



Courage Consent, Sex, Pregnancy & Option Counselling School Lesson Plan

Building our child protection &
empowerment community



Sexual & Reproductive Health Rights



Everyone is entitled to a number of sexual and reproductive health rights.



DEFINE
SEXUALITY



CHOOSE
PARTNER



EQUALITY



NON
DISCRIMINATION



LIFE



LIBERTY &
FREEDOM



SAFETY &
SECURITY



PRIVACY



FREE FROM
TORTURE



FREE FROM
VIOLENCE



FREE FROM
COERCION



FREE FROM
ALL ABUSE



QUALITY
HEALTH CARE



INFORMATION



EDUCATION



PARTICIPATION



ENTER, FORM
OR DISOLVE A
MARRIAGE



HAVE CHILDREN,
(NUMBER &
SPACING)



FAMILY CARE
& SUPPORT



JUSTICE &
REDRESS



courage

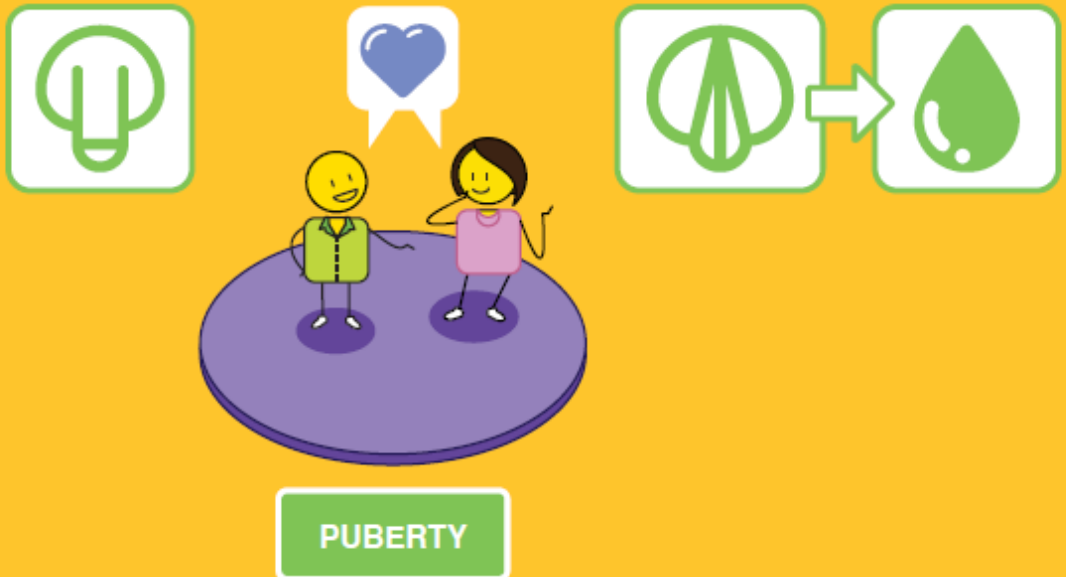
My future vision



With these rights in mind, think about the kind of future you imagine for yourself. Develop a vision for this future world by writing or drawing a picture of what it would look like in the space provided below.

A large, empty white rounded rectangle intended for writing or drawing a future vision.

Understanding puberty



Between the ages of 11 and 12, young boys and girls go through puberty, this can happen before or after these ages, but this is the average.

For young boys, their penis and testicles grow, and their scrotum gradually becomes darker. Their pubic hair becomes thicker and curlier, underarm hair starts to grow, and they also start to sweat more. Boys need to take extra care when it comes to personal hygiene when they reach puberty.

For girls they will get their first period, which is also referred to as menstruation or menarche, where they bleed from their vagina for three to seven days every month. Personal hygiene is also important for girls at puberty, and they will need support with sanitary products to help them at this time. Their pubic hair will get thicker, and some girls may gain a bit of weight. Their period may be a bit erratic at first but eventually it will settle into a 28-day cycle which they should monitor.

At puberty, girls become fertile and are able to conceive and have a child, but this is not ideal until they become adults at the age of 18 and are able to take care of their child.

At puberty, girls and boys will both start feeling sexual attraction. This can be for the opposite or same sex, but to fall pregnant, a girl will need to have sex with a boy.

For more information on sex and gender identity please visit our Courage website to watch our helpful video on the subject.



Understanding consent



One of the first choices we have when we are sexually attracted to someone is whether or not to have sex with them.

No one is allowed to force a girl or a boy to have sex before they are ready to do this. This is referred to as 'consent', when both parties freely and voluntarily agree to have sex. They feel safe and understand what having sex is all about, and they are present or conscious of what is happening at the time.

If a girl or boy says that they do not want to have sex, but are forced to, that is referred to as sexual assault and rape, and is a criminal offence.

The age of consent to have sex is 17 years old in most countries. This means that if someone is older than 17 and has sex with a child that is less than 17 years of age, they can be prosecuted for statutory rape, even if they believe that both parties have consented.

If someone is forcing you to have sex against your will, you must tell a child protection officer so that they can protect you. This could be a trusted adult family or community member, a teacher, a social worker, your doctor or nurse or a police officer. Each of these people have a responsibility to protect you from sexual abuse and rape.



(Write the telephone number of your local child helpline here)



Understanding sex



INTERCOURSE / SEX



SAFE SEX



UNSAFE SEX

If there is consent and the boy and girl decide to have sex, they have another choice to make. This is the choice between having safe or unsafe sex. Safe sex refers to using contraceptives whilst being sexually active. This can refer to a male condom that is placed over the boy's penis or a female condom, diaphragm or cap, that is placed inside a girl's vagina before and during sex.



EJACULATION & FERTILIZATION

Other forms of contraceptives that can prevent pregnancy but do not prevent sexually transmitted disease include the pill, the contraceptive injection, implant or patch or an intra-uterine device, also called an IUD or coil. Girls should consult with a gynaecologist or woman's health care practitioner to decide which option is best suited to their needs.

Remember that no form of contraceptive is 100% safe, contraceptives such as the pill, injection and implant take at least seven days to start working and can be impacted by illness and some medications. If you do have unprotected sex by mistake, you can speak to your doctor or pharmacist about emergency contraception, which can be taken up to five days after having unprotected sex but should only be considered in an emergency.

If the boy and girl decide to have sex without contraceptive protection, this is referred to as 'unsafe sex' as it can result in pregnancy or sexually transmitted diseases such as the human papilloma virus or HPV (sometimes referred to as genital warts), chlamydia, gonorrhoea and HIV which can lead to AIDS.

Pregnancy happens when the boy ejaculates his sperm into a girl's vagina and one of his sperm fertilises one of her eggs inside her uterus. You can fall pregnant after having sex just once!



Understanding pregnancy



PREGNANCY TEST & CONFIRMATION



OPTION COUNSELLING



BABY'S GROWTH IN UTERO

Foetal Growth from 0-40 weeks

If fertilization takes place, a baby will start to grow inside the woman's uterus. You will know that you are pregnant if your period or menstruation stops. If you are sexually active and you miss a period, you should conduct a pregnancy test immediately.

You can either have a urine or blood test to find out if you are pregnant. A urine pregnancy test can be purchased at a pharmacy and should only be done after you have missed your period, which could be three to four weeks after having unprotected sex. A blood test can identify a pregnancy around two weeks after having unprotected sex.

The sooner you know if you are pregnant or not, the better, as this can be a stressful time if the pregnancy is unplanned, and you will also have more options available to you. If you discover that you are pregnant and this was unplanned, you should consult with a doctor, nurse, woman's health care practitioner, social worker or counsellor about the options available to you.

These options are discussed in detail later, but include choosing to parent your child, having an abortion if this is legal in your country (only possible up to 14 weeks after conception). Other options include kinship care, where another family member takes care of your child, foster or institutional care, which are both temporary options usually for the period of around 2 years, or adoption, where you formally place your child into the care of another parent or family.

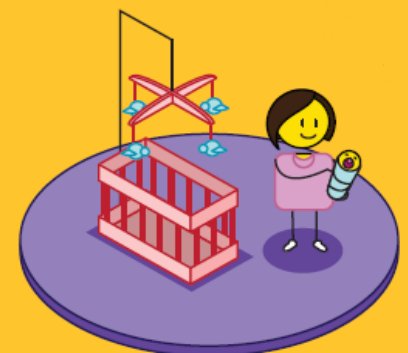
Some women choose to abandon their child, but this is an illegal option and should not be considered as it is detrimental to both the mother and child's health and wellbeing.

Understanding pregnancy



BABY'S GROWTH IN UTERO

Foetal Growth from 0-40 weeks



14 WEEKS CUT OFF FOR A LEGAL ABORTION

BIRTH AT +/- 40 WEEKS

A baby grows inside a woman's uterus for around 40 weeks, with three distinct trimesters of just over 13 weeks each. In the first trimester, your baby will grow from a fertilized egg into a moving foetus, with heart, eyes, ears, and working organs. In the second trimester, your baby's features develop, and you may be able to feel your baby move inside you. In the third trimester, your baby will grow rapidly to get ready for birth.

If you choose to have an abortion, you will need to check if these services are available and legal in your country or state, however, most countries where abortion is legal, will only conduct one up to the end of the first trimester between 12 and 14 weeks. Abortions can be considered after this time, if the pregnancy presents a significant health risk to the mother or child. It is important to note that if you do conduct an illegal late abortion in the second or third trimester, this is a crime, and you could be found guilty of 'concealment of birth', should the child die. If the child lives, which can happen after 24 weeks or in the third trimester, they can be born with a number of physical and intellectual challenges due to their prematurity at birth and could struggle with these for the rest of their lives.

If the mother takes care of herself and her baby throughout her pregnancy, goes for regular health check-ups, is careful about what she eats and drinks, and has no drugs or alcohol during this time, she should give birth to a healthy baby at 37 to 40 weeks. A baby born before this may need some post natal care and support as they are considered preterm or premature.



Discussion & Actions



Have a group discussion about this process. Do you have any questions about this process? Is there anything you don't understand or would like more information about? What other sources do you use to find out about sex, birth control and pregnancy? What was your experience of trying to get this information from these other sources? Discuss how we can support each other in realising our sexual and reproductive health rights.

After your discussion, think about all of the things you will need to do to achieve the vision you have defined for yourself. Ask yourself, from today, what do I need to stop doing to achieve my vision? What do I need to start doing? What do I need to continue doing? Write these actions in the space below.

From today I will stop:

1. _____
2. _____
3. _____
4. _____

From today I will start:

1. _____
2. _____
3. _____
4. _____

From today I will continue:

1. _____
2. _____
3. _____
4. _____

Causes & Prevention



Unfortunately, unplanned or crisis pregnancy is a very big problem in many communities. In the next few pages, you will see pictures of a typical community anywhere in the world complete with people, places and the conversations or interactions they are having. This is the Courage Community Map, and each of these conversations represents a child protection challenge or solution taking place in the world today. On the first page is a key that explains all of the different icons and who the different people are. Use this map to identify what you think some of the causes of crisis or unplanned pregnancy are in your community, circle these in red. Then look for what could help to prevent crisis or unplanned pregnancy in your community, circle these (people, places or ideas) in green. Discuss this in teams and then write your answers in the space below.

Causes of Crisis Pregnancy

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

Prevention of Crisis Pregnancy

1.

2.

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8.





















9.

10.

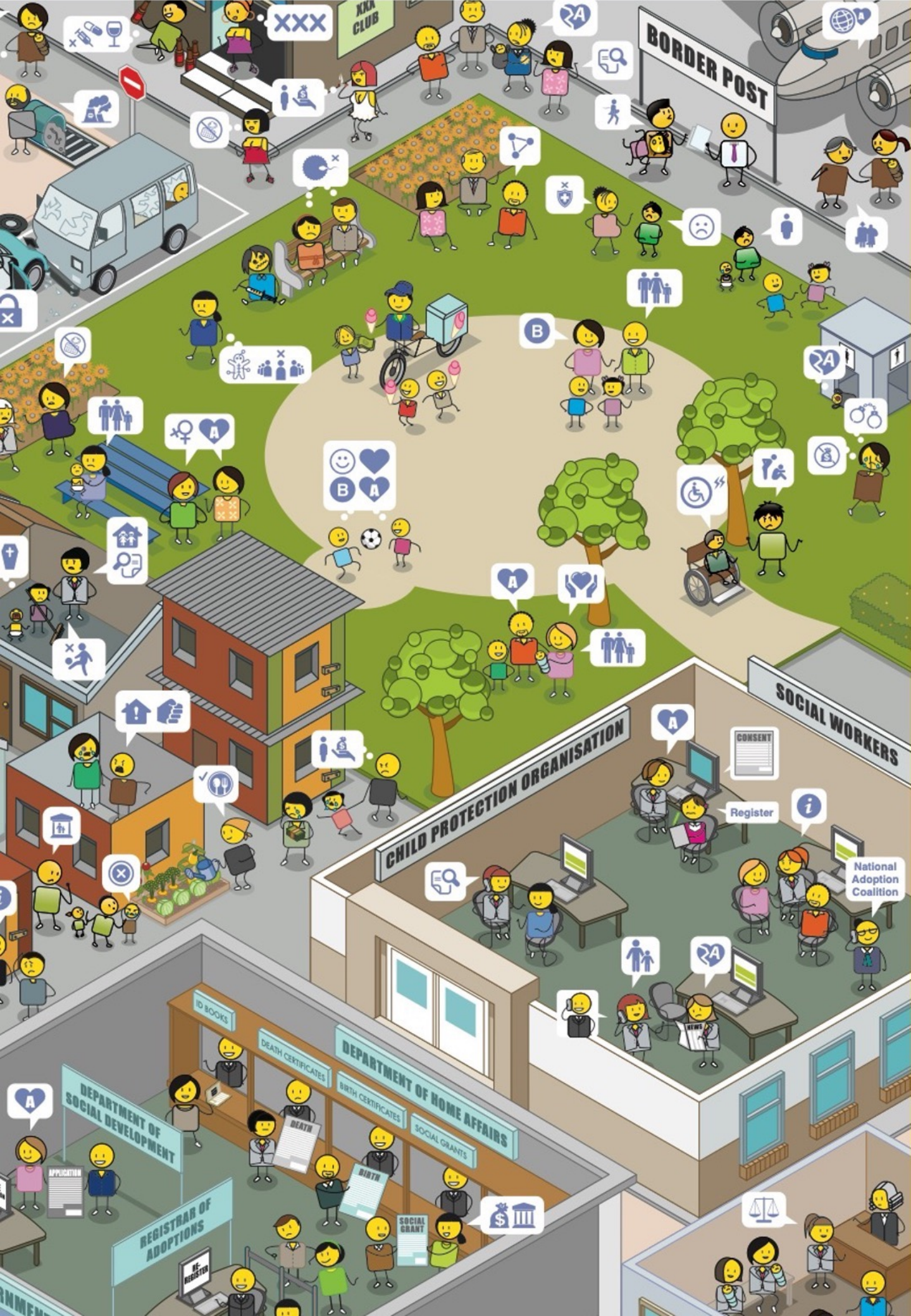
Community Map Key



 Adoption	 Child Labour	 Exposure To Gangsterism	 No Registration or ID Book	 Legal Process	 Sexual Abuse & Rape	 Pornography	 Prostitution		
 Biological Connection	 Child Marriage	 Virginity Testing	 Female Genital Mutilation	 Harmful Circumcision	 Child Trafficking / Abduction	 Self Harming & Suicide	 Bullying		
 Social Grant & Money	 Late Termination Pregnancy / Abortion	 Drug & Alcohol Abuse	 Teen / Foetus / Pregnancy	 No Protection	 ARV's	 HIV / AIDS	 No Health Care		
 Counselling	 Ancestors / Culture	 Harmful Cultural Practises	 Illegal / Crime	 Jail	 Education	 Nutrition	 Obesity	 Poverty	
 Care & Support	 Emotional Abuse	 Neglect	 Abuse Of Children With Disabilities	 Murder	 Physical Abuse	 No Safety & Security	 Discrimination	 Accusation Of Witchcraft	
 Love	 Investigate / Report	 Info	 Infertility	 Birth Control	 Same Sex	 Parenting	 Foster Care	 Children's Home	 Kinship Care & Family
 Abandoned	 Orphaned	 Stressed & Afraid	 Refugees	 Depressed & Sad	 Happy	 Child Headed Households	 Radicalisation & Terrorism	 Greed	 Corporate Social Investment
 Corporal Punishment	 Domestic Violence	 Upset	 No Belonging To Family Or Community	 No Play & Recreation	 Belong To Community	 International Adoption	 Recycling		

 Infant / Child / Teen	 Young Adults	 Pregnant Birth Mother	 Parents	 Grandparents	 Principal/Teacher	
 Spiritual Advisor	 Traditional Leader	 Traditional Healer	 Community	 Doctor & Nurse	 Counsellor / psychologist	 Social Worker
 Police	 Government Official	 Lawyer	 Presiding Officer / Judge	 Sex Workers	 Drug Addict	 Criminal









Option counselling



Unplanned and crisis pregnancy is a reality around the world. The question is once you find yourself in this situation, what do you do about it? Sadly, many young women ignore their pregnancy and hope that it will magically go away, some don't even know that they are pregnant until they start to feel their baby move inside them in their second trimester.

As with everything, the most important step is to acknowledge that you are pregnant and then to explore the various options available to you. If you have fallen pregnant against your will, due to sexual abuse or rape, where someone has forced you to have sex, it is important that you inform a child protection officer. This could be a trusted adult family or community member, a teacher, a social worker, your doctor or nurse, or a police officer. Each of these people have a responsibility to protect you from sexual abuse and rape.



An unplanned pregnancy is a difficult situation to handle all by yourself. At some point you will want to talk to someone in order to share your feelings and get help with the decision-making process. Most girls will start by telling their boyfriend. Telling your parents is never easy and many girls will need some help to do this. Telling sisters and friends can help to share the problem but may not lead to constructive solutions.

Telling a clinic sister, doctor or social worker attached to an antenatal clinic or hospital, a teacher or school counsellor, minister or religious counsellor or contacting a helpline, could lead to a referral to a professional who specialises in the counselling and support of mothers facing an unplanned pregnancy. These counsellors will help you to explore all the options and to reach a responsible decision for both yourself and the foetus/baby.

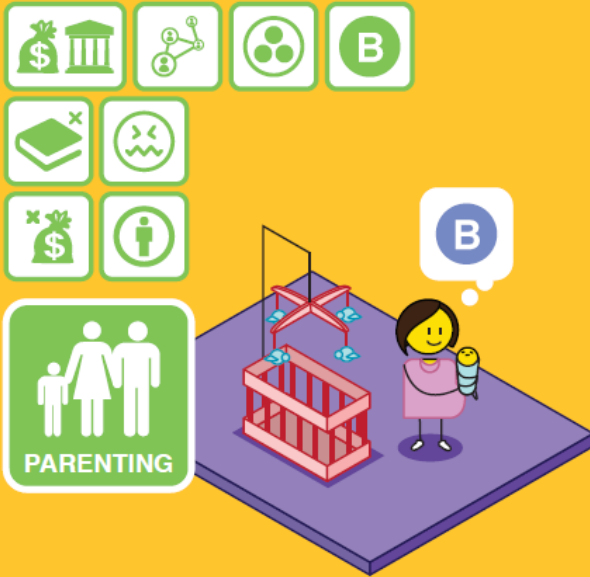


(Write the address of your local healthcare clinic/hospital here)

www.courage-community.com



Options



The first option is deciding to keep your child and to raise it until adulthood as his or her parent and primary care giver. The benefit of parenting is that your child will stay with you, his or her biological mother and/or parents. This will meet the cultural needs of your family, and you can apply for a child-care grant if you are struggling with money and resources.

However, you may lack the finances and family support you need to raise a child on your own. Although you are legally entitled to stay in school you may find it difficult to do this whilst caring for your baby. You may feel isolated, stressed and be subjected to the stigma of being a teenage or single mother in your community. If you are still very young yourself, you may experience some challenges in raising a child on your own, as you are still a child yourself.

If your pregnancy is still in the first trimester (which is the first 12 to 14 weeks), you can seek an abortion at your local clinic or hospital if this is legal in your country or state. Abortions can be considered after this time, if the pregnancy presents a significant health risk to the mother or child. As with all options, having an abortion should be carefully considered. Although your pregnancy will be terminated through this process, it will have an impact on your emotional wellbeing. You may experience post-abortion depression and feelings of regret. It is very important that the abortion is conducted in a legally recognised hospital or clinic, as there can be serious health consequences if you choose to abort your child after the first trimester, through illegal channels.

Choosing to abort your child illegally after 14 weeks is a criminal offence, referred to as 'concealment of birth'. If the child lives, which can happen after 24 weeks, they can be born with a number of physical and intellectual challenges due to their prematurity at birth and could struggle with these for the rest of their life.

Taking illegal medication to bring on an abortion can be very dangerous and lead to the death of both yourself and your child.



Options



Kinship care refers to the caring of your child by a family member, your parents, grandparents or a close relative. This can be done through a formal foster care placement or adoption, or through an informal arrangement between you and your family members.

This option will enable you to maintain a relationship with your child. You will have the emotional and financial support of your family and your child will remain within its biological family, meeting their cultural needs.



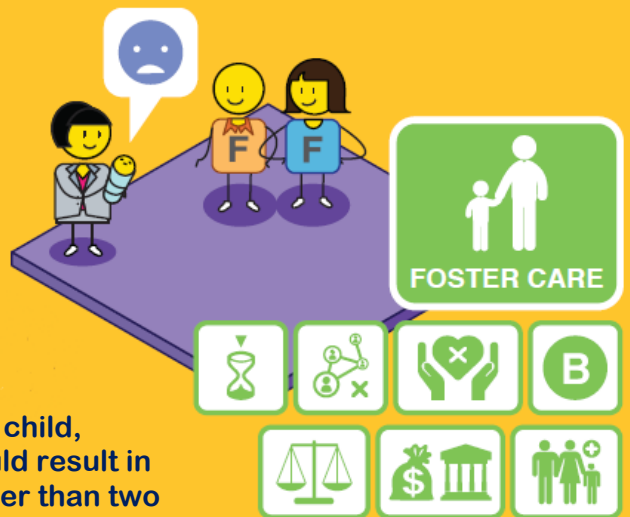
However, you and your child may experience 'role confusion', if your child is brought up as your sibling, rather than as your child.

Kinship care can have a negative impact on older family members as they are expected to take care of young children, well into old age, which can lead to high levels of stress and anxiety. Financial considerations also need to be taken into account and whether the family member is in a financial position to take on another dependent.

Foster care is a temporary child protection solution to give you time as a parent to get organised and prepared to take care of your child yourself.

Foster care is legal, when conducted in accordance with the Children's Act, and is a good temporary solution for keeping a child safe and secure if his or her own family cannot take her them.

You will be able to remain in contact with your child, but this is a temporary relief solution and should result in your reunification with your child after no longer than two years. Foster parents are entitled to a foster care grant which they can apply for at their local Department of Social Development.



As it is a temporary solution, however, there are some concerns that you will need to be aware of, if you make this choice. Foster care can never replace a family environment where a child has a sense of permanence and feels like they belong. The child may struggle with the issue of having an inconsistent carer, they may not be able to bond with a primary care giver and as a result they could feel insecure and struggle with their sense of identity as they grow up.



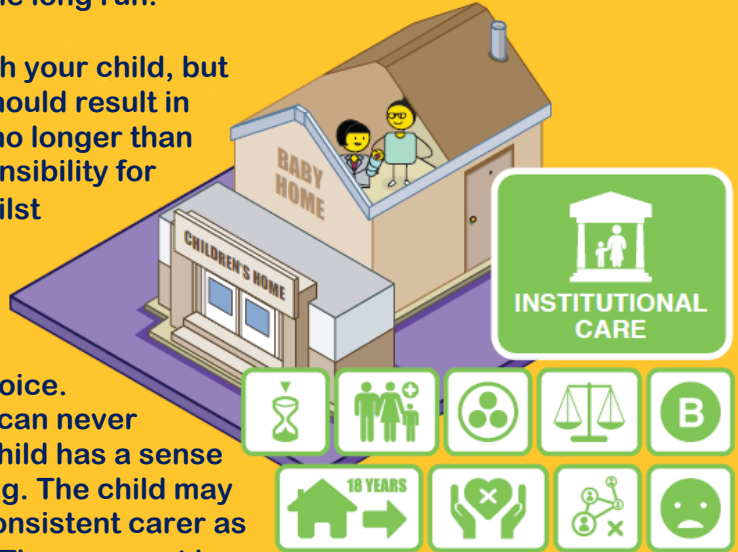
Options



Institutional or residential care is when a child is placed in a children's home, or a group foster care home after going through the necessary process via court. As with foster care, this option gives you time as a parent to get organised so that you can take care of your child yourself in the long run.

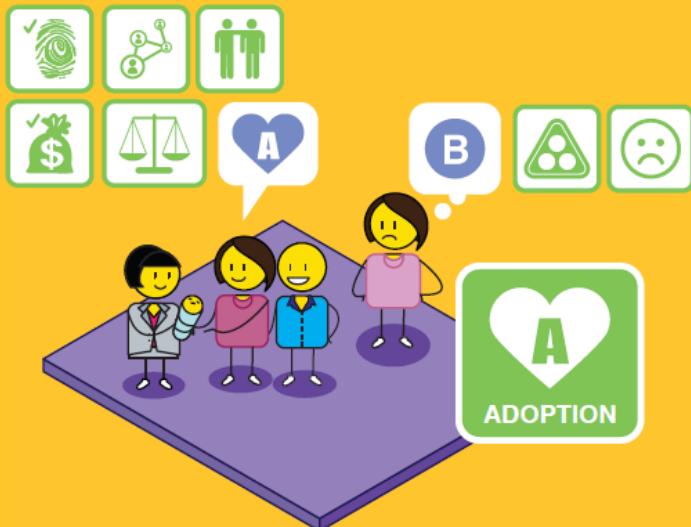
You will be able to remain in contact with your child, but this is a temporary relief solution and should result in your reunification with your child after no longer than two years. The home will take full responsibility for the care and education of your child whilst he or she is in their care.

As it is a temporary solution, however, there are some concerns that you will need to be aware of, if you make this choice. As with Foster Care, a children's home can never replace a family environment where a child has a sense of permanence and feels like they belong. The child may struggle with the issue of having an inconsistent carer as children's homes rely on shift workers. They may not be able to bond with a primary care giver and as a result they could feel insecure and once again struggle with their sense of identity as they grow up.



Adoption is believed to be the best long-term solution for a child outside of being cared for by their own family. It is a legal process that is conducted in accordance with the Children's Act. Should you consider this option, you would need to sign consent to the fact that you will no longer be the parent of your child, and that you have no financial or parental responsibilities towards them.

Your child would get a new family that has been carefully selected to meet their needs in a stable, permanent and loving home. In many countries, you need to be above the age of 18 to legally place your child up for adoption. If you are younger than 18 years, your parents or guardian will need to sign the adoption consent form in your place.



As your child will be brought up by another family, you may experience feelings of loss, regret and grief. Your child may wish to know who their biological family are for ancestral purposes, but they may feel rejected and resent you for placing them up for adoption and not caring for them yourself. Some adoptees struggle with their identity formation due to living with an adopted family, rather than their biological family. You may be able to reconnect with your child when they become an adult, but this will be at their discretion.



Options



Anonymous abandonment of your child is illegal in many countries around the world, whether you leave your child in a safe or unsafe place. Unsafe abandonment places your child at great physical risk and could lead to their death if they are not found in time.

An abandoned child has no sense of identity and no way of tracing their biological family or ancestors. They may experience feelings of neglect and rejection towards their biological parents.

If you abandon your child, and have no contact with them for a period of at least three months, your parental rights can be removed by the courts and your child will be placed up for adoption.

If you feel like you have no alternatives, speak to a child protection officer, a social worker, community counsellor, police officer or health care practitioner. They will be able to advise you on who can help and what actions to take.



A good way to understand and appreciate the life changing impact of an unplanned or crisis pregnancy is through role play. In teams, pretend that one participant is pregnant and that the other is trying to counsel them on the best options available to them. The person pretending to be pregnant should think about what this would mean to them, how it could have happened, and what they think they should do about their circumstance. The person who is counselling should use the different options discussed before to help give advice. Half way through your time, each participant should swap roles to experience both perspectives.

Remember if you are counselling someone experiencing a crisis pregnancy, reach out, engage and empathise with them. Don't judge them, you don't know what the circumstances of their pregnancy is. Share the various options or choices available to them, and empower them to make healthy decisions for themselves and their unborn child.



Ensure that you are aware of the age of majority in your country for choosing the various options, as there are legal implications when the expecting mother and/or biological father are still legally regarded as children.

Some options outlined here may be illegal in certain countries such as abortion and abandonment, and should therefore be dealt with very sensitively.



Discussion & Partnerships



Have a group discussion about the options and role play exercise. Do you have any questions about the options presented? Is there anything you don't understand or would like more information about? What was it like to pretend you were experiencing a crisis pregnancy? What was it like to counsel someone experiencing a crisis pregnancy?

One of the best ways to make sure you achieve your vision for yourself and don't experience an unplanned or crisis pregnancy is to identify the people you will need to partner with to achieve your vision and to stay safe and secure in your community. These could be your friends and family, your teacher, sports coach, school counsellor or social worker. Take a look at the Courage Community Map again and think about all of the partners that can help you achieve your vision for yourself. Circle them on the map in a different colour and then write their names in the space below.

The people I should partner with to achieve my personal vision are?

1.	11.
_____	_____
2.	12.
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8.	18.
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9.	19.
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10.	20.
_____	_____

Statutory & contact details



Courage is an open source child protection and empowerment community engagement programme. We are registered as an NPC No. 2017/422875/08 and an NPO No. 203-137, and have been approved as a Public Benefit Organisation able to provide 18A tax certificates for all donations made in support of the work we do (BPO No. 930076967). You can find all our statutory certificates and annual reports on the Community page of our website.

For more information on how you can partner Courage or make a donation to support the work we do, please contact:

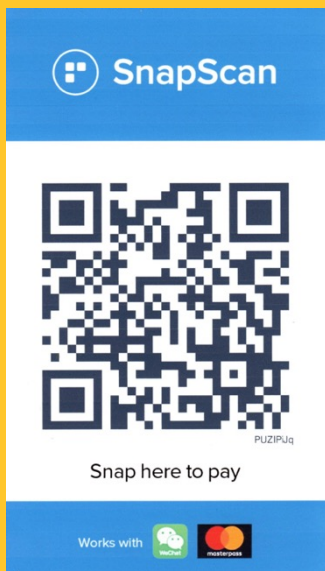
Contact Person: Dr Dee Blackie
Telephone: +27(0)83 3765672
Email: dee@bobi.co.za or couragechildprotection7@gmail.com
Website: www.courage-community.com

To make a contribution

Please see our bank account details below. As a doner you can decide how you would like your donation to be spent by contacting Courage directly. All unspecified donations go towards providing new Courage toolkits and training to child protection organisations in South Africa, Africa and around the world.

Bank Account Details:

Account Name: Courage Child Protection NPC
Bank: Standard Bank of South Africa Ltd.
Branch Code: 006605
Account No: 200877615
Swift address: SBZA ZAJJ
Confirmation/18A: dee@bobi.co.za (Please email for details on issuing of 18A certificates)



Thank you for engaging with our Courage Child Protection & Empowerment community programme – Stay Strong & Take Courage!

