In particular, you will give feedback on:
a) the methodologies used during the lesson;
b) the implications of these methodologies for classroom management;
c) how these methodologies affect classroom management;
d) how best to manage the class when using these methodologies;
e) whether the steps from the SLP were followed; and
f) one thing that went well or one thing that could be improved.

6. The facilitator will summarise all the observations, highlighting what the educator, from the group presenting, did well and areas where they would like to see improvement.

7. Each of the practice groups will take turns to present the lesson to all of the participants.

1.4 Debrief of SLP practice session: 4.2, 5.1, 6.1, 7.2, 8.1, 9.1, 10.5, 11.4 and 12.2

OUTCOMES
At the end of the session, you will be able to:

- consolidate the feedback from the practice session; and
- identify areas for improvement.

ESTIMATED TIME: 30 minutes

METHODOLOGY:

1. Share all the successes that you identified from the SLP practice session.
2. Share all the challenges that you identified from the SLP practice.
3. The facilitator will note all your observations on a flip chart and add their own observations as well.
4. The facilitator will lead you in a discussion on the value of applying the methodologies used in the classroom and how best to do so.
MODULE 5: GENDER NORMS AND GENDER-BASED VIOLENCE

This is an important section that pertains to content about gender norms and gender-based violence (GBV) that is a part of the CSE content within the SLPs.

OUTCOMES

At the end of the session, you will be able to:

• discuss the concept of power and control as a dynamic of Gender based violence;
• describe the terms gender, gender norms, gender based violence and power and control;
• think about the ways men and women mistreat each other; and
• distinguish between mistreatment, using physical force and other forms of abuse.

ESTIMATED TIME: 30 minutes

1. DEFINITION OF TERMS

• “Gender” refers to the social differences between males and females. It is different from “sex,” which refers to whether someone is biologically male or female.

• Gender norms are behaviours or attributes that society attributes to a particular sex. Gender norms lead to the formation of gender roles, which are the roles males and females are expected to take in society.

• These gender roles and norms have changed significantly from culture to culture over the years and continue to evolve. (https://www.theclassroom.com/what-is-a-gender-norm-12084306.html)

• Gender-based violence (GBV) is violence directed against a person because of that person’s gender or violence that affects persons of a particular gender disproportionately. Examples of gender-based violence includes all acts of physical, sexual, psychological and economic violence that occur within the family, domestic unit, or between intimate partners. There are many different forms of violence, which you can read more about here: https://www.saferspaces.org.za/understand/entry/what-is-violence.

• All these types of violence can be – and almost always are – gendered in nature, because of how gendered power inequalities are entrenched in our society.

2. POWER AND CONTROL: HOW MEN AND WOMEN MISTREAT EACH OTHER

This is an important section that pertains to content about gender norms and gender-based violence (GBV) that is not a part of the CSE content, as outlined in the SLPs, but that is necessary as a foundation for engagement with the SLP content.

NOTE TO THE PARTICIPANT

The objective of this activity is to create awareness of how men and women mistreat each other. Please take care and be gentle with each other when doing this activity to avoid causing harm.
METHODOLOGY:

1. In this session you will be thinking through and discussing how men and women mistreat each other. Everyone has seen – perhaps in their own families and neighbourhoods – men mistreating women (because they are women) and at times, women mistreating men, although this is less common.

2. Think of all the different ways that men and women mistreat each other. The facilitator will write your responses on a flip chart.

3. Suggest both physical and non-physical forms of mistreatment. Non-physically violent forms of abuse are often emotional, psychological or financial.

4. Emotional and psychological abuse, committed by any person regardless of their gender, may include:
   a) telling a person that they are ugly or useless;
   b) denying a person love and affection;
   c) humiliating a person in front of others;
   d) trying to control a person through unreasonable demands, such as:
      • forbidding them from leaving the house or property;
      • forbidding them from seeing their family and friends; or
      • insisting that they report what they are doing, every time they leave the home;
   e) refusing to help in any way with household duties, including typically gendered roles (i.e. things that are so-called “men’s/women’s jobs”);
   f) preventing a person from speaking to other people;
   g) preventing a person from working;
   h) damaging a person’s belongings, property, or that of someone they love, in order to hurt them, e.g. tearing up a favourite dress or beating the dog;
   i) refusing to use condoms when their partner wants to, perhaps while engaging in sex with other partners outside of the relationship;
   j) forbidding their partner from using contraception, perhaps by tearing up their clinic card to limit their access;
   k) calling a person names and shouting at them;
   l) turning a partner/spouse and the children out of the house or telling them to return to their parents;
   m) boasting in front of their partner/spouse about being in relationships with other people (extramarital or outside their relationship) or bringing the person they are in a relationship with to their home and asking their partner/spouse to sleep on the floor while they have sex with the person on their bed;
   n) endless nagging, etc.

5. Financial abuse, committed by any person regardless of their gender may include:
   a) refusing to give a person enough money to feed the household or pay bills, but having money to spend on alcohol and cigarettes or presents for the person/people they are having an affair with;
   b) taking all a person’s earnings from them;
   c) never giving a person money to buy nice clothes when they buy nice clothes for themselves;
   d) giving money or gifts to the person/people they are having an affair with instead of their partner/spouse; and
e) refusing to earn money and running up large bills, which their partner/spouse must pay.

6. Physical and sexual violence committed, by any person regardless of their gender, may include:
   a) slapping, beating, pinching or hair-pulling;
   b) threatening violence or burning;
   c) threatening or attacking them with a weapon or object;
   d) throwing objects;
   e) physical confinement, i.e. locking them up in a room or tying them up;
   f) strangling;
   g) coercing a person to have sex or raping them; and
   h) ripping a person’s clothes off to expose their naked body.

7. Split into groups of four or five and develop a short role play that shows the ways that men and women can mistreat each other. You will present these role plays to the whole group.

8. At the end of the role play, you will be asked to stay in character for a few minutes and the facilitator will invite the rest of the group to ask you questions. You will respond to these questions in character.

9. You may be asked questions such as:
   a) How do you feel when you are mistreated in this way?
   b) What do you fear, as the person who is being mistreated?
   c) Why do you, the abuser, do this? How do you feel?
   d) Who else is present? Who else witnesses/is involved in the mistreatment? How do they feel?
   e) What do you do, as the mistreated person?
   f) Why do you, the mistreated person, respond in this way?
   g) What do the other people do and why do they act in these ways?

2. CONCLUSION

1. The facilitator will lead you in a brainstorm on why some people do not take legal action after or while being abused.

2. The facilitator will write your responses on a flip chart; some examples are listed below:
   a) They may think that it is their fault and that they deserve to be abused.
   b) They may think that their abuser will kill them.
   c) They may fear that their children will be taken away from them.
   d) They may hold the belief that the abuser may want to and will change.
   e) They may fear that no one will believe them. This is especially true if the abuser is a person with status in their community.
   f) If the abuser is the breadwinner, there may be a fear of the loss of their livelihood.
   g) They may have a fear of “losing face” or losing respect in the community.
   h) They may harbour feelings of unworthiness of better treatment.
NOTE TO THE PARTICIPANT

The most important aspect of this training is showing you how to use the SLPs. The practice of these lessons in the training will be drawn from the demonstrations that the facilitator will do.

This lesson is likely to take an hour. However, even though the lessons are designed to take one hour, there are natural breaks that show where the lesson can be stopped, if necessary. Lesson demonstrations will be followed by a discussion and a lesson practice session.

1. SLP DEMONSTRATION AND PARTICIPANT PRACTICE

1.1 Demonstration of a scripted lesson plan

OUTCOMES

At the end of the session, you will be able to:

- understand how to present a lesson on transmission of HIV using the SLPs; and
- experience participatory teaching methods as shown in the SLP.

ESTIMATED TIME: 30 minutes

METHODOLOGY:

1. The facilitator will demonstrate a full SLP and you will play the role of the learners in the class. The facilitator will demonstrate the following lessons depending on the grade level that you teach:
   - Lesson 4.9: Transmission of HIV
   - Lesson 8.5: What young adults need to know about HIV/AIDS
   - Lesson 10.8: I know what I want

2. Observe the methodologies that the facilitator uses during the lesson and follow the steps of the SLP that the facilitator uses.

3. The facilitator will conduct a debrief of the lesson by asking the following questions:
   a) What was your impression of the lesson?
   b) What kind of teaching and learning methodology was used?
   c) How was the participation level of the “learners”?
   d) What are the challenges that you see with the methodologies used?
   e) How might you adapt the methodologies in your classroom?
1.2 SLP practice preparation: Lessons 4.7, 5.9, 6.7, 7.3, 8.4, 9.8, 10.3, 11.7 and 12.3

**NOTE TO THE PARTICIPANT**

After observing the demonstration, you will now prepare to practise teaching a lesson from the SLPs. Ensure that you have copies of the SLPs for your grade level. You will prepare by reading through the lesson and discussing how you can implement the lesson.

Note the following:

- In most schools, a period lasts for 30–45 minutes. Your group should cover the lesson within that specified period length.
- The SLP shows where a break in the lesson can be taken, if necessary.

**OUTCOMES**

At the end of this session, you will be able to:

- prepare a lesson using the scripted lesson plans

**ESTIMATED TIME:** 45 minutes

**METHODOLOGY:**

1. Split into groups according to the grade level that you teach. The facilitator will allocate the lessons below according to the respective grade level:
   
   a) Lesson 4.7: Culture, society and sexuality
   
   b) Lesson 5.9: Dealing with the stigma of HIV
   
   c) Lesson 6.7: Bullies can change
   
   d) Lesson 7.3: Is there a difference between gender and sex?
   
   e) Lesson 8.4: Sexuality is more than sex
   
   f) Lesson 9.8: Sexual consent
   
   g) Lesson 10.3: Gender, equality and healthier relationships
   
   h) Lesson 11.7: Gender, power and violence
   
   i) Lesson 12.3: STIs: Protecting ourselves, protecting our future

2. Your task is to prepare the lesson as if you are teaching your learners. Those not teaching the lesson will play the role of the learners. The lessons have been created to assist you with teaching CSE content. Each member of the group should get an opportunity to teach by the end of the workshop. Prepare the lesson in your group and choose the person who is going to present it.

3. Read the lesson through from beginning to end and then prepare to teach it. One person will be the educator and the rest of the group, the learners.
4. It is important to use this resource when preparing for the lesson. Remember that the scripted lesson plans are meant to make your work easier. Follow the steps systematically.

5. Note the pedagogical strategies used in the lesson. After the lesson presentation, the person presenting will be asked to list these strategies on a flip chart.

6. The facilitator will move around the room, answering any questions and making sure that you are following the steps of the lesson.

7. Prepare your lesson to be conducted within a 30-minute period.

1.3 SLP practice session: Lessons 4.7, 5.9, 6.7, 7.3, 8.4, 9.8, 10.3, 11.7 and 12.3

NOTE TO THE PARTICIPANT

You will practise your lessons in groups and then present to the rest of the participants. Presentation of the lessons will be through the fishbowl technique. This calls for your group to play the role of a class and to conduct the lesson among yourselves, while your colleagues observe and take notes on the lesson demonstration. After all the groups have presented, the facilitator will ask for comments on each of the presentations. You are encouraged to engage with each other, on each of the lessons, and give constructive feedback, which will be helpful to your colleagues.

OUTCOMES

At the end of this session you will be able to:

- demonstrate the implementation of an SLP; and
- give and receive feedback on the lessons you are presenting and on the lessons presented to you.

ESTIMATED TIME: 30 minutes

METHODOLOGY:

1. In your group, the person who has been chosen to play the role of the educator should teach the lesson. The rest of your group will play the role of the learners. Your group should be positioned in such a way that everybody else in the room is able to see you.

2. The person selected to lead the lesson should follow the steps of the SLP and use what they learned from the practice session.

3. The rest of the participants will note their observations as the lesson progresses, using Appendix 11: Observer or “critical friend” checklist, as a guide. Their notes will serve as an evaluation of what they have observed in the lesson presentation and how well the educator from your group followed the steps in the SLP.

4. As soon as the lesson is finished, fill out your own observer checklist. You will also use Appendix 11: Observer or “critical friend” checklist and you will have 5 minutes to do this.
5. The facilitator will ask you to share your observations. In particular, you will give feedback on: the methodologies used during the lesson;
   a) the implications of these methodologies for classroom management;
   b) how these methodologies affect classroom management;
   c) how best to manage the class when using these methodologies;
   d) whether the steps from the SLP were followed; and
   e) one thing that went well or one thing that could be improved.
6. The facilitator will summarise all the observations, highlighting what the educator, from the group presenting, did well and areas where they would like to see improvement.
7. Each of the practice groups will take turns to present the lesson to all of the participants.

1.4 Debrief of SLP practice session: 4.7, 5.9, 6.7, 7.3, 8.4, 9.8, 10.3, 11.7, and 12.3

OUTCOMES
At the end of the session, you will be able to:
• consolidate the feedback from the practice session; and
• identify areas for improvement.

ESTIMATED TIME: 15 minutes

METHODOLOGY:
1. Share all the successes that you identified from the SLP practice session.
2. Share all the challenges that you identified from the SLP practice.
3. The facilitator will note all your observations on a flip chart and add their own observations as well.
4. The facilitator will lead you in a discussion on the value of applying the methodologies used in the classroom and how best to do so.

1.5 Lesson practice assignment for Day 3

ESTIMATED TIME: 15 minutes

METHODOLOGY:
1. Group yourselves according to the grade of LO or LS that you teach.
2. Most of the training will be focused on practising teaching the SLPs, so you will be given homework, in the form of an SLP to prepare for presentation.
3. The SLPs will be allocated as follows:
   a) Grade 4: Lesson 4.3: Dealing with conflict
   b) Grade 5: Lesson: 5.2A: I can choose my relationships
   c) Grade 6: Lesson 6.2: Body image: “I am who I am”
   d) Grade 7: Lesson 7.5: Healthy and unhealthy relationships
   e) Grade 8: Lesson 8.3: Making healthy sexual choices and knowing your limits
   f) Grade 9: Lesson 9.5: One partner at a time
   g) Grade 10: Lesson 10.3: Gender, equality and healthier relationships
   h) Grade 11: Lesson 11.7: Gender, power and violence
   i) Grade 12: Lesson 12.4: Looking ahead: My personal protection plan

4. Take time to read the lesson that you have been allocated as you will be presenting it to the rest of the group.

5. The facilitator will demonstrate one of the SLPs before you present the one you have been allocated.

2. CLOSING: REFLECTION ON DAY 2

OUTCOMES
At the end of the session, you will be able to:

- reflect on the proceedings of the day;
- identify what they have learned during the day; and
- provide feedback on the workshop for Day 2

ESTIMATED TIME: 15 minutes

METHODOLOGY:

1. The facilitator will give each of you two evaluation forms to complete, for Day 1 and Day 2.
2. Once you have submitted your completed forms the facilitator will ask all the participants to stand close together in a circle. They will ask one person to place their right arm, outstretched, into the middle of the circle and say something that they found enjoyable about the day and then something that they found challenging. Use the phrases: “I liked it when...” and, “I did not like it when...”
3. The facilitator will ask another person to do the same, i.e. to place their right hand on top of the hand already in the middle, and repeat what the first person did by sharing what they liked and did not like.
4. You will continue this process, around the circle, until everyone has their right hands placed on top of one another’s hands in the circle to form a tower.
5. This tower of hands represents the strength of working together as a group.
DAY THREE
Scripted Lesson Plans for Comprehensive Sexuality Education in Life Skills and Life Orientation
<table>
<thead>
<tr>
<th>Module</th>
<th>Schedule</th>
<th>Time</th>
<th>Topic</th>
</tr>
</thead>
</table>
| **WELCOME AND OPENING**                    | 08:00 – 08:15       | 15 mins | Welcome to Day 3  
• Review of Day 2  
• Pandora’s box  
• Overview of the agenda for Day 3 |
| **MODULE 7: COMMUNICATION AND PREVENTION** | 08:15 – 09:15       | 1 hour | SLP practice preparation: Lessons 4.3, 5.2A, 6.2, 7.5, 8.3, 9.5, 10.3, 11.7 and 12.4 |
|                                            | 09:15 – 10:00       | 45 mins | SLP practice session: Lessons 4.3, 5.2A, 6.2, 7.5, 8.3, 9.5, 10.3, 11.7 and 12.4 |
|                                            | 10:00 – 10:30       | 30 mins | TEA BREAK                                                              |
|                                            | 10:30 – 11:00       | 30 mins | Debrief of SLP practice session: 4.3, 5.2A, 6.2, 7.5, 8.3, 9.5, 10.3, 11.7 and 12.4 |
|                                            | 11:00 – 11:45       | 45 mins | Demonstration of Lesson 9.3: Safer sex: Using condoms |
| **MODULE 8: CONTEXTUALISING THE SLPs IN THE SOUTH AFRICA SCHOOL-BASED SEXUALITY AND HIV PREVENTION ACTIVITY** | 11:45 – 12:15       | 30 mins | Implementation of the Activity package |
|                                            | 12:15 – 12:45       | 30 mins | Ongoing support for SLP implementation |
|                                            | 12:45 – 13:15       | 30 mins | Monitoring and evaluation activities for SLP implementation |
|                                            | 13:15 – 13:30       | 15 mins | Planning and next steps |
|                                            | 13:30 – 14:00       | 30 mins | • Post-training assessment  
• Training evaluation |
|                                            | 14:00               | END OF TRAINING |
1. WELCOME TO DAY THREE

OUTCOMES

At the end of this session, you will be able to:

• recap what they learned during Day 2;
• ask questions related to comprehensive sexuality education and HIV prevention; and
• review the agenda for Day 3.

ESTIMATED TIME: 15 minutes

1.1 Review of Day 2

METHODOLOGY:

1. The review of Day 2 will be done in breakaway groups.
2. You will do a “buzz group” exercise. Turn to your neighbour and share one thing new you learned and one thing you still feel unclear about from the previous day’s training. Once you have “buzzed” for about five minutes, the facilitator will ask a few of you to share what you discussed. If there is anything that is unclear, the facilitator will address these issues or put them on a sheet labelled “Parking Lot”. Issues that have been “parked” will be addressed by the end of the day.
3. The facilitator will ask a few people to recite all the core messages, without looking at their manuals or notes. Be prepared to volunteer.

1.2 Pandora’s box

METHODOLOGY:

1. The facilitator will remind you of the Pandora’s box/question box. If there are any questions in the box, the facilitator will respond to the questions during this time.
2. The facilitator may not have time to answer all the questions during this time, but they will find time to address any outstanding questions during the course of the day.

1.3 Review of agenda for Day 3

METHODOLOGY:

1. The facilitator will go through the agenda for Day 3 with you so that everyone is clear on what they will be doing throughout the day.
2. If any changes have to be made to the agenda, this is the time to address those changes.
MODULE 7: COMMUNICATION AND PREVENTION

1. SLP PRACTICE PREPARATION AND PRESENTATION

1.1 SLP practice preparation: Lessons 4.3, 5.2A, 6.2, 7.5, 8.3, 9.5, 10.3, 11.7 and 12.4

OUTCOMES

At the end of the session, you will be able to:

- prepare a lesson using the scripted lesson plans.

ESTIMATED TIME: 1 hour

METHODOLOGY:

1. Split into groups according to the grade level that you teach. The facilitator will allocate the lessons below according to the respective grade level:
   a) Grade 4: Lesson 4.3: Dealing with conflict
   b) Grade 5: Lesson: 5.2A: I can choose my relationships
   c) Grade 6: Lesson 6.2: Body image: “I am who I am”
   d) Grade 7: Lesson 7.5: Healthy and unhealthy relationships
   e) Grade 8: Lesson 8.3: Making healthy sexual choices and knowing your limits
   f) Grade 9: Lesson 9.5: One partner at a time
   g) Grade 10: Lesson 10.3: Gender, equality and healthier relationships
   h) Grade 11: Lesson 11.7: Gender, power and violence
   i) Grade 12: Lesson 12.4: Looking ahead: My personal protection plan

2. Your task is to prepare the lesson as if you are teaching your learners. Those not teaching the lesson will play the role of the learners. The lessons have been created to assist you with teaching CSE content. Each member of the group should get an opportunity to teach by the end of the workshop. Prepare the lesson in your group and choose the person who is going to present it.

3. Read the lesson through from beginning to end and then prepare to teach it. One person will be the educator and the rest of the group, the learners.

4. It is important to use this resource when preparing for the lesson. Remember that the scripted lesson plans are meant to make your work easier. Follow the steps systematically.

5. Note the pedagogical strategies used in the lesson. After the lesson presentation, the person presenting will be asked to list these strategies on a flip chart.

6. The facilitator will move around the room, answering any questions and making sure that you are following the steps of the lesson.

7. Prepare your lesson to be conducted within a 30-minute period.
1.2 SLP practice session: Lessons 4.3, 5.2A, 6.2, 7.5, 8.3, 9.5, 10.3, 11.7 and 12.4

OUTCOMES

At the end of this session you will be able to:

- demonstrate the implementation of an SLP; and
- give and receive feedback on the lessons you are presenting and on the lessons presented to you.

NOTE TO THE PARTICIPANT

You will practise your lessons in groups and then present to the rest of the participants. Presentation of the lessons will be through the fishbowl technique. This calls for your group to play the role of a class and to conduct the lesson among yourselves, while your colleagues observe and take notes on the lesson demonstration. After all the groups have presented, the facilitator will ask for comments on each of the presentations. You are encouraged to engage with each other, on each of the lessons, and give constructive feedback, which will be helpful to your colleagues.

ESTIMATED TIME: 45 minutes

METHODOLOGY:

1. In your group, the person who has been chosen to play the role of the educator should teach the lesson. The rest of your group will play the role of the learners. Your group should be positioned in such a way that everybody else in the room is able to see you.

2. The person selected to lead the lesson should follow the steps of the SLP and use what they learned from the practice session.

3. The rest of the participants will note their observations as the lesson progresses, using Appendix 11: Observer or “critical friend” checklist, as a guide. Their notes will serve as an evaluation of what they have observed in the lesson presentation and how well the educator from your group followed the steps in the SLP.

4. As soon as the lesson is finished, fill out your own observer checklist. You will also use Appendix 11: Observer or “critical friend” checklist and you will have 5 minutes to do this.

5. The facilitator will ask you to share your observations. In particular, you will give feedback on:
   a) the methodologies used during the lesson;
   b) the implications of these methodologies for classroom management;
   c) how these methodologies affect classroom management;
   d) how best to manage the class when using these methodologies;
   e) whether the steps from the SLP were followed; and
   f) one thing that went well or one thing that could be improved.
6. The facilitator will summarise all the observations, highlighting what the educator, from the group presenting, did well and areas where they would like to see improvement.

7. Each of the practice groups will take turns to present the lesson to all of the participants.

1.3 Debrief of SLP practice session: 4.3, 5.2A, 6.2, 7.5, 8.3, 9.5, 10.3, 11.7 and 12.4

OUTCOMES

At the end of the session, you will be able to:

• consolidate the feedback from the practice session; and
• identify areas for improvement.

ESTIMATED TIME: 30 minutes

METHODOLOGY:

1. Share all the successes that you identified from the SLP practice session.
2. Share all the challenges that you identified from the SLP practice.
3. The facilitator will note all your observations on a flip chart and add their own observations as well.
4. The facilitator will lead you in a discussion on the value of applying the methodologies used in the classroom and how best to do so.
2. DEMONSTRATION OF LESSON 9.3: SAFER SEX: USING CONDOMS

OUTCOMES
At the end of this session you will you will be able to:

• explain and understand how the scripted lesson plan on condom use should be implemented;
• experience participatory teaching methodology as shown in the scripted lesson plan;
• demonstrate the use of both female/internal and male/external condoms; and
• explain the importance of learners knowing how to correctly use the male/external and female/internal condoms

ESTIMATED TIME: 45 minutes

METHODOLOGY:

1. Think back to one of the DBE value statement that you encountered on Day 1:

   *Learners in consensual sexual relationships should always take the responsibility to protect themselves from pregnancy and sexually transmitted infections.*

2. The facilitator will explore your concerns about condom demonstration in the classroom. Nevertheless, condom demonstration is an important part of sexuality education and you must learn how to do it correctly and manage any discomfort you may have.

3. The facilitator will lead you in a brainstorm on ways that learners can take responsibility for protecting themselves from pregnancy and sexually transmitted infections.

4. The facilitator will demonstrate how to use a condom, after which you will have a discussion about condoms in the context of the classroom.

5. The facilitator will conduct the condom demonstration for both the male/external and female/internal condoms.

6. Share your thoughts on demonstrating condom use in your own classroom.

7. You will discuss the opportunities that are possible for you to demonstrate correct condom use for your learners and how best this can be done.

8. At the end of the session share with the group if you feel any differently about presenting the lesson on condom use in the classroom.
MODULE 8: CONTEXUALISING THE SLPS IN THE SOUTH AFRICA SCHOOL-BASED SEXUALITY AND HIV PREVENTION ACTIVITY

1. IMPLEMENTATION OF THE ACTIVITY PACKAGE

In this session, information on the South Africa School-Based Sexuality and HIV Prevention Activity (hereafter, “the Activity”) will be presented, to show how all the different aspects of the Activity support the implementation of the SLPs. The Activity works with school management teams (SMTs), school governing bodies (SGBs) and parents to ensure that there is support for the implementation of the SLPs.

The Activity is part of the implementation of the DBE National Policy on HIV, STIs and TB. Therefore, SGBs and parents will be taken through an orientation on the Activity and they will also be supported by the SMT in their schools.

The Activity also anticipates that the SLPs will create a demand for health services among learners. Therefore, schools will be assisted to strengthen their referral systems and their linkages to services.

Appendix 12: The CSE Activity implementation package is a diagram that details how all the components of the Activity are centred on and target the learners.

OUTCOMES

At the end of the session, you will be able to:

• describe the components of the Activity;
• explain how all the components of the Activity contribute to the implementation of CSE;
• discuss how the Activity ensures that SMT members, SGB members, parents, provincial and district officials are engaged in the implementation of the Activity; and
• appreciate the efforts made to strengthen the linkages between schools and health services.

ESTIMATED TIME: 30 minutes

METHODOLOGY:

1. The Activity is using a comprehensive approach to implement sexuality education in schools.
2. Refer to Appendix 12: The CSE Activity implementation package.
3. The facilitator will take you through the Activity package to illustrate its comprehensive design and how its focus is on the learner.

NOTE TO THE PARTICIPANT

While you are expected to start implementing the SLPs immediately after this training, you will have support through coaching and mentoring by your heads of department (HODs) who have received training on how to support you, as you implement the SLPs. You must feel free to ask for help when you need it understanding that you will improve your skills over time, with practice.
1.1 Ongoing support for SLP implementation

OUTCOMES
At the end of this session you will:

• express less anxiety about implementing the SLPs; and
• express a willingness to work with their subject department heads to address any challenges you face in the implementation of the SLPs.

ESTIMATED TIME: 30 minutes

METHODOLOGY:

1. The facilitator will ask you to share your biggest concern regarding the implementation of SLPs in the classroom.
2. After you have shared your concerns your facilitator will explain how your HODs will support you.
3. Your HODs have received training in coaching and mentoring, and they are equipped to support you as you implement the SLPs.
4. Your facilitator will now take you through a PowerPoint presentation to illustrate how you will be supported by your HODs.

1.2 Monitoring and evaluation activities for SLP implementation

In this session, the monitoring and evaluation processes of the Activity are explained. The monitoring and evaluation of the Activity consists of two components: lesson observations and implementation tracking.

1.2.1 Lesson observations
In order to ensure that the SLPs are indeed helping educators to teach CSE in the classroom, the Activity observes a sample of educators who have received training on the SLPs, to see how the educators fare with the SLPs in the classroom. This allows the Activity to test the fidelity of the SLPs, to identify gaps in the training and to determine how the training of educators can be strengthened.

The lesson observation is not designed to appraise the educators' teaching skills, but rather to assess the adequacy of the training in equipping educators for effective implementation of the SLPs in the classroom.

1.2.2 Tracking the implementation of SLPs
This Activity is part of the DBE’s response to the National Strategic Plan on HIV, STIs and TB. The DBE reports to the South African National AIDS Council (SANAC) and various other national bodies on the number of educators who have completed the training on how to implement CSE in the classroom, as well as the number of learners who have been received lessons in the new CSE content.
OUTCOMES
At the end of the session, you will be able to:

• explain the role of lesson observations in strengthening educator training on the SLPs;
• explain the process of the SLP lesson observations;
• describe the process of data collection on SLP implementation; and
• identify your role in the data collection process.

ESTIMATED TIME: 30 minutes

METHODOLOGY:

1. SLP implementation in the classroom is part of the DBE response to the National Strategic Plan for HIV, STIs and TB. As an intervention, it is important that the DBE is able to report on the extent of the implementation of the SLP content. This is part of the monitoring and evaluation of the Activity.
2. The facilitator will take you through a PowerPoint presentation on the monitoring and evaluation processes for the Activity.
3. Refer to Appendix 13: Data collection memo for the tools that will be used during the data collection period.

1.3 Planning and next steps

OUTCOMES
You will be able to:

• increase your understanding of how and when to teach CSE lessons;
• explain mentoring and coaching as a way of supporting you, as you implement SLPs in the classroom; and
• share your concerns and identify the support you need to teach the CSE lessons.

ESTIMATED TIME: 15 minutes

METHODOLOGY:

1. Think back to the expectations for teaching the SLPs through LS and LO. What do you remember about the expectations: When are lessons taught? How often are the lessons taught? etc.
2. Split into groups according to the grades that you teach LS and LO.
3. Look at the topics addressed by each of the SLPs for your grade and identify when you will be able to teach using the SLPs in your ATP as shown in the CAPS.
4. Each group will present what they have discussed.
5. Refer to Appendix 2: Alignment of the SLPs to CAPS topics and subtopics for Grade 4–12, which is a spreadsheet that details when each of the SLPs can be presented in the classroom.

6. Share any concerns that you may have and/or possible barriers you foresee for implementing the lessons in your school.

7. You will help each group to identify solutions to the barriers and concerns they identified.

8. The facilitator will lead you in a brainstorm on what kind of support you need in order to implement the CSE lessons in your schools.
CLOSING THE TRAINING

OUTCOMES

During this session you will:

• reflect on what you have learned throughout the workshop.

Estimated time: 30 minutes

METHODOLOGY:

1. Complete the post-training assessment, which is akin to the pre-training assessment that you completed at the beginning of the workshop. This questionnaire is used to see if knowledge, skills, attitudes and comfort levels have changed during the training.

2. Complete the training evaluation forms. You are encouraged to be critical and honest in your evaluation of the training, as this is what the training team needs to improve the training programme, materials and methods.

3. Your facilitator will give you each a stone. Gather in a circle, close your eyes and hold your stone in your hands.

4. The facilitator will read the following passage to the group:

5. “Stones come in many forms and shapes. They have been exposed to different conditions, hence the difference in their shapes and sizes. So too are people. The learners we work with come from different circumstances. Some of them have been abused, some are sick, etc., but they all still have value. We, as educators, have a valuable role to play in shaping our learners. How are we going to use our power: to break down or to build up?”

6. The facilitator will light a candle and place it in the middle of the circle.

7. Place your stones around the candle. As you are placing the stones, sing a song that says, “This little light of mine, I’m gonna let it shine.”

8. The facilitator will close the session with some brief remarks.

SONG: THIS LITTLE LIGHT OF MINE

(This little light of mine,
I’m gonna let it shine,) x3

Let it shine, let it shine, let it shine.

END OF THE TRAINING
APPENDICES
### APPENDIX 1: THE 80 SCRIPTED LESSON PLANS FOR GRADERS 4-12 AT A GLANCE

**Table 1: Intermediate Phase (IMP)**

<table>
<thead>
<tr>
<th>Grade 4 (10 lessons)</th>
<th>Term</th>
<th>Grade 5 (11 lessons)</th>
<th>Term</th>
<th>Grade 6 (10 lessons)</th>
<th>Term</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>10-year-olds</strong></td>
<td></td>
<td><strong>11-year-olds</strong></td>
<td></td>
<td><strong>12-year-olds</strong></td>
<td></td>
</tr>
<tr>
<td>4.1 Respect for my own body</td>
<td>1</td>
<td>5.1 Body image</td>
<td>1</td>
<td>6.1 Body image: “My body is changing”</td>
<td>1</td>
</tr>
<tr>
<td>4.2 Respecting the bodies of others</td>
<td>1</td>
<td>5.2A I can choose my relationships</td>
<td>1</td>
<td>6.2 Body image: “I am who I am”</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5.2B This is my body and I say what happens to it</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.3 Dealing with conflict</td>
<td>1</td>
<td>5.3 The benefits of good and safe relationships</td>
<td>1</td>
<td>6.3 Body image: Acceptance of self</td>
<td>1</td>
</tr>
<tr>
<td>4.4 Emotions - Why am I feeling this way?</td>
<td>2</td>
<td>5.4 Child abuse – “Keeping myself safe from abuse”</td>
<td>2</td>
<td>6.4 Negative and positive peer pressure</td>
<td>1</td>
</tr>
<tr>
<td>4.5 Bullying</td>
<td>2</td>
<td>5.5 Sexual grooming: I can say “NO”!</td>
<td>2</td>
<td>6.5 Behaviours that put pressure on us</td>
<td>1</td>
</tr>
<tr>
<td>4.6 Responding to bullying</td>
<td>2</td>
<td>5.6 Dealing with violent situations – “What is sexual violence?”</td>
<td>2</td>
<td>6.6 Bullying and links to gender-based violence</td>
<td>2</td>
</tr>
<tr>
<td>4.7 Culture, society and sexuality</td>
<td>3</td>
<td>5.7 Learning from our elders</td>
<td>2</td>
<td>6.7 Bullies can change</td>
<td>2</td>
</tr>
<tr>
<td>4.8 The basics of HIV and AIDS</td>
<td>4</td>
<td>5.8 Should boys and girls be treated differently?</td>
<td>2</td>
<td>6.8 What is gender stereotyping, sexism and abuse?</td>
<td>3</td>
</tr>
<tr>
<td>4.9 Transmission of HIV</td>
<td>4</td>
<td>5.9 Dealing with the stigma of HIV</td>
<td>4</td>
<td>6.9 Gender equality, stereotypes and bias</td>
<td>3</td>
</tr>
<tr>
<td>4.10 Celebrating the life of Nkosi Johnson</td>
<td>4</td>
<td>5.10 Changing attitudes towards people infected with HIV and AIDS</td>
<td>4</td>
<td>6.10 HIV and AIDS, stigma, care, treatment and support</td>
<td>4</td>
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</tbody>
</table>
Table 2: Senior Phase (SP)

<table>
<thead>
<tr>
<th>Grade 7 (8 lessons)</th>
<th>Term</th>
<th>Grade 8 (8 lessons)</th>
<th>Term</th>
<th>Grade 9 (11 lessons)</th>
<th>Term</th>
</tr>
</thead>
<tbody>
<tr>
<td>13-year-olds</td>
<td></td>
<td>14-year-olds</td>
<td></td>
<td>15-year-olds</td>
<td></td>
</tr>
<tr>
<td>7.1 Setting goals and reaching your potential</td>
<td>1</td>
<td>8.1 Setting goals and reaching your potential</td>
<td>1</td>
<td>9.1 Setting goals and reaching your potential</td>
<td>1</td>
</tr>
<tr>
<td>7.2 Appreciation and acceptance of self and others</td>
<td>1</td>
<td>8.2A Healthy and unhealthy messages about our gender</td>
<td>1/4</td>
<td>9.2 Safer sex: Hormonal contraception</td>
<td>1</td>
</tr>
<tr>
<td>7.3 Is there a difference between gender and sex?</td>
<td>1</td>
<td>8.2B Healthy and unhealthy messages about our gender</td>
<td>1</td>
<td>9.3 Safer sex: Using condoms</td>
<td>1</td>
</tr>
<tr>
<td>7.4 Understanding puberty – physical, social and emotional changes</td>
<td>1</td>
<td>8.3 Making healthy sexual choices and knowing your limits</td>
<td>1</td>
<td>9.4 Barriers to condom use</td>
<td>1</td>
</tr>
<tr>
<td>7.5 Healthy and unhealthy relationships</td>
<td>1</td>
<td>8.4 Sexuality is more than sex</td>
<td>1</td>
<td>9.5 One partner at a time</td>
<td>1</td>
</tr>
<tr>
<td>7.6 Making decisions about sex</td>
<td>1</td>
<td>8.5 What young adults need to know about STIs, HIV and AIDS</td>
<td>3</td>
<td>9.6 Using sexual and reproductive health resources in the community</td>
<td>1/3</td>
</tr>
<tr>
<td>7.7 Assertive communication</td>
<td>1</td>
<td>8.6 Your risk for STIs, HIV and AIDS and pregnancy</td>
<td>1/3</td>
<td>9.7 Are you ready for parenthood?</td>
<td>1</td>
</tr>
<tr>
<td>7.8 Revisiting your goals and moving forward</td>
<td>1</td>
<td>8.7 HIV, AIDS and stigma</td>
<td>1</td>
<td>9.8 Sexual Consent</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>8.8 The art of saying: “No, thanks”</td>
<td>3</td>
<td>9.9 Power and control in relationships</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>9.10 Condoms: Being assertive and staying protected</td>
<td>1</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>9.11 Consolidating intentions for Grade 9</td>
<td>1</td>
</tr>
<tr>
<td>Grade 10 (9 lessons)</td>
<td>Term</td>
<td>Grade 11 (9 lessons)</td>
<td>Term</td>
<td>Grade 12 (4 lessons)</td>
<td>Term</td>
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<tr>
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<td>------</td>
<td>----------------------</td>
<td>------</td>
</tr>
<tr>
<td>10.1 Developing my self-confidence</td>
<td>1</td>
<td>11.1 My priorities and life goals</td>
<td>1</td>
<td>12.1 Our needs and our rights, taking action</td>
<td>1&amp;2</td>
</tr>
<tr>
<td>10.2 Understanding power. Getting to share it.</td>
<td>1</td>
<td>11.2 Healthy relationships: choosing the right influences</td>
<td>1</td>
<td>12.2 Human factors affecting our health – and what we can do about them</td>
<td>3</td>
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<tr>
<td>10.3 Gender, equality and healthier relationships</td>
<td>1</td>
<td>11.3 Healthy and unhealthy relationships and the media</td>
<td>1</td>
<td>12.3 STIs: Protecting ourselves, protecting our future</td>
<td>3</td>
</tr>
<tr>
<td>10.4 Social and environmental justice: we can make a difference</td>
<td>2</td>
<td>11.4 Living a balanced lifestyle, staying in control</td>
<td>3</td>
<td>12.4 Looking ahead: My personal protection plan</td>
<td>3</td>
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<tr>
<td>10.5 My changing life roles and life goals</td>
<td>3</td>
<td>11.5 Understanding the consequences of risky behavior</td>
<td>3</td>
<td></td>
<td></td>
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<tr>
<td>10.6 Understanding sexual interest</td>
<td>3</td>
<td>11.6 Positive role models</td>
<td>3</td>
<td></td>
<td></td>
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<tr>
<td>10.7 Our choices, our decisions</td>
<td>3</td>
<td>11.7 Gender, power and violence</td>
<td>4</td>
<td></td>
<td></td>
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<tr>
<td>10.8 I know what I want</td>
<td>3</td>
<td>11.8 Rape – Prevention, support and change</td>
<td>4</td>
<td></td>
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<tr>
<td>10.9 Consent, rape and taking action.</td>
<td>3</td>
<td>11.9 Taking action against abuse</td>
<td>4</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 3: Further Education and Training (FET)
<table>
<thead>
<tr>
<th>SLP name</th>
<th>CAPS topic</th>
<th>CAPS subtopic</th>
<th>Time allocated</th>
<th>ATP term</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1: Respect for my own body</td>
<td>Development of the self</td>
<td>Respect for own and other's bodies: privacy, bodily integrity and not subjecting one's body to substance abuse</td>
<td>1 hr</td>
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<td>4.2: Respecting the bodies of others</td>
<td>Development of the self</td>
<td>How to respect and care for one's body</td>
<td>1 hr</td>
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<tr>
<td>4.3: Dealing with conflict</td>
<td>Development of the self</td>
<td>Dealing with conflict: examples of conflict situations at home and at school</td>
<td>1 hr</td>
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<tr>
<td>4.4: Emotions – Why am I feeling this way?</td>
<td>Development of the self</td>
<td>Developing a range of emotions: love, happiness, grief, fear and jealousy</td>
<td>1 hr</td>
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<td>4.5: Bullying</td>
<td>Development of the self</td>
<td>How to protect self from acts of bullying</td>
<td>1 hr</td>
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<tr>
<td>4.6: The basics of HIV and AIDS</td>
<td>Social responsibility</td>
<td>Basic facts including blood management</td>
<td>1 hr</td>
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<tr>
<td>4.7: Celebrating the life of Nkosi Johnson</td>
<td>Health and environmental responsibility</td>
<td>How to protect oneself against infection through blood</td>
<td>1 hr</td>
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<tr>
<td>CAPS Topic</td>
<td>SLP name</td>
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<tr>
<td>Development of the self</td>
<td>Positive self-concept formation</td>
<td>5.1: Body image</td>
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<td></td>
<td>Influence of others on self-concept: adults and peers</td>
<td>5.2A: I can choose my relationships</td>
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<td></td>
<td>Benefits of good and safe relationships</td>
<td>5.2B: This is my body and I say what happens to it</td>
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<td>Safe and unsafe relationships</td>
<td>5.3: The benefits of good and safe relationships</td>
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<td>Relationship with peers, older people and strangers</td>
<td>5.4: Child abuse – “Keeping myself safe from abuse”</td>
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<td>Different forms of abuse: physical and emotional</td>
<td>5.5: Sexual grooming: I can say “NO!”</td>
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<td>Where to get help and report abuse</td>
<td>5.6: Dealing with violent situations – “What is sexual violence?”</td>
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<td>Identifying potential violent situations at home, school and community</td>
<td>5.7: Learning from our elders</td>
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<td>Relationships between elders and children in different cultural contexts</td>
<td>5.8: Should boys and girls be treated differently?</td>
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<td>Issues of age and gender in different cultural contexts in South Africa</td>
<td>5.9: Dealing with the stigma of HIV</td>
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<td>HIV and AIDS education</td>
<td>5.10: Changing attitudes towards people infected with HIV and AIDS</td>
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| 6.1: Body image: “My body is changing”                                  | Development of the self       | Positive self-esteem: body image  
- Understanding and respecting body changes  
- Acceptance of the self                                                                 | 1 hr | 1        |
- Other influences on body image: media and society  
- Acceptance of the self                                                                 | 1 hr | 1        |
- Acceptance of the self                                                                 | 1 hr | 1        |
| 6.4: Negative and positive peer pressure on us                            | Development of the self       | Peer pressure  
- Examples of peer pressure in different situations: school and community                                                                                        | 1 hr | 1        |
| 6.5: Behaviours that put pressure on us                                   | Development of the self       | Peer pressure  
- Appropriate responses to peer pressure in different situations                                                                                           | 1 hr | 2        |
| 6.6: Bullying and links to gender-based violence                          | Development of the self       | Bullying: reasons for bullying  
- Getting out of the bullying habit: where to find help                                                                                                 | 1 hr | 2        |
| 6.7: Bullies can change                                                   | Development of the self       | Bullying: reasons for bullying  
- Getting out of the bullying habit: where to find help                                                                                                 | 1 hr | 2        |
| 6.8: What is gender stereotyping, sexism and abuse?                       | Social responsibility         | Gender stereotyping, sexism and abuse: definitions of concepts  
- Dealing with stereotyping, sexism and abuse                                                                                                           | 1 hr | 3        |
| 6.9: Gender equality, stereotypes and bias                                | Social responsibility         | Gender stereotyping, sexism and abuse: definitions of concepts  
- Dealing with stereotyping, sexism and abuse                                                                                                           | 1 hr | 3        |
| 6.10: HIV and AIDS, stigma, care, treatment and support                  | Health and environmental responsibility | HIV and AIDS education: myths and realities about HIV and AIDS  
- Caring for people with AIDS                                                                                                         | 1 hr | 4        |
## Senior Phase ATP alignment

<table>
<thead>
<tr>
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<th>Week</th>
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<tbody>
<tr>
<td>7.1: Setting goals and reaching your potential</td>
<td>Development of the self in society</td>
<td>Concept: self-image</td>
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<td>- Identity and reflect on personal qualities: relationship with self, family, friends</td>
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<td>- Personal interest, abilities and potential</td>
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<td>7.2: Appreciation and acceptance of self and others</td>
<td>Development of the self in society</td>
<td>Changes in boys and girls: puberty and gender constructs</td>
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<td>- Appreciation and acceptance of the self and others</td>
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<td>Peer pressure: effects of peer pressure</td>
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<td>- How peer pressure may influence an individual: use of substances, crime, unhealthy sexual behaviour, bullying and rebellious behaviour</td>
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<td>7.3: Is there a difference between gender and sex?</td>
<td>Development of the self in society</td>
<td>Peer pressure: effects of peer pressure</td>
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<td>- How peer pressure may influence an individual: use of substances, crime, unhealthy sexual behaviour, bullying and rebellious behaviour</td>
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<td>7.4: Understanding puberty – physical, social and emotional changes</td>
<td>Development of the self in society</td>
<td>Changes in boys and girls: puberty and gender constructs</td>
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<td>- Physical and emotional changes</td>
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<td>- Understanding the changes and how these impact on relationships</td>
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<td>- Respect for own and others’ body changes and emotions</td>
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<td>7.5: Healthy and unhealthy relationships</td>
<td>Development of the self in society</td>
<td>Peer pressure: effects of peer pressure</td>
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<td>- Appropriate responses to pressure: assertiveness and coping skills</td>
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<td>- Negotiation skills: ability to disagree in constructive ways</td>
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<td>- Where to find help</td>
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<td>7.6: Making decisions about sex</td>
<td>Development of the self in society</td>
<td>Changes in boys and girls: puberty and gender constructs</td>
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<td>- Respect for own and others’ body changes and emotions</td>
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<td>7.7: Assertive communication</td>
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<td>Peer pressure: effects of peer pressure</td>
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<td>- Appropriate responses to pressure: assertiveness and coping skills</td>
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<td>- Negotiation skills: ability to disagree in constructive ways</td>
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<td>7.8: Revisiting your goals and moving forward</td>
<td>Development of the self in society</td>
<td>Concept: self-image</td>
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<td>- Strategies to enhance others’ self-image through positive actions; respect for others and respect for diversity</td>
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<tr>
<td>8.1: Setting goals and reaching your potential</td>
<td>Development of the self in society</td>
<td>Concepts: self-concept formation and self-motivation - Positive self-talk: individuality and uniqueness; and personal achievements</td>
<td>1</td>
<td>1-3</td>
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<tr>
<td>8.2A: Healthy and unhealthy messages about our gender</td>
<td>Development of the self in society</td>
<td>Concept: self-concept formation and self-motivation - Factors that influence self-concept formation and self-motivation: media, environment, friends and peers, family, culture, religion and community</td>
<td>1</td>
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<tr>
<td></td>
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<td>Concept: sexuality - Influence of friends and peers on one’s sexuality - Family and community norms that impact sexuality - Social pressures including media that impact sexuality</td>
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<tr>
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<td>Concept: cultural diversity in South Africa - Influence of cultural norms and values on individual behaviour, attitude and choices: cultural expectations, practices and traditions - Respect difference: culture, religion and gender</td>
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<td>5-7</td>
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<tr>
<td>8.2B: Healthy and unhealthy messages about our gender</td>
<td>Development of the self in society</td>
<td>Concept: sexuality - Understanding one’s sexuality: personal feelings that impact on sexuality - Influence of friends and peers on one’s sexuality - Family and community norms that impact on sexuality - Cultural values that impact on sexuality - Social pressures including media that impact on sexuality - Problem-solving skills: identity formation and development</td>
<td>1</td>
<td>4-6</td>
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<td>Sexual behaviour and sexual health (Linkage to Grade 9 CAPS) - Risk factors leading to unhealthy sexual behaviour - Unwanted results of unhealthy sexual behaviour: teenage pregnancy, sexually transmitted infections (STIs), HIV and AIDS, low self-image and emotional scars - Strategies to deal with unhealthy sexual behaviour: abstinence and change of behaviour</td>
<td>2</td>
<td>4-7 (Grade 9)</td>
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<tr>
<td>8.3: Making healthy sexual choices and knowing your limits</td>
<td>Development of the self in society</td>
<td>Concept: sexuality - Understanding one’s sexuality: personal feelings that impact on sexuality Peer pressure (Linkage to Grade 7 CAPS) - How peer pressure may influence an individual: use of substances, crime, sexual behaviour, bullying and rebellious behaviour - Appropriate responses to pressure: assertiveness and coping skills</td>
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<td>6-8 (grade 7)</td>
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### Grade 8

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<th>Term</th>
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<tr>
<td>8.4: Sexuality is more than sex</td>
<td>Health, social and environmental responsibility</td>
<td>Informed, responsible decision-making about health and safety: HIV and AIDS - Prevention and safety issues relating to HIV and AIDS</td>
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<td>7-8</td>
</tr>
<tr>
<td>8.5: What young adults need to know about STIs, HIV and AIDS</td>
<td>Development of the self in society</td>
<td>Concept: sexuality - Understanding one’s sexuality: personal feelings that impact on sexuality - Influence of friends and peers on one’s sexuality - Problem-solving skills: identity formation and development Informed, responsible decision-making about health and safety: HIV and AIDS - Prevention and safety issues relating to HIV and AIDS</td>
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<td>4-6</td>
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<tr>
<td></td>
<td>Health, social and environmental responsibility</td>
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<td>7-8</td>
</tr>
<tr>
<td>8.6: Your risk for STIs, HIV and AIDS and pregnancy</td>
<td>Development of the self in society</td>
<td>Concept: self-concept formation and self-motivation - Factors that influence self-concept formation and self-motivation: media, environment, friends and peers, family, culture, religion and community Issues relating to citizens’ rights and responsibilities (Linkage to Grade 9 CAPS) - Respect for others’ rights: people living with different disabilities and HIV and AIDS (infected and affected)</td>
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<td>Constitutional rights and responsibilities</td>
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<td>2 (Grade 9)</td>
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<tr>
<td>8.7: HIV, AIDS and stigma</td>
<td>Health, social and environmental responsibility</td>
<td>Informed, responsible decision-making about health and safety: HIV and AIDS - Prevention and safety issues relating to HIV and AIDS</td>
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### Grade 9

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<tr>
<td>9.1: Setting goals and reaching your potential</td>
<td>Development of the self in society</td>
<td>Goal-setting skills: personal lifestyle choices - Appropriate responses to influences on personal lifestyle choices - Informed decision-making skills: positive and negative influences</td>
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<tr>
<td>9.2: Safer sex: Hormonal contraception</td>
<td>Development of the self in society</td>
<td>Sexual behaviour and sexual health: - Risk factors leading to unhealthy sexual behaviour - Strategies to deal with unhealthy sexual behaviour: abstinence and change of behaviour</td>
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<tr>
<td>9.3: Safer sex: Using condoms</td>
<td>Development of the self in society</td>
<td>Sexual behaviour and sexual health: - Risk factors leading to unhealthy sexual behaviour - Unwanted results of unhealthy sexual behaviour: teenage pregnancy, sexually transmitted infections (STIs), HIV and AIDS, low self-image and emotional scars - Strategies to deal with unhealthy sexual behaviour: abstinence and change of behaviour</td>
<td>1</td>
<td>4-7</td>
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<tr>
<td>9.4: Barriers to condom use</td>
<td>Development of the self in society</td>
<td>Sexual behaviour and sexual health: - Risk factors leading to unhealthy sexual behaviour - Factors that influence personal behaviour including family, friends, peers and community norms - Strategies to deal with unhealthy sexual behaviour: abstinence and change of behaviour</td>
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<tr>
<td>9.5: One partner at a time</td>
<td>Development of the self in society</td>
<td>Goal-setting skills: personal lifestyle choices - Influence of media, environment, friends and peers, family, culture, religion and community on personal lifestyle choices</td>
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<tr>
<td>9.6: Using sexual and reproductive health resources in the community</td>
<td>Development of the self in society</td>
<td>Goal-setting skills: personal lifestyle choices - Appropriate responses to influences on personal lifestyle choices - Informed decision-making skills: positive and negative influences Sexual behaviour and sexual health - Protective factors: where to find help and support: community structures that offer protection or resilience against high risk behaviour Concept: volunteerism - Different types of volunteer organisations: contributions of community-based and non-profitable organisations to social and environmental health and sustainable development</td>
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<td>Health, social and environmental responsibility</td>
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<td>9.7: Are you ready for parenthood?</td>
<td>Development of the self in society</td>
<td>Sexual behaviour and sexual health</td>
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<td>Goal-setting skills: personal lifestyle choices</td>
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<td>9.8: Sexual consent</td>
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<td>- Informed decision-making skills: positive and negative influences</td>
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<td>- Assertiveness skills: confident and firm decision-making</td>
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<td>Sexual behaviour and sexual health</td>
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<td>- Strategies to deal with unhealthy sexual behaviour: abstinence and change of behaviour</td>
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<td>9.9: Power and control in relationships</td>
<td>Development of the self in society</td>
<td>Goal-setting skills: personal lifestyle choices</td>
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<td>9.10: Condoms: Being assertive and staying protected</td>
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<td>Goal-setting skills: personal lifestyle choices</td>
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<td>- Assertiveness skills: confident and firm decision-making</td>
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<td>9.11: Consolidating intentions for Grade 9</td>
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<td>10.1: Developing my self-confidence</td>
<td>Strategies to enhance self-awareness, self-esteem and self-development; factors influencing self-awareness and self-esteem, including media</td>
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<tr>
<td>10.2: Understanding power. Getting to share it.</td>
<td>Development of the self in society</td>
<td></td>
<td>1</td>
<td>1-3</td>
</tr>
<tr>
<td>10.3: Gender, equality and healthier relationships</td>
<td>Development of the self in society</td>
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<td>1-3</td>
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<tr>
<td>10.4: Social and environmental difference</td>
<td>Development of the self in society</td>
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<td>2</td>
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<td>10.5: My changing life roles and life goals</td>
<td>Development of the self in society</td>
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<td>3</td>
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<td>Grade 10</td>
<td>CAPS Subtopic</td>
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<tr>
<td>10.6: Understanding sexual</td>
<td>Development of the self in</td>
<td>Changes associated with development towards adulthood: adolescence to</td>
<td>3</td>
<td>1-5</td>
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<td>interest</td>
<td>society</td>
<td>adulthood</td>
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<td>- Physical changes: hormonal, increased growth rates, bodily proportions,</td>
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<td>secondary sex/gender characteristics, primary changes in the body (menstrual</td>
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<td>tion, ovulation and seed formation), and skin problems</td>
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<td>- Emotional changes: maturing personality, depth and control of emotions,</td>
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<td>feelings of insecurity, changing needs, interests, feelings, beliefs, values</td>
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<td>and sexual interest</td>
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<td>- Social changes: relationship with family, interaction with social groups,</td>
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<td>need for acceptance by and dependence on peer group, moving into the workforce</td>
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<td>and increased responsibilities</td>
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<tr>
<td>10.7: Our choices, our decisions</td>
<td>Development of the self in</td>
<td>Values and strategies to make responsible decisions regarding sexuality and</td>
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<td>1-5</td>
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<td>society</td>
<td>lifestyle choices to optimise personal potential</td>
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<td>- Behaviour that could lead to sexual intercourse and teenage pregnancy,</td>
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<td>sexual abuse and rape</td>
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<td>- Skills such as self-awareness, critical thinking, decision making, problem</td>
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<td>solving, assertiveness, negotiations, communication, refusal, goal setting</td>
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<td>and information gathering relating to sexuality and lifestyle choices</td>
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<td>- Where to find help regarding sexuality and lifestyle choices</td>
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<td>10.8: I know what I want</td>
<td>Development of the self in</td>
<td>Values and strategies to make responsible decisions regarding sexuality and</td>
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<td>sexual abuse and rape</td>
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<td>- Values such as respect for self and others, abstinence, self-control, right to</td>
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<td>privacy, right to protect oneself, right to say 'No' and taking responsibility for</td>
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<td>- Skills such as self-awareness, critical thinking, decision-making, problem-</td>
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<td>solving, assertiveness, negotiations, communication, refusal, goal-setting</td>
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<td>and information gathering relating to sexuality and lifestyle choices</td>
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<td>- Where to find help regarding sexuality and lifestyle choices</td>
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<tr>
<td>10.9: Consent, rape and taking</td>
<td>Development of the self in</td>
<td>Values and strategies to make responsible decisions regarding sexuality and</td>
<td>3</td>
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<td>action.</td>
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<td>- Where to find help regarding sexuality and lifestyle choices</td>
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<tr>
<td>11.1: My priorities and life goals</td>
<td>Development of the self in society</td>
<td>Plan and achieve life goals: apply various life skills as evidence of an ability</td>
<td>1</td>
<td>1-3</td>
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<td>- Types of goals: short-term, medium and long-term; steps in planning and</td>
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<td>goal-setting, problem-solving skills, perseverance and persistence</td>
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<td>- Important life goals and prioritising: family, marriage, parenting, career</td>
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<td>choices and relationships</td>
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<td></td>
<td>- Relationship between personal values, choices and goal-setting</td>
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<tr>
<td>11.2: Healthy relationships:</td>
<td>Development of the self in society</td>
<td>Relationships and their influence on our well-being: different types of</td>
<td>1</td>
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<tr>
<td>Choosing the right influences</td>
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<td>relationships with different people/groups, and their changing nature</td>
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<td>- Relationships that contribute to or are detrimental to our well-being:</td>
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<td>rights and responsibilities in relationships, social and cultural views</td>
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<td>that influence and/or affect relationships, qualities sought in different</td>
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<td>relationships, and individuality in relationships</td>
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<td>- Impact of the media on values and beliefs about relationships</td>
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<td>11.3: Healthy and unhealthy relationships</td>
<td>Development of the self in society</td>
<td>Relationships and their influence on our well-being: different types of</td>
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<td>and the media</td>
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<td>relationships with different people/groups, and their changing nature</td>
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<td>- Relationships that contribute to or are detrimental to well-being:</td>
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<td>rights and responsibilities in relationships, social and cultural attitudes</td>
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<td>and norms that influence and/or affect relationships, qualities sought in</td>
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<td>different relationships, and individuality in relationships</td>
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<td>- Impact of the media on values and beliefs about relationships</td>
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<td>11.4: Living a balanced lifestyle,</td>
<td>Development of the self in society</td>
<td>Healthy and balanced lifestyle choices:</td>
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<td>1-5</td>
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<tr>
<td>staying in control</td>
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<td>- Characteristics of a healthy and balanced lifestyle: physical, psychological</td>
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<td>social, emotional and spiritual facets</td>
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<td>- Factors that impact negatively on lifestyle choices</td>
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<tr>
<td>11.5: Understanding the consequences of</td>
<td>Development of the self in society</td>
<td>- Healthy and balanced lifestyle choices</td>
<td>3</td>
<td>1-5</td>
</tr>
<tr>
<td>risky behaviour</td>
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<td>- Accidents; types of accidents; lack of knowledge and skills; unsafe</td>
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<td>attitudes and behaviours; unsafe environments and emotional factors</td>
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<td>- Risky behaviour and situations: personal safety, road use, substance use</td>
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<td>and abuse, sexual behaviour, risk of pregnancy, teenage suicides, hygiene</td>
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<td>and dietary behaviour, sexually-transmitted infections (STIs), HIV and</td>
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<td>AIDS and peer pressure</td>
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</tbody>
</table>
| 11.6: Positive role models            | Development of the self in society | Positive role models; parents and peers; personal values; belief system; religion; media, social and cultural influences; economic conditions:  
- Impact of unsafe practices on self and others: physical, emotional, spiritual, social, economic, political and environmental  
- Individual responsibility for making informed decisions and choices: coping with and overcoming barriers regarding behaviour and seeking support, advice and assistance | 3    | 1-5  |
| 11.7: Gender, power and violence      | Development of the self in society | Gender roles and their effects on health and well-being: self, family and society  
- Unequal power relations, power inequality, power balance and power struggle between genders: abuse of power towards an individual (physical abuse), in family (incest), cultural (different mourning periods for males and females), social (domestic violence and sexual violence/rape) and work settings (sexual harassment)  
- Negative effects on health and well-being  
- Addressing unequal power relations and power inequality between genders | 4    | 1-3  |
| 11.8 Rape – Prevention, support and change | Development of the self in society  | Gender roles and their effects on health and well-being: self, family and society  
- Unequal power relations, power inequality, power balance and power struggles between genders: abuse of power towards an individual (physical abuse), in family (incest), cultural (different mourning periods for males and females), social (domestic violence and sexual violence/rape) and work settings (sexual harassment)  
- Negative effects on health and well-being  
- Addressing unequal power relations and power inequality between genders | 1    | 1-2  |
| 11.9 Taking action against abuse      |                                 | Gender roles and their effects on health and well-being: self, family and society  
- Unequal power relations, power inequality, power balance and power struggle between genders: abuse of power towards and individual (physical abuse), in family (incest), cultural (different mourning periods for males and females), social (domestic violence and sexual violence/rape) and work settings (sexual harassment)  
- Negative effects on health and well-being  
- Addressing unequal power relationships and power inequality between genders |
### Grade 12

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<thead>
<tr>
<th>Term</th>
<th>Week</th>
<th>CAPS topic</th>
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<tbody>
<tr>
<td>1/2</td>
<td>1-4</td>
<td>Democracy and human rights</td>
<td>Responsible citizenship:</td>
</tr>
</tbody>
</table>

#### 12.1: Our needs and our rights, taking action
- Evaluating our position when dealing with discrimination and human rights violations; taking into account the Bill of Rights; participation in discussions, projects, campaigns and events which address discrimination and human rights violations.
- Evaluation regarding outcomes of campaigns and events.

#### 12.2: Human factors affecting our health – and what we can do about them
- Developing self in society: psychological, social, religious, cultural practices and different knowledge perspectives.
- Human factors that cause ill-health, accidents, crises and disasters: psychological, social, religious, cultural practices and different knowledge perspectives.
- Developing self in society: psychological, social, religious, cultural practices and different knowledge perspectives.

#### 12.3: STIs: Protecting ourselves, protecting our future
- Developing self in society: psychological, social, religious, cultural practices and different knowledge perspectives.
- Human factors that cause ill-health, accidents, crises and disasters: psychological, social, religious, cultural practices and different knowledge perspectives.
- Developing self in society: psychological, social, religious, cultural practices and different knowledge perspectives.

#### 12.4: Looking ahead: My personal protection plan
- Developing self in society: psychological, social, religious, cultural practices and different knowledge perspectives.
- Human factors that cause ill-health, accidents, crises and disasters: psychological, social, religious, cultural practices and different knowledge perspectives.
- Developing self in society: psychological, social, religious, cultural practices and different knowledge perspectives.
### APPENDIX 3: BINGO CARD

Find someone who:

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<tr>
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<tbody>
<tr>
<td>has the same shoe size as you</td>
<td>has done a condom demonstration for teenagers</td>
<td>has received training in sexuality education/HIV prevention</td>
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<td>has presented a lesson on sexuality education</td>
<td>has a birthday in the same month</td>
<td>knows a parent who is in their teens</td>
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<tr>
<td>has talked about sexual intercourse to a teenager</td>
<td>knows a place where you can get a condom for free</td>
<td>has the same hobby as you</td>
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### APPENDIX 4: CORE SEXUALITY EDUCATION VALUES REPRESENTED IN DBE SEXUALITY EDUCATION LESSONS

<table>
<thead>
<tr>
<th>Value statements</th>
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<tbody>
<tr>
<td>1. All learners have the right to medically accurate and up-to-date information about human sexuality and sexual health.</td>
</tr>
<tr>
<td>2. All learners have the right to access sexual and reproductive health services that are affordable, high-quality, confidential, and non-judgmental.</td>
</tr>
<tr>
<td>3. Learners are sexual beings and have a right to enjoy their sexuality.</td>
</tr>
<tr>
<td>4. Learners should wait to have sex until they are in a mature, loving, healthy and responsible relationship.</td>
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<tr>
<td>5. Sexual activity must always be consensual and free of coercion.</td>
</tr>
<tr>
<td>6. Learners have the right to enjoy safe, healthy relationships that are free from physical violence and emotional abuse.</td>
</tr>
<tr>
<td>7. Learners in consensual sexual relationships should always take the responsibility to protect themselves from pregnancy and sexually transmitted infections.</td>
</tr>
<tr>
<td>8. Sexual orientation and gender identity are fundamental components of an individual’s identity.</td>
</tr>
<tr>
<td>9. Traditional gender norms for men and women can sometimes reinforce harmful behaviour.</td>
</tr>
<tr>
<td>10. Every person’s sense of sexual orientation and gender identity is deserving of respect.</td>
</tr>
</tbody>
</table>
# APPENDIX 5: THE COMPREHENSIVE SEXUALITY EDUCATION CORE MESSAGES PER PHASE

## Grade 4-6
Eight core messages to be integrated throughout the IMP curriculum

**SOUTH AFRICAN CHILDREN DECLARE THE FOLLOWING:**

<table>
<thead>
<tr>
<th>Message</th>
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<tbody>
<tr>
<td>1. I choose to respect my own body and the bodies of others.</td>
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<tr>
<td>2. I have the right to say “no” and the responsibility to respect a “no” to any unwanted touch or attention.</td>
</tr>
<tr>
<td>3. I make good choices for my health.</td>
</tr>
<tr>
<td>4. I choose friends who are loyal and good for me.</td>
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<tr>
<td>5. I have the right to be protected, safe and loved. I can get help when I need it.</td>
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<tr>
<td>6. I think boys and girls should be valued equally.</td>
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<tr>
<td>7. I care for you; I care for me. We care for each other.</td>
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<tr>
<td>8. I have a purpose in life and who I am matters.</td>
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</tbody>
</table>

## Grade 7-9
Eight core messages to be integrated throughout the IMP curriculum

**SOUTH AFRICAN CHILDREN DECLARE THE FOLLOWING:**

<table>
<thead>
<tr>
<th>Message</th>
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<tbody>
<tr>
<td>1. The safest choice is not to have sex.</td>
</tr>
<tr>
<td>2. You have the right to say no to sex in any situation.</td>
</tr>
<tr>
<td>3. If you choose to have sex, use a condom every time.</td>
</tr>
<tr>
<td>4. Stay faithful to one partner at a time to protect yourself, your partner and your community.</td>
</tr>
<tr>
<td>5. If you are having sex, get tested for HIV and other STIs regularly.</td>
</tr>
<tr>
<td>6. Both men and women are responsible for preventing pregnancy, HIV and other STIs.</td>
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</tbody>
</table>
Grade 10-12
Eight core messages to be integrated throughout the IMP curriculum

SOUTH AFRICAN CHILDREN DECLARE THE FOLLOWING:

1. I will choose if, and when, to have sex and when not to.
2. I have the right to say “no” and the responsibility to respect “no” to sexual attention and sex at any time and in any situation.
3. If my partner and I choose to have sex, my partner and I will use a condom correctly every time.
4. To protect myself and others, I need to be honest and communicate well in sexual relationships.
5. I respect my own and others’ well-being.
6. I know my HIV, STI, and general sexual and reproductive health status.
7. My partner and I are equally responsible for preventing pregnancy, HIV and other STIs.
8. I want to be part of a community that stops gender harm and violence and creates safety and peace in its place.

APPENDIX 6: THE DIMENSIONS OF PSYCHOSEXUAL DEVELOPMENT

<table>
<thead>
<tr>
<th>DIMENSION</th>
<th>DESCRIPTION</th>
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<tbody>
<tr>
<td>Physical</td>
<td>The genetic, biological and hormonal factors that influence our sexual response from the first moments of conception and throughout the seasons of our lives.</td>
</tr>
<tr>
<td>Cognitive</td>
<td>Perceiving one’s body, gender and growth-producing sexual behaviour, as well as that of the opposite sex, with a positive attitude.</td>
</tr>
<tr>
<td>Emotional</td>
<td>Feeling comfortable, confident and competent with one’s body and sexuality, and with that of the opposite sex.</td>
</tr>
<tr>
<td>Social</td>
<td>Relating with persons of the same and opposite sex in a healthy way; having the capacity for self-disclosure; being able to sustain friendship and intimacy.</td>
</tr>
<tr>
<td>Moral</td>
<td>Valuing the ways that allow and encourage the behaviours necessary for ongoing sexual growth.</td>
</tr>
<tr>
<td>Spiritual</td>
<td>Affirming the presence of a god/power beyond our reality and the sacred in our sexual feelings and expressions; coming to recognise that sexuality and spirituality are complementary forces.</td>
</tr>
</tbody>
</table>
APPENDIX 7: THE STAGES OF ADOLESCENCE

Adolescence is characterised by profound biological, psychological, and social developmental changes. It is considered one of the stormiest times in a human being’s life cycle. It is commonly divided into three periods:

1. early adolescence (ages 11 to 14),
2. middle adolescence (ages 14 to 17), and
3. late adolescence (ages 17 to 20).

These divisions, however, are arbitrary; growth and development occur along a continuum that varies from person to person. Traditionally, the adolescent has been characterised as idealistic, unstable, rebellious, uncertain, loving, dependent, conforming, and, above all, as sexually confused. The biological onset of adolescence is signalled by a rapid acceleration of skeletal growth and the beginning of physical sexual development. The psychological onset is characterised by an acceleration of cognitive development and the consolidation of personality formation. Socially, adolescence is a period of intensified preparation for the coming role of young adulthood.

### Early adolescent stage (approximately 10-14 years of age)

With the emergence of secondary sex characteristics, a powerful new energy becomes present in the adolescent’s body. They naturally explore their sexuality. In early adolescence, the random, generally disconnected sexual thoughts and feelings of childhood begin to weave themselves into thematic fantasies. In these fantasies, adolescents imagine themselves to be in sexual and romantic situations with real or imagined people. These fantasies enable the adolescent to integrate emotions and intellect with genital sexuality and lead them towards socially-oriented sexuality. Many boys will experience their first nocturnal emission in early adolescence. This experience may be confusing or pleasurable and may include sexual fantasies.

**Movement toward independence:** emerging identity shaped over time by internal and external influences; moodiness; improved abilities to use speech to express oneself; more likely to express feelings by action than by words (may be more true for males); close friendships gain importance; less attention shown to parents, with occasional rudeness; realisation that parents are not perfect; identification of their own faults; search for new people to love in addition to parents; tendency to return to childish behaviour during times of stress; peer group influence on personal interests and clothing styles.

**Future interests and cognitive development:** increasing career interests; more interested in the present and near future; greater ability to work.

**Sexuality:** girls mature physically faster than boys; shyness, blushing, and modesty; more showing off; greater interest in privacy; experimentation with body (masturbation); worries about being normal.

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6. This appendix is adapted from the ACT for Youth Upstate Center of Excellence’s Research Facts and Findings: Stages of Adolescent Development by Sedra Spano, which was published in 2004. You can find the publication at: [http://www.actforyouth.net/resources/rr/rr_stages_0504.pdf](http://www.actforyouth.net/resources/rr/rr_stages_0504.pdf)
Middle adolescent stage (approximately 15-16 years of age)

Middle adolescence is a time of being highly distracted and absorbed by sexuality and sexually related physical changes. Middle adolescents masturbate with more frequency and intensity than any other phase. They are preoccupied with sex-related issues, such as sexually-oriented books, magazines or T.V. programmes, and with clothes, music, dates, and dances. Homosexual experiences, usually transient, may also occur in middle adolescence. Many adolescents need reassurance about the normality of an isolated homosexual experience and confirmation that it does not indicate a permanent homosexual orientation. During late adolescence, boys and girls spend increasingly more time together and sometimes even engage in sexual acts like kissing, petting etc. Relating sexually during this phase is primarily experimental, self-centred, and mixed with other needs and emotions.

Movement toward independence: self-involvement; alternating between unrealistically high expectations and worries about failure; complaints that parents interfere with independence; extremely concerned with appearance and with one’s own body; feelings of strangeness about oneself and one’s body; lowered opinion of and withdrawal from parents; effort to make new friends; strong emphasis on the new peer group; periods of sadness as the psychological loss of parents takes place; examination of inner experiences, which may include keeping a diary.

Future interests and cognitive development: intellectual interests gain importance; some sexual and aggressive energy directed into creative and career interests; anxiety can emerge related to school and academic performance.

Sexuality: concerns about sexual attractiveness; frequently changing relationships; more clearly defined.

Late adolescent stage (approximately 17-21 years of age)

This period extends from the end of adolescence to the mid-thirties. Early adulthood is the time of peak physical abilities (e.g. strength, speed, agility, and fertility), the assumption of major social roles, and the evolution of an adult self and life structure. The successful passage into adulthood depends on satisfactory resolution of childhood and adolescent crises. The 20s are spent, for the most part, exploring options for occupation and marriage or alternative relationships, and making commitments in various areas. In this period, the tasks are enormous as they are exhilarating: to shape a dream, that vision of ourselves that will generate energy, aliveness and hope; to prepare for a lifework; and to form the capacity for intimacy. Throughout this stage, the individual has the opportunity to further develop and reach sexual maturity. Biologically the young adult begins to engage a sexual lifestyle, i.e., celibacy, commitment to marriage, or multiple sexual partners.

Movement toward independence: firmer identity; ability to delay gratification; ability to think through ideas; ability to express ideas in words; more developed sense of humour; interests become more stable; greater emotional stability; ability to make independent decisions; ability to compromise; pride in one’s work; self-reliance; greater concern for others.

Future interests and cognitive development: more defined work habits; higher level of concern for the future, thoughts about one’s role in life.

Sexuality: Concerned with serious relationships; clear sexual identity; capacities for tender and sensual love.

Physical changes: Most young women are fully developed. Young men continue to gain height, weight, muscle mass and bodily body hair.

Ethics and self-direction: Capable of useful insight; focus on personal dignity and self-esteem; ability to set goals and follow through; acceptance of social institutions and cultural traditions; self-regulation of self-esteem.
### APPENDIX 8: HUMAN SEXUALITY: BINARIES AND BOXES

<table>
<thead>
<tr>
<th>Sex</th>
<th>Gender</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biological characteristics:</td>
<td>Socially constructed: what society tells us</td>
</tr>
<tr>
<td>• male: penis, testes, male sex hormones (testosterone)</td>
<td>• man: must be <strong>masculine</strong> – big, strong, muscles</td>
</tr>
<tr>
<td>• female: vagina, breasts, ovaries and uterus, female sex hormones (oestrogen, progesterone)</td>
<td>• woman: must be <strong>feminine</strong> – dainty, makeup, wears dresses</td>
</tr>
</tbody>
</table>

**Intersex**

Intersex people have biological characteristics that are considered “female” and others that are considered “male”.

For example, a woman with a vagina but with internal testes producing high levels of male sex hormones. i.e. external female characteristics but internally also has male characteristics.

**Transgender**

Some people feel that their sex (their biological identity) does not match their gender identity/expression. These people are called transgender men and women. They may express the way they feel by verbally: e.g. “I was born in the wrong body.”

**Transvestite/cross-dresser**

A gender expression where a person wears clothing, associated with the opposite sex, e.g. a man who likes to dress in clothing, make-up associated with women.

**Transsexual**

Medical term: related to surgery, hormone therapy

Term to describe a person who identifies as a gender different to their biological characteristics and decides to have surgery and hormone therapy in order to change their physical appearance, i.e. a trans person may feel that they are a man trapped in a woman’s body or a woman trapped in a man’s body. Must only be used as an adjective as below:

- male to female: transsexual woman
- female to male: transsexual man

**Sexual Orientation**

Who you are attracted to, want to spend your life with, etc.

- heterosexual (male and female)
- homosexual (male and male; female and female)

Bisexual people are attracted to and fall in love with people from both sexes.

**Sexual Play**

Body parts that go together in sexual play:

- penis
- vagina
- hands
- mouth
- anus
- breasts

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7. Transvestite is an outdated term and often viewed as offensive. As a rule, use cross-dresser.
APPENDIX 9: EFFECTIVE PEDAGOGICAL STRATEGIES FOR COMPREHENSIVE SEXUALITY EDUCATION

Sexuality education and interactive methods

Using interactive methods which actively involve learners in their learning process, is an effective way of teaching about sexuality and HIV prevention. Here are some of the methodologies that can be used to successfully develop skills:

<table>
<thead>
<tr>
<th>Methodology</th>
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</thead>
<tbody>
<tr>
<td>role play</td>
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<tr>
<td>brainstorming</td>
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<tr>
<td>class discussions</td>
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<tr>
<td>research</td>
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<tr>
<td>storytelling</td>
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<tr>
<td>fishbowl technique</td>
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<tr>
<td>drama</td>
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<tr>
<td>educational games and stimulation</td>
</tr>
<tr>
<td>demonstration and guided practice</td>
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<tr>
<td>group discussions</td>
</tr>
<tr>
<td>decision mapping or problem trees</td>
</tr>
<tr>
<td>case study</td>
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<tr>
<td>pair work</td>
</tr>
<tr>
<td>debate</td>
</tr>
<tr>
<td>audio and visual activities, e.g. art</td>
</tr>
</tbody>
</table>

1. **Interactive teaching methods promote self-discovery by:**
   - involving learners in the learning process, the materials enable the learners to discover solutions for themselves.

2. **Promote peer learning through:**
   - interactive methodologies which allow learners to learn from each other.

3. **Interactive teaching methods reinforce life skills through:**
   - interactive methodologies which help learners to practise skills such as communication, decision-making, assertiveness, self-awareness and stress management.

Listed below are principles of sexuality and HIV prevention, which prove to be essential to sexuality education:

- **Promote inclusion** because sexuality education is for all people, regardless of their HIV status, to live positive and healthy lives.
- **Require** educators and learners to challenge gender stereotypes so that all people learn to protect themselves and others.
- **Organise** classes around **learner-centred and participatory methods** so that learners can practise developing skills.
- **Validate learners’ self-discovery** so that they can apply positive healthy behaviours to their own lives.
- **Encourage mutual respect** in the classroom so that learners can express themselves without fear of being shamed.
APPENDIX 10: CHILD PROTECTION AND DISCLOSURE PROTOCOL

The role of the educator
- Identify child abuse, neglect or forms of child labour.
- Record incidences of child abuse.
- Report/notify authorities if a learner that has been abused physically or sexually or has been deliberately neglected as outlined in the Children's Act, 2005 (Act 38 of 2005).
  - When notifying, report the implications first (refer to Form 22).
- Refer cases of abuse.

CHILD ABUSE GUIDELINES
APPROVED JUNE 2005; REVISED APRIL 2010
- To facilitate disclosure where appropriate.
- To support the learner throughout the process.
- To facilitate preventative measures/programmes through life skills education.

NB: The role of the educator is to report abuse and to provide support to the learner and NOT to investigate the case.

PROCEDURE
Section 110 of the Children's Act, Act 38 of 2005 states:

“(l) Any correctional official, dentist, homeopath, immigration official, labour inspector, legal practitioner, medical practitioner, midwife, minister of religion, nurse, occupational therapist, physiotherapist, psychologist, religious leader, social service professional, social worker, speech therapist, teacher, traditional health practitioner, traditional leader or member of staff or volunteer worker at a partial care facility, drop-in centre or child and youth care centre who on reasonable grounds concludes that a child has been abused in a manner causing physical injury, sexually abused or deliberately neglected, must report that conclusion in the prescribed form to a designated child protection organisation, the provincial department of social development or a police official;

a) Any person who, on reasonable grounds believes that a child is in need of care and protection, may report that belief to the provincial department of social development, a designated child protection organisation or a police official (3) A person referred to in subsection (1) or (2) – must substantiate that cone/avian or belief to the provincial department of social development, a designated child protection organisation or police official; and

b) Who makes a report in good faith is not liable to civil action on the basis of the report.”

The above-mentioned section compels persons, as outlined above, to notify either the Department of Social Development, a designated child protection organisation (e.g. Child Welfare South Africa, Christelike Maatskaplike Raad (CMR), Rata Social Services, Tutela, etc.) or a police official, through the completion of Form 22.
On notification, the Director General (DG) will request a police officer, social worker or authorised officer to take appropriate action to ensure the safety and welfare of the child. A social worker or other designated person will conduct a preliminary investigation into the circumstances giving rise to the concerns with regard to the child.

Should the preliminary investigation reveal reasonable grounds for taking action, further prescribed actions will be taken to comply with the regulation of the Children’s Act.

A provincial child protection register will be kept at the various provincial offices of the Department of Social Development. Other departments such as the DoH, DBE, the South African Police Services (SAPS) and the Department of Justice (DoJ) are encouraged to keep their own registers with a view to provide prevention services.

Copies of Form 22 must be kept in every school principal’s office and should be available to all educators for completion in the event of suspected or disclosed abuse. Three copies of the form must be completed and distributed as follows:

1. The original is to be submitted to the nearest Department of Social Development (DSD) or designated child protection organisation for intervention.
2. A copy is to be submitted to Special Needs Education Services (SNES) of the relevant district office of the provincial education department for record keeping and coordination.
3. A copy is to be kept at the school.

**SCENARIOS**

There are three scenarios to consider:

1. Suspicion or allegation of any form of abuse of one of the learners, including risk factors relating to worst forms of child labour
2. A learner has disclosed or someone else reports an incident to you
3. Any incidents of alleged abuse committed by an educator/staff member

**SCENARIO 1: Suspicion or allegation of any form of abuse of a learner**

Start gathering information as soon as you begin to suspect child abuse. Build a case in the learner’s file. As a suggestion, draw a picture of a child and as you observe signs of abuse, draw these onto the picture, specifying the injury and the date upon which you observed it.

**Example:**

A. Leg injury/broken leg: 12-11 2010
B. Arm injury/severe bruises: 11-01-2011
C. Head injury: 15-06-2011
Monitor behaviours such as absenteeism and, if the learner does not disclose directly, note whether behaviour patterns such as late arrival or the poor condition of a child could indicate forms of child labour. For example, absence on market days, dipping days, during planting/harvest seasons etc. may be indications of child labour. Consult with the principal and notify the local DSD or any designated child protection organisation and complete Form 22 as indicated in the circular of the Department of Education, Sports and Culture. The case must then be referred to the school management team (SMT) for ongoing support.

SCENARIO 2: A learner has disclosed or someone else reports an incident of child abuse to you

1. Write down what the learner/person has shared (verbatim, if possible).
2. Remember that non-verbal communication is very important:
   a) Your position when speaking to the learner/person is important:
      • sit next to the learner and not behind your desk.
   b) Be relaxed and open-minded.
   c) Maintain a comfortable level of eye contact.
   d) Be mindful of your tone of voice.
   e) Be mindful of your facial expressions, i.e. take care not to express shock, disbelief, anger, etc.

   NB: ALWAYS be aware of the LEARNER’S needs.

3. Ascertain the learner’s immediate need for safety.
4. Discuss the matter with the principal or the school counsellor ONLY.
5. Discuss the next steps with the principal/school counsellor, e.g. contacting a social worker/specialists/support persons, contacting the parents, visiting the clinic/hospital for a medical opinion. Do not take sole responsibility for this step.
6. Think through the potential consequences of each action for the learner and the school.
7. To decide on further steps to be taken, consult with the parent(s)/guardian(s); the SNES official responsible for child abuse cases; the area social worker; the community nurse; the Family Violence, Child Abuse and Sexual Offenses office (FCS) of the SAPS (formerly the Child Protection Unit) etc.
8. Take action as decided after consultation with those you have consulted.
9. If it has been decided, refer to a specialist for attention (i.e. hospital, police, social worker etc.).
11. Refer to the school-based support team (SBST) for ongoing support of the learner.
12. FOLLOW UP. For example, contact the social worker or the FCS officer regularly for updates.
13. Provide support to the learner throughout the process.

VERY IMPORTANT

• Should there be a police investigation and court case, the case is treated as sub judice – be careful not to discuss any information regarding the incidence of child abuse.
• Should you be the first person to whom a child has disclosed abuse, you can be subpoenaed to appear in court to give evidence on what the child told you.
• Be specific in your description of what the child told you. Do not expand or give your own opinion on the matter. Use the words that were used by the child.
• You cannot refuse to appear in court once you have been subpoenaed. Should you be subpoenaed, inform your principal and discuss the court procedures with the social worker or your lawyer.

**POSITIVE RESPONSES TO THE LEARNER**

- I believe you.
- I am glad you told me.
- I am sorry it happened to you.
- This must have been a bad experience. (NB: This should be used carefully – when the learner expresses negative feelings – as a way of expressing empathy and reflecting the learner’s feelings)
- Always remember, it is not your fault.
- I cannot make promises not to tell.
- I need to speak to someone who will help you, but I will be there to support you.

**OTHER IMPORTANT RESPONSES TO THE LEARNER**

- Your body belongs to you. You have the right not to be abused.
- Sexual abuse is never your fault. Nothing a child does or doesn’t do, excuses an older person who uses a child for sexual pleasure.
- Sexual abuse is harmful. The deepest hurt is the way sexual abuse makes children feel about themselves.
- Good people can do bad things. Abusers may be good people in other ways, but abuse is wrong and must be stopped.
- Usually sexual abuse does not stop by itself. Tell someone who will listen and do something about it.
- Keep telling people you trust until someone listens.
- What happens to the abuser is never your fault.

**SCENARIO 3: In cases of alleged abuse by an official of the Department of Education (e.g. educator, principal, admin staff member etc.)**

1. Inform the principal (if the perpetrator is school personnel) or the circuit manager (if the perpetrator is the principal), immediately. The principal or circuit manager has to follow the prescribed departmental procedures for disciplinary action.
2. Follow up with a letter of confirmation to the principal or circuit manager with copies to the district manager and the labour section of the Department.
3. Write down, verbatim (as far as possible), what the child/person has said.
4. Remember that **non-verbal** communication is very important:
   a) Your position when speaking to the learner/person is important:
      - sit next to the learner and not behind your desk.
   b) Be relaxed and open-minded.
   c) Maintain a comfortable level of eye contact.
d) Be mindful of your tone of voice.

e) Be mindful of your facial expressions, i.e. take care not to express shock, disbelief, anger, etc.

5. Ascertain the learner’s immediate need for safety.
   a) When did it happen?
   b) Where did it happen?
   c) Who did this to you?
   d) When was the first time this happened to you?
   e) Do you need immediate medical attention? (If the child has been raped, has open wounds, severe marks, etc.)

6. Discuss the matter with the principal or the school counsellor ONLY.

7. Discuss the next steps with the principal/school counsellor, e.g. contacting a social worker/specialists/ support persons, contacting the parents, visiting the clinic/hospital for a medical opinion. **Do not take sole responsibility for this step.**

8. Think through the potential consequences of each action for the learner and the school.

9. To decide on further steps to be taken, consult with the parent(s)/guardian(s); the SNES official responsible for child abuse case; the area social worker; the community nurse; the Family Violence, Child Abuse and Sexual Offenses office (FCS) of the SAPS (formerly the Child Protection Unit) etc.

10. Take action as decided after consultation with those you have consulted.

11. If it has been decided, refer to a specialist for attention (i.e. hospital, police, social worker etc.).

12. Complete **Form 22: Reporting of Abuse or Deliberate Neglect of Child.**

13. Refer to the school-based support team (SBST) for ongoing support of the learner.

**14. FOLLOW UP.** For example, contact the social worker or the FCS officer regularly for updates.

15. Provide support to the learner throughout the process.

**IMPORTANT: IN CASES WHERE THE ALLEGED PERPETRATOR IS A LEARNER AT THE SCHOOL.**

- Specialist intervention is necessary.
- The dynamics of a child perpetrator are very complex.
- Consult with Childline or a SNES official responsible for child abuse cases, before taking any disciplinary action with regard to the alleged perpetrator.
- Refer the case to the SBST for a support intervention programme.
APPENDIX 11: OBSERVER OR “CRITICAL FRIEND” CHECKLIST

Instructions
Once the lesson is over, please put on your observer or critical friend cap and reflect on what happened during the lesson. What did you see, feel and hear? Your observations will help your colleague who has just conducted the lesson as well as all those in your group to improve the lesson for the next time it is taught in the classroom. Your feedback is very important! You have five minutes to complete the following checklist.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Title of the lesson you observed:</td>
</tr>
<tr>
<td>2.</td>
<td>Lesson number:</td>
</tr>
<tr>
<td>3.</td>
<td>Did the educator that presented the lesson follow the script? What was left out, if anything?</td>
</tr>
<tr>
<td>4.</td>
<td>What participatory techniques did you see the educator using in the lesson?</td>
</tr>
<tr>
<td>5.</td>
<td>What is one thing you liked, that the educator did, during the lesson?</td>
</tr>
<tr>
<td>6.</td>
<td>What is one thing you liked, that the educator did, during the lesson?</td>
</tr>
<tr>
<td>7.</td>
<td>What questions do you have about the lesson?</td>
</tr>
</tbody>
</table>

8. A critical friend is typically a colleague or other educational professional, who is committed to helping an educator; a critical friend is someone who is encouraging and supportive, but who also provides honest and often candid feedback that may be uncomfortable or difficult to hear. In short, a critical friend is someone who agrees to speak truthfully, but constructively, about weaknesses, problems, and emotionally charged issues. (http://edglossary.org/critical-friend/)
APPENDIX 12: THE CSE ACTIVITY IMPLEMENTATION PACKAGE

Key implementers: Care & Support, Curriculum, Teacher Development, Governance & Management, EMIS, ISHP
APPENDIX 13: DATA COLLECTION MEMO

PURPOSE
This memo presents the data collection approach for the South Africa HIV Prevention Education Activity’s indicators that the Activity produces data with higher quality and the data collection method can be sustained by the Department of Basic Education (DBE). The two indicators required by DBE, PEPFAR and the National Strategic Plan for HIV, STIs and TB (NSP) for this Activity are as highlighted below:

1. The number of learners reached through a combination of prevention interventions aimed at the retention of learners in schools
   - an NSP indicator (i.e. 30–50% of learners receiving CSE through scripted lesson plans and SRH services in schools)
2. The percentage of schools that are providing enhanced comprehensive sexuality education

Step 1: Collect data from schools on enrolment at the beginning of the school year.
Collect enrolment data from each of the schools, 10 days after school opens in any given year. In some instances, where data is ready from the district, timeously, the enrolment data can be collected from the district. This will vary per area. The documents collected from each school will be:
1. Details of the educators allocated to teach LO in that year and the classes allocated.
   - These should be collected from the head of department (HOD) responsible for LO.
2. Class enrolment lists from each class stream from Grade 4 to Grade 12. The class enrolment lists should include the full name, ID number, EMIS number (where applicable), gender and the year of birth.
   - These should be collected from the school principal.

Step 2: Work in partnership with LO head of department and district subject advisors to monitor the implementation of the SLPs.
Once the lesson plans are clearly articulated and have been signed off by the HOD and the principal, taking into consideration the DBE’s Annual Teaching Plan, the implementation of the lessons will begin. For verification and quality assurance, district subject advisors and HODs, with the support of EDC, will mentor educators, monitor implementation and verify that the SLPs are being taught as planned in accordance with the ATPs. There will be monitoring visits to the schools halfway through the implementation of each phase (aligned with ATP and PEPFAR reporting periods) to verify that implementation is taking place.

During the monitoring visits the following will be done:
1. There will be sampling of 10% of the learners’ LO exercise books to verify that lessons were done.
2. There will be discussions with the HOD or the subject advisor on ways to merge the educator assessment/moderation for the implementation of the SLPs to strengthen the DBE system.