



Relationships and Sexuality Education Year 3

Designed to support the Junior Cycle
SPHE short course (2023)

Activities to
support the
teaching of the
updated Junior
Cycle SPHE
Curriculum 2023




An Roinn Oideachais
Department of Education



NCCA

An Chomhairle Náisiúnta
Curriculum agus Measúnachta
National Council for
Curriculum and Assessment

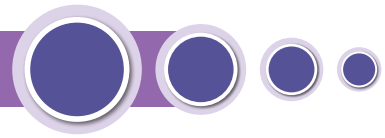


The background features several decorative elements in shades of purple. There is a large, light purple shape on the left side, partially cut off by the edge. A dark purple circle is at the top left. A medium-sized purple circle is on the right. A large purple circle with a white border is at the bottom center. A small dark purple circle is at the bottom left.

The development of this unit of learning was overseen by the Department of Education, and was supported by the National Council for Curriculum and Assessment, and the Health Service Executive.

With special thanks to the students, teachers and schools involved in piloting the activities.

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Introduction

The aim of SPHE as set out in the NCCA Junior Cycle SPHE specification is:

to build students' self-awareness and positive self-worth; to develop the knowledge, understanding, skills, dispositions and values that will enable them to lead fulfilling and healthy lives: empower them to create, nurture and maintain respectful and loving relationships, with self and others; and enhance their capacity to contribute positively to society.

Relationships and Sexuality Education (RSE) is an integral part of SPHE. It is of particular importance for young people at this stage of their development when they are making sense of many experiences, messages, images and information about relationships and sexuality from a range of sources such as their peers, the media and online information. While all of these can be useful, they can also be the root of incorrect, misleading or even harmful information. It is therefore important that young people get opportunities to safely discuss relationships and sexuality issues in the home, the school and other appropriate settings.

All learning in SPHE is underpinned by three cross-cutting elements that are foundational for effective teaching and learning in SPHE: **awareness**, **dialogue**, and **reflection and action**. It is important that the teacher is consciously creating opportunities for the students to become more self-aware and aware of others; designing lessons that encourage classroom dialogue; and prompting students to reflect on what they are learning and what it means for their lives now or in the future.

The activities in this resource are aligned with a range of learning outcomes within Strand 3 of the junior cycle SPHE curriculum, (Relationships and sexuality), and Strand 1, (Understanding myself and others). They build on learning addressed in RSE Units 1 and 2. All activities are designed to be taught with reference to the [Junior Cycle SPHE Toolkit](#) developed by the NCCA. It includes guidance on teaching SPHE in a safe and effective way, and signposts to further resources.

Using the resource

The activities within RSE 3 are a guideline only. Every classroom is different and teachers are best placed to decide on what will be most effective in their classroom.

This resource provides lots of ideas and activities to stimulate discussion and learning, and some topics may need more than one lesson. Depending on the needs of your students and the time available, you may choose to adapt the activities as appropriate. Ensure each lesson begins with an opening stimulus activity, followed by an opportunity to explore and develop insights on the topic, and concludes with a reflection on the meaning of the learning for the students' lives, whether now or for the future.



Activities 1-5: The first five activities allow the students to explore their developing sense of self as they move through adolescence, and the possible impact of social and cultural influences on themselves and their peers. These activities also look at the gendered nature of such influence and how it manifests in everyday life, sometimes including acts of sexual harassment. This theme is further developed through a consideration of how romantic/intimate relationships are portrayed within pop music, and culminates with an exploration of the influence of pornography on young people's understanding, expectations and social norms in relation to sexual relationships.

Activities 6-9: In preparation for decisions about sexual activity in adult life, these activities address some of the relevant emotional and physical considerations to be taken into account, including condom and contraception use, STI awareness and safer sex practices. The activities highlight a range of factors that may afford a young adult the best chance of their first sexual encounter not being a cause of regret.

Activity 10: The concluding activity gives students an opportunity to reflect on their learning across all the activities and how it applies to their lives.

Videos: Throughout the activities, suggested video clips are listed. It is essential that these are previewed and used in accordance with the students' learning needs and school policies. Over time some of these external clips may become unavailable, but should be easy to replace with alternative, relevant, online resources.

Preparing the students: All students benefit from knowing what they are going to be learning and how the lesson is going to unfold. To support students to feel less anxious and more in control, it may be helpful to discuss upcoming learning activities in advance. Agreeing ground rules at the beginning of the school year and revisiting them before teaching this unit will also contribute to more successful teaching and learning.

RSE resources for parents: *Making the 'Big Talk' many small talks* is a series of booklets by the HSE that is aimed at supporting conversations between parents and children about relationships and healthy sexuality development. Currently, there are three booklets published for parents/carers of children aged 4–7, 8–12, and 13–18 years. All of the above are available to order and download, in both English and Irish, from www.healthpromotion.ie and to download from www.sexualwellbeing.ie.

Note: Medical and legal content within RSE 3 was proofed before publication (2025) but is subject to change. All information within the resource is for educational purposes only and should not be interpreted as legal or medical advice.

Strand	Learning outcomes (LOs)
Understanding myself and others	<p>1.2 reflect on their personal strengths and values and how they bring these into relationships</p> <p>1.3 explore the range of influences and life experiences that can impact on self-image and self-esteem and identify ways to nurture a positive sense of self-worth</p> <p>1.5 reflect on gender equity and how gender stereotypes impact on expectations, behaviour and relationships</p>
Relationships and sexuality	<p>3.3 identify signs of healthy, unhealthy and abusive relationships</p> <p>3.4 appreciate the importance of setting healthy boundaries in relationships and consider how to show respect for the boundaries of others</p> <p>3.5 consider the importance of taking care of their reproductive health</p> <p>3.7 explore the pressures to become sexually intimate and discuss ways to show respect for people's choices</p> <p>3.8 appreciate the importance of seeking, giving and receiving consent in sexual relationships, from the perspective of building caring relationships and from a legal perspective</p> <p>3.9 explain the importance of safer sexual activity with reference to methods of contraception and protection against sexually transmitted infections (STIs)</p> <p>3.10 discuss the influence of popular culture and the online world, in particular, the influence of pornography, on young people's understanding, expectations and social norms in relation to sexual expression</p>



Learning activities

- **In activity 1, Social media and self-esteem**, (LO 1.3) students will consider what impacts on their self-image and self-esteem with a particular focus on social media. Within this activity students will explore ways to nurture a positive sense of self-esteem while living in a world heavily influenced by social media messages, some of which can undermine their self-esteem.
- **In activity 2, Gender roles and expectations**, (LOs 1.5 and 3.10) students will explore social norms and how they relate to gender roles and expectations in our society. They will reflect on the possible impact that restrictive gender stereotypes have on all people, individuals and society.
- **In activity 3, No excuses!** (LOs 3.3 and 3.4) students will explore the issue of sexual harassment; why it's so pervasive in society, how it affects adolescents, and what they might do to be a part of the solution.
- **In activity 4, The influence of popular culture**, (LO 3.10) students will discuss the influence of popular culture on young people's understanding of and expectations around relationships and sex, by critically examining a selection of song lyrics and music videos.
- **In activity 5, Pornography: what's the harm?** (LO 3.10) students will discuss why there is growing concern about the harmful effects of pornography, particularly if consumed by adolescents at this stage of their development.
- **In activity 6, Condoms and contraception**, (LO 3.9) students will consider the importance of condom and contraceptive use for people who are sexually active, and discuss the importance of addressing some of the barriers to consistent and correct use.
- **In activity 7, Sexually transmitted infection**, (LOs 3.5 and 3.9) students will discuss ways to reduce or prevent the risk of acquiring and passing on a sexually transmitted infection (STI), and have the opportunity to challenge some STI-related myths.
- **In activity 8, Safer sexual activity**, (LOs 3.8 and 3.9) students will examine what is meant by the term 'safer sexual activity', from both physical and emotional perspectives.
- **In activity 9, No regrets!** (LO 3.7) students will explore reasons for becoming sexually active, and consider the importance of it being an informed and considered decision. This activity also explores how young adults might give themselves the best chance to make their first sexual encounter physically and emotionally healthy.
- **In activity 10, Bringing it all together**, (LO 1.2) students reflect on what they have learned over the course of the unit and what it means for their lives.

Assessment tasks

Assessment in SPHE

The purpose of assessment in SPHE is to enable students to demonstrate the knowledge, skills and dispositions they have gained through their learning. Students can provide evidence of their learning through multiple means of expression, including oral, written, visual, digital and arts-based pieces.

The following suggestions are not intended to be prescriptive.

Make a visual!

Create a collage or visual display showing examples of healthy and unhealthy messages that young people are getting about relationships through popular culture. Your collage/display should indicate why you consider these messages to be healthy or unhealthy.

Or

Create a collage/visual display to show examples of positive gender roles (in popular culture, society, etc.) and explain why you consider them positive.

Take notice!

Create a noticeboard of your learning on a topic that has been explored in SPHE class. The noticeboard might include:

- key things you learned about this topic
- why it's important
- an example of how this learning might apply in life.

I'd like to report!

Many adults in Ireland report receiving little or no relationships and sexuality education when they were in school. Write a short magazine article explaining to an adult audience what you have learned in this unit of RSE. The article should contain the following information:

- the topics that were covered
- the areas you found most interesting, saying why
- the key learning you are taking away from it all.

Helpful tips!

Create an advice sheet, leaflet or poster on one of the following:

- how to protect your self-esteem while using social media
- how to recognise and take action against sexual harassment
- what people need to know about safer sexual practices.



Activity 1 – Social media and self-esteem (LO. 1.3)

In this activity students will consider impacts on their self-image and self-esteem, with a particular focus on social media. While acknowledging that there are positive impacts of social media, it is important that the students are given opportunities to reflect on the negatives associated with it. Within this activity students will consider ways to nurture a positive sense of self-esteem while living in a world heavily influenced by social media messages, some of which can undermine their self-worth.

Teacher's note

Self-esteem refers to an individual's evaluation of their worth; their belief and confidence in their own ability and value. Self-esteem is in part a trait that is generally stable over time, with some people having relatively high global self-esteem and others having lower global self-esteem. But self-esteem is also a state that varies day to day and even hour to hour, depending on what's going on in a person's life. Having positive self-esteem is generally considered a good thing, but it must be tempered with a healthy realism and sensitivity to others, to avoid narcissism. People also need to be aware of how an individual's pursuit of self-esteem might cause them to be over-reliant on the positive approval of others. This might result in behaviours that are not always good for them, or for society at large¹.

Global self-esteem: an individual's overall evaluation of their worth.

Domain-specific self-esteem: a person's evaluation of their characteristics and abilities in specific domains, such as social relationships, school, and physical appearance.

Self-worth: a person's evaluation of self as a valuable, capable human being, deserving of respect and consideration².

Self-image: one's view of oneself. Self-image is a crucial aspect of an individual's personality that can determine the success of relationships and a sense of general well-being³.

Narcissism: feelings of superiority, vanity, entitlement, and self-centredness. Not to be confused with self-esteem, which relates to feelings of self-acceptance and self-respect.

¹ <https://opentextbc.ca/socialpsychology/chapter/the-feeling-self-self-esteem/>

² <https://dictionary.apa.org/self-worth>

³ <https://dictionary.apa.org/self-image>

Step 1: What is self-esteem and what affects it?

Write the phrase 'self-esteem' on the board and ask students to jot down a sentence in their copybooks to describe their understanding of it. Give the students a simple definition (e.g. belief and confidence in your own ability and value). Clarify the difference between self-esteem and narcissism using the definitions in the teacher's note on page 7.

Ask the students why it is important to have high self-esteem. Hear a few responses before telling the students that high self-esteem has been associated with more success at school and work, better social relationships, improved mental and physical health, and less anti-social behaviour⁴.

Explain that there are many things which influence our self-esteem and ask students, in pairs, to list as many examples as possible of:

- a) the people that impact on young people's self-esteem.
- b) the things that impact on young people's self-esteem.

Hear from each group, asking them not to repeat anything that was said by a previous group. Acknowledge that you are glad they have (or surprised that they have not) mentioned the influence of social media, and inform them that the focus today is on examining the influence of digital and social media on young people's emerging sense of identity and their self-esteem.

Ask the students:

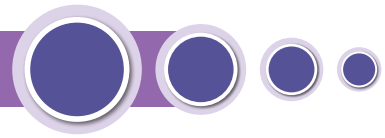
1. What social networking platforms do you use?
2. Why do you use them?
3. What do you like most about them?

Take feedback on each question. Ask students to get back into pairs or small groups and ask them to give two positive and two negative impacts of social media use. Take feedback from each group and document their answers on the board. Encourage groups not to repeat anything that was already said.

Teacher's note

Be open to hearing the positive examples of social media use in young people's lives and avoid focusing exclusively on examples that are having a negative impact on their self-esteem and self-identity.

⁴ Orth U, Robins RW. Is high self-esteem beneficial? Revisiting a classic question. *Am Psychol*. 2022 Jan;77(1):5-17. doi: 10.1037/amp0000922.



Suggested discussion points

- Does your social media use have an overall positive, negative or balanced impact on how you view yourselves (self-image) and how you feel about yourselves (self-esteem)?
- Do you think this is the same for everyone? Why? Why not? *(People have different levels of self-esteem and self-worth depending on a wide variety of things, e.g. personality, environment, experiences, etc. Some aspects of self-esteem are stable and some can fluctuate at times depending on what's going on for people.)*

Note: Acknowledge that there are many positive uses of digital and social media that help people to be healthy and connected with others. However, this activity will focus on some of the potential harms if social media use begins to negatively affect our self-esteem.

Step 2: Insta vs reality



Show students the video [Are You Living an Insta Lie? Social Media Vs. Reality](#) (Duration: 3 minutes, 12 seconds).

Ask the class which scene struck them the most and why?

Show the video again, asking the class to take notice of the hashtags being used. In their pairs, ask them to compare and contrast the images being projected on social media and the reality of the people's lives. Take some feedback from the class.

Suggested discussion points

- What do you think was influencing the self-worth of these characters within the video? (*'likes' and 'comments' to their Insta posts*).
- What are the key messages that you are taking from the video?

Step 3: The influence of influencers



Maintain the existing groups or divide the class into new small groups. Project the **Worksheet: The Influence of Influencers** on the screen and invite students to discuss the questions, encouraging them to take note of their comments so that they can give feedback to the class.

Teacher's note

Some students may not respond to the term 'influencers'. In that case you may wish to expand the focus to include people that they follow or watch online, including high profile gamers, sports people, etc.

Suggested discussion points

- What do you think is meant by the term 'If you're not paying, you're the product'? (*Generally if you are getting free content, it is because you are being used in some way by social media organisations and influencers, e.g. your personal data is being mined, your behaviour is being driven in a way that suits them, or you are being sold something*).
- Does it bother you that your information and behaviours are being used for the benefit of influencers and social media companies? Should it?

Step 4: Protecting my self-esteem on social media



Handout the **Worksheet: Social Media Scorecard**. Ask students to complete the worksheet either individually or in pairs.

Follow this up by inviting the whole class to compile a list of strategies that could help a person to maintain positive self-esteem while engaging with social media.

Note their suggestions on the board. (*Suggestions might include: uninstall apps that waste your time, cut down on passive scrolling, carefully choose your feeds, unfollow accounts that are negatively affecting your self-esteem, search out feeds that nurture your wellbeing, turn off notifications at night and other times to allow yourself have a break and focus on other things, fact check information before you pass it on, limit the number of posts you do each day*).

Homework



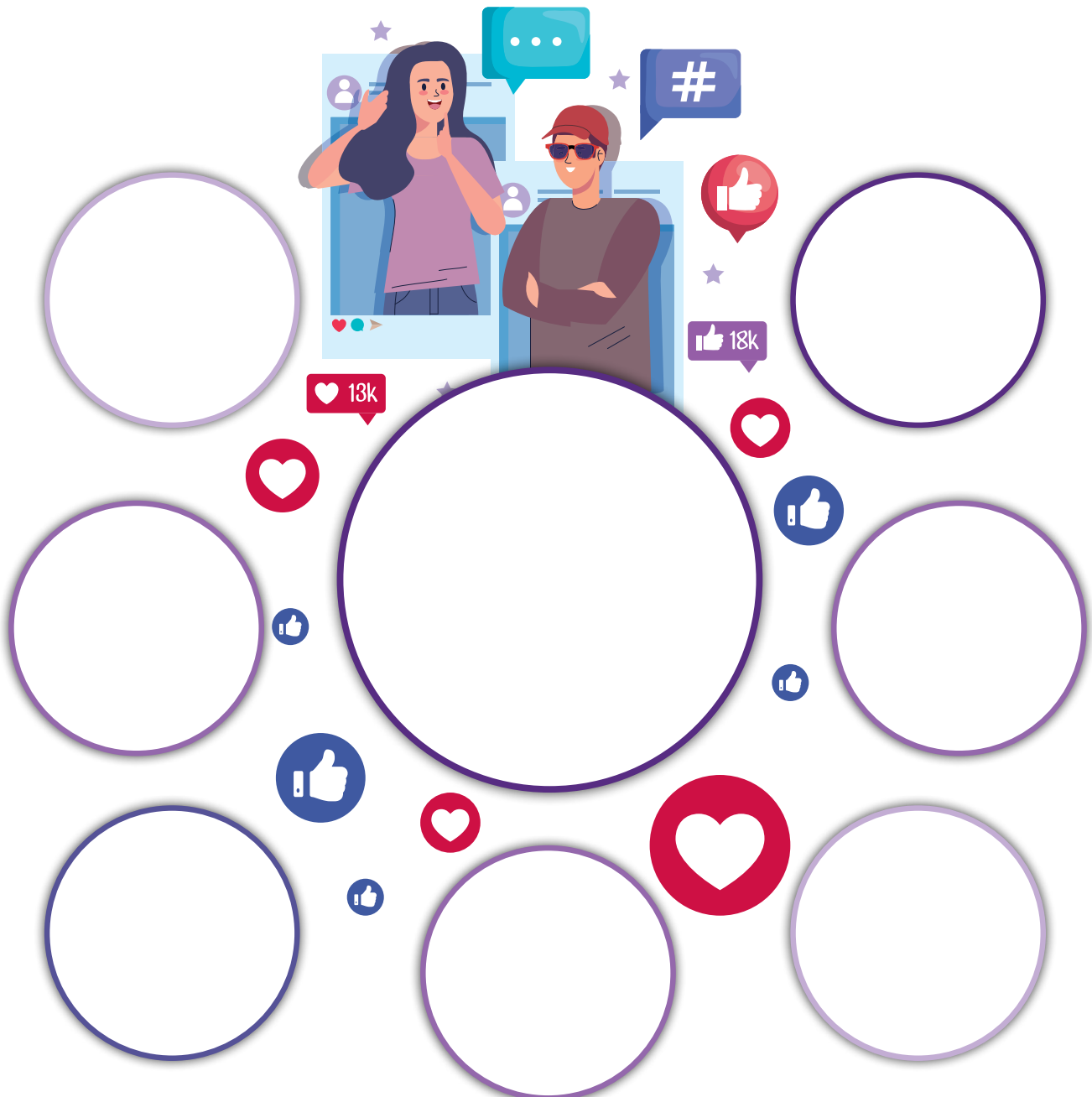
Over the next week, keep a social media diary, recording how your online activity affects your mood and how you feel about yourself. Consider how you can use this information to increase the positive impact and to minimise the negative.



Worksheet: The influence of influencers

Instructions: Think of an influencer or someone that you follow or watch a lot online and complete the tasks below. Take note of your comments in order to provide feedback to the class.

1. Insert the name and intended audience of the influencer in the centre. In the outside circles, list the messages that the influencer gives their followers about what matters in life (e.g. *about lifestyle, wealth, looking a particular way, thinking a particular way, using particular products, etc.*).
2. How helpful are the messages? How do you know? How can you check?
3. How healthy are the messages? How do you know? How can you check?
4. How do you think the influencer benefits from their social media presence? How might this affect their content?
5. How might the message that this person is sharing affect a young person's feelings about themselves and their self-esteem?



Worksheet: Social media scorecard

1. In the table below, note the behaviours that apply to you. You can also add in other behaviours and note the frequency for all.
2. Which of these would you consider to be unhealthy for you and why?
3. List two things that you can do to minimise the negative impact of your social media behaviours on your self-esteem and self-worth.

Photoshop my life to impress others.	Look through loads of ads that pop up on my feed, even though I hadn't been thinking of buying the products.	Check social media before I even get out of bed.
Scroll for hours instead of sleeping or being with people in real life.	Obsess over the perfect selfie.	Follow people that make me feel bad or that I don't even like.
Check notifications every time my phone dings or buzzes.	Check and recheck for likes and comments on my posts and photos throughout the day.	Often choose friends, food, drink and activities mainly because they would look good on social media.





Activity 2 – Gender roles and expectations (LOs 1.5, 3.10)

In this activity students will explore social norms and how they relate to gender roles and expectations in our society. They will reflect on the possible impact that restrictive gender stereotypes have on all people – women, men, and people who are non-binary or gender non-conforming.

Teacher's note

Key messages when teaching this topic

- Draw young people's attention to the limiting roles and expectations that attach to gender, such as emotional stoicism and aggression for men, and submission and irrationality for women.
- Draw attention to how sexist and homophobic attitudes often reinforce one another; for example, when boys and men receive harmful messaging that if they do not conform to masculine norms, they are 'gay'.
- Affirm that gender inequality and gender stereotypes produce harmful impacts for all people, and ask students to consider how women, men, and gender minorities suffer unique harmful consequences. Consider how rigid gender stereotypes can prompt bullying and harassment against those who are gender non-conforming.
- It is important to engage students with the power dynamics that operate in favour of men, while recognising that such power structures have harmful consequences for everyone.
- Avoid labelling masculinity as 'toxic' as this oversimplifies the issue and can lead to shaming men rather than encouraging the open dialogue that can lead to awareness and change in relation to gender roles and behaviours.

For additional information on all the above, see [NCCA Guidance for teachers for LO 2.4](#)

Step 1: Social norms

Explain that you are going to explore social norms and how they influence gender expression and roles in society. Ask students what they understand by the term 'social norms', and clarify with reference to the definition below:

Definition

Social norms are the unwritten rules in a particular group or culture. They tell us what is considered acceptable, appropriate, or desirable behaviour in society and we come to know them through being taught directly (e.g. to say please and thank you) or through people's positive or negative response to what we and others say and do. Examples of social norms can be: how we meet and greet each other, how we behave in different settings, dress codes, and how boys and girls are expected to look, behave and express themselves.

Ask students to think about their day so far; what social norms have they followed? (*Prompts might include: What clothes did you put on for school? Did you stand in a queue for the bus? Did you give up your seat for an older person or somebody more in need? Did you hold a door open for someone? How did you greet your friends, and how did you greet your teachers?*)

Suggested discussion points

- Was it easy to think of examples?
- Are some social norms different for boys/girls, men/women? Brainstorm examples.
- How are social norms helpful? (e.g. to keep order and predictability in society, to provide a guide for how to interact with others and deal with social situations, to help us feel a sense of belonging).
- When are social norms unhelpful? (e.g. when they are rigid, discriminatory or resistant to change or reinforce historical biases and inequalities).



Step 2: Opinion continuum ‘Man up – like a girl’

In this task students will evaluate how gender norms and stereotypes are sometimes conveyed in casual everyday comments. This gives students the opportunity to consider some phrases that reinforce gender stereotypes, and restrictive notions about what it means to be a man or a woman.

You may wish to add that these stereotypes are so strong in our society that they affect everybody; women, men and people who are non-binary or gender non-conforming.

Use the length or breadth of the room to create a continuum. Allocate one corner as ‘**Very harmful**’ and the opposite corner of the room as ‘**Not harmful**’. Explain to students that you will read out a phrase (in bold below) and they should stand somewhere on the continuum which reflects their views on the level of harm this phrase may cause.

During the discussion, if students feel like moving to a different point on the continuum they can do so. As this is a version of a moving debate, students will be asked to explain why they have chosen to stand where they are. To prompt critical thinking, ask questions such as those suggested below for each phrase you choose to use.

‘...like a girl’ (E.g. ‘you throw like a girl’ – an insult targeted at boys and men that also reinforces the stereotypical view that girls are weak and inferior).

‘Man up’ (Draws on the gender stereotype that men and boys should suppress their emotions and not show vulnerability or perceived weakness – and implies that weakness or emotions are for women only).

‘Grow a pair’ (Used to suggest that someone should be more assertive or courageous, implying that having testicles equates to strength or bravery).

‘Don’t be such a sissy’ (Used to criticise someone for displaying behaviour that is perceived as weak or feminine).

‘What a wimp’ (Similar to ‘sissy,’ this is used to demean someone, usually a male).

‘Be a man!’ (On the surface it might be seen as an encouraging comment, but it suggests that there is only one way to be a man and can be used to mock a boy/man for not expressing his masculinity in a stereotypical way).

Suggested discussion points

- What is the phrase implying or communicating?
- In what type of situations have you heard it used, or do you imagine that it would be used?
- How might the phrase make someone feel?
- What stereotypes do these phrases reinforce?
- Are any similar phrases used as put-downs to girls/women?

Step 3: Taking a deeper look at gender stereotyping 1

In the following activities students will be examining some of the ways gender norms and stereotypes play out in society, and considering the impact on individuals and on society itself. All students can do both sections of the exercise based on their observations of gender stereotyping in society.



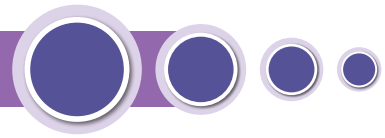
Play the video clip of [Gloria's monologue from the Barbie movie](#)
(Duration: 2 minutes, 32 seconds).



Or alternatively, project and read out **Worksheet: Gloria's speech from Barbie**
(edited transcript).

In small groups, discuss these questions:

- What social norms upset and frustrate Gloria?
- Is this an accurate presentation of how society expects women to be? Why? Why not?
- Some of the things listed are specific to adult women. Are there additional things expected of girls and young women living in Ireland?



Step 4: Taking a deeper look at gender stereotyping 2

To conclude this session, invite students to write a similar piece to the Barbie extract, from the perspective of a young man growing up in Ireland. What are the expectations that society puts on them? Suggest to students that they use this to get started: *It is literally impossible to be a man... we have to always be extraordinary, but somehow, we're always doing it wrong.*

Prompt, if necessary, by suggesting that students think about headings such as: body image, ways of relating and showing emotions, pastimes and interests, clothing, jobs, responsibilities within the home, and so on.

Suggested discussion points

- How does it feel to be stereotyped or limited by gender social norms? (*Responses might include: Usually negative. You aren't being seen for who you really are. Stereotypes limit our ability to be ourselves and to express who we are. It can feel like pressure to conform.*)
- If people live in a society with rigid gender norms, how might this affect:
 1. girls and women?
 2. boys and men?
- How might it affect people from gender minorities, such as non-binary or trans individuals?
- How can young people challenge restrictive gender stereotypes?



Worksheet: Gloria's speech from Barbie (excerpt)

It is literally impossible to be a woman. We have to always be extraordinary, but somehow we're always doing it wrong.

You have to be thin, but not too thin. And you can never say you want to be thin. You have to say you want to be healthy, but also you have to be thin. You have to have money, but you can't ask for money because that's crass. You have to be a boss, but you can't be mean. You have to lead, but you can't squash other people's ideas. You're supposed to love being a mother, but don't talk about your kids all the damn time. You have to be a career woman but also always be looking out for other people.

You have to answer for men's bad behaviour, which is insane, but if you point that out, you're accused of complaining. You're supposed to stay pretty for men, but not so pretty that you tempt them too much or that you threaten other women because you're supposed to be a part of the sisterhood.

But always stand out and always be grateful. But never forget that the system is rigged. So, find a way to acknowledge that but also always be grateful.

You have to never get old, never be rude, never show off, never be selfish, never fall down, never fail, never show fear, never get out of line. It's too hard! It's too contradictory and nobody gives you a medal or says thank you! And it turns out in fact that not only are you doing everything wrong, but also everything is your fault.

I'm just so tired of watching myself and every single other woman tie herself into knots so that people will like us.

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Activity 3 – No excuses! (LOs 3.3, 3.4)

In this activity, the students will explore the issue of sexual harassment; why it's so pervasive in society, how it affects adolescents, and what they might do to be a part of the solution.

Teacher's note

This activity builds on the previous learning about various aspects of consent, in [RSE 2](#), especially Activities 4, 5, 6 and 7.

What is sexual harassment?

In Irish employment law (which also applies to students in an educational establishment), sexual harassment is defined as any form of unwanted verbal, non-verbal, or physical conduct of a sexual nature. It has the purpose or effect of violating a person's dignity and creating an intimidating, hostile, degrading, humiliating, or offensive environment for the person. The intent of the perpetrator is irrelevant as the focus is on the impact on the victim. This is unusual in Irish law.

Sexual harassment is when someone is made feel embarrassed, uncomfortable or scared by someone else's actions such as:

- sexual or offensive comments
- comments about another person's body or sexual organs
- sending unwanted, inappropriate texts, memos, or images that are sexual or crude in nature
- making sexual innuendos in conversation
- unwarranted or unwelcome physical touch, such as rubbing, touching or hugging
- catcalling / wolf whistling
- slapping someone's bottom
- spamming or persistent communication of a sexual nature
- up skirting, downblousing or pulling down someone's pants.

The above examples show that sexual harassment is not limited to unwelcome touching—it can be both physical and verbal. It does not need to be repeated—one incident can constitute harassment.

Teacher's note continued

Sexual harassment can happen to anyone. However, women are overwhelmingly the most targeted group. Members of the LGBTI+ community are also often singled out.

Although this activity focuses on raising awareness, and exploring ways students might take action, it is important to highlight that sexual harassment is not simply a problem of individual behaviour. *Zero Tolerance: Third National Strategy on Domestic, Sexual & Gender-Based Violence 2022-2026*, emphasises the need to eradicate the social and cultural norms that underpin and contribute to such violence. That can only be done if government, statutory and non-statutory organisations, and communities play their part in countering the everyday manifestations of prejudice and discrimination that serve to normalise sexual harassment (e.g. gender inequality, misogyny, homophobia, transphobia).

What are the effects of sexual harassment on young people?

There is a significant body of research on the impacts of sexual harassment on adolescents, which include: low self-esteem, depression, suicidal ideation, eating disorders, panic attacks, self-harm, self-blame, problems in body image, loneliness, difficulties with sleep, academic under-performance, reduced feelings of academic competence, problems in school attendance and engagement, problems socialising, problems in regulating emotions⁵.

Step 1: What is sexual harassment?

Introduce the activity by telling the students that they're going to investigate the issue of sexual harassment, and consider what role they might have individually and collectively in being a part of the solution.



Play the video clip '[No excuses](#)' (Duration: 1 minute).

Show the video a second time and stop after each scene to ask the class:

- Does the scene show an example of sexual harassment? If so, what?
- Where is the sexual harassment taking place?
- Who is doing the harassment and who is the victim? (*Note that anyone can be a perpetrator and anyone can be a target of sexual harassment*).

⁵ <https://www.rcni.ie/wp-content/uploads/RCNI-Storm-and-Stress-FINAL.pdf>



Clarify the meaning by reading the simplified definition below aloud.



Step 2: Sexual harassment or not?

Explain to the class that they will notice from the definition that sexual harassment can include physical harassment and emotional or psychological harassment.



To reinforce an understanding of sexual harassment, ask students to get into small groups and give each group the **Worksheet: Sexual harassment or not sexual harassment?** for discussion and completion.

Take feedback from a number of students on each statement and facilitate a discussion on each.

Alternatively, use the statements to do a whole class walking debate, asking students to place themselves along the continuum between '**Sexual harassment**' at one end of the room and '**Not sexual harassment**' at the other, depending on their response to each statement. Invite a range of students across the continuum of responses to explain their response, and facilitate a discussion on each statement.

Suggested discussion points

- Was there anything that surprised you in the video, or from completing the worksheet?
- Is sexual harassment easy to identify? If so, why do you think so much of it goes on? (e.g. *a normalisation or acceptance of sexual microaggressions in everyday life, such as cat-calling, that makes people and societies insensitive to the impact of sexual harassment, and contributes to an environment that encourages more extreme behaviours*).
- Sexual harassment is an issue for every level of society.
 - a. What should governments do about it? (e.g. *good anti-harassment laws that are enforced, education campaigns, supports for victims/survivors*).
 - b. What should organisations in our communities, such as schools and youth work/sports/arts organisations do about it? (e.g. *anti-harassment policies/rules, training for staff and students/members*).
 - c. What should individuals do about it? (e.g. *treat all people with respect: avoid behaviour that might constitute as harassment and apologise if they inadvertently cause offense; not make or join in with harassing behaviours; call out those behaviours or tell people in authority when we see these instances of sexual harassment*).

Step 3: Is sexual harassment an issue for adolescents?

Teacher's note

The aim of this section of the activity is to raise awareness of the pervasiveness of sexual harassment among adolescents, using statistics from [Storm and Stress](#) (2022) and [Belong To School Climate Survey](#) (2024).

Sexual harassment is an issue at all stages of life but particularly in adolescence and young adulthood. Half of young adults surveyed (50% of those aged 18-24) experienced sexual harassment in the previous 12 months, compared with 7% for those aged 65 and older⁶.



Show the **Sexual Harassment PowerPoint**, asking the students to answer each question in pairs before taking a selection of responses and then showing the next slide with the answer.

⁶ CSO Ireland, Sexual Violence Survey 2022 – Sexual Harassment.



Suggested discussion points

- Were there any surprises in the statistics shown?
- Why do you think girls are more often subjected to sexual harassment than boys? (e.g. *women have less power in many societies, women are often seen as something to be looked at and commented on, many harassing behaviours are seen as complimentary, normal or no big deal*).
- Why do you think LGBTI+ people are often the target of sexual harassment? (e.g. *homophobia, transphobia, a minority group, seen to have less power*).
- Survey respondents reported that over 27% of sexual harassment came from 'friends'. Do you find this surprising? How might it be explained?

Step 4: Taking action

Outline to students that there is no single way to stop sexual harassment or violence. As we've seen, it's a complex problem that has to be tackled at all levels of society. In this section, students are going to consider some of the practical things individuals can do when they witness sexual harassment.

Ask the students to think back to the video again and ask:

- In each of the video scenarios, the targeted person didn't respond. Why might it have been difficult for them to challenge the perpetrator?
- Where might they get help and support? (*Highlight to the class that it is vitally important the targeted person gets some support for themselves. This could be from a trusted adult within their family, school or youth organisation, and from their friends. Online sexual harassment can be reported via [hotline.ie](https://www.hotline.ie)*).

Point out that it can't be left to the targeted person to sort things out – they are not responsible for the perpetrator's behaviour and it can be difficult to stand up to the harasser alone. There are generally opportunities for other people to step in. Explain that the key to becoming an ally to someone who is being harassed is to learn how to intervene in a way that is safe, and that fits the situation and your comfort level.

Project the summary of **The Three Ds** Model of Sexual Harassment Intervention (page 28) on the whiteboard and read through with the class. Highlight to the class that being familiar with **The Three Ds** can give people the confidence to step in when something is wrong. Stepping in could make all the difference for someone, but it should never put their own safety, or another person's safety, at risk.

Leave **The Three Ds** on the whiteboard, divide the class into small groups of 3 or 4 and allocate a scenario to each (select as many of the scenarios as required from the range supplied). Ask each group to choose which of **The Three D** strategies they think would work best in that scenario and describe how they'd use it. They can use more than one if they think it is necessary.

Once they have had enough time to complete the task, take a selection of feedback on each scenario, comparing and contrasting the methods used.

Suggested discussion points

- Do you think these scenarios describe behaviours that happen in adolescence? Why? Why not?
- Is **The Three Ds** model something that you could see yourself using, should the situation arise? Why? Why not?
- As a group, what could students do in the school setting to raise awareness of sexual harassment and contribute to making it unacceptable wherever it occurs?

Teacher's note

Emphasise the need for people, especially young people, to consider their own safety in these situations and to look for assistance from a trusted adult rather than intervene directly if there is a risk to them or to other people.



Worksheet: Sexual harassment or not sexual harassment?

Behaviour	Sexual harassment	Not sexual harassment	Maybe sexual harassment	Reason for answer
Telling someone they look good in their new outfit				
Making sexual jokes loudly in the classroom				
Asking somebody out				
Wolf whistling at people walking along the street				
Snapping someone's bra				
Spreading rumours about a person's sexual activity				
Forcing a student to share their homework				
Making comment about someone's breasts				
Forcing someone to squeeze past you on a crowded corridor				
Messaging a partner multiple times during the day to say how much you fancy them				
Showing up at the bus stop every day to be near someone you fancy				
Repeatedly and loudly suggesting that the two lesbians in the class should date each other				
Putting a hand on someone's thigh during a conversation				
Outing someone as gay or trans (without their permission)				

Teacher's note – Sexual harassment or not sexual harassment?

The purpose of this exercise is to raise awareness of the many actions in everyday life which are likely to, or may, constitute sexual harassment. Whether some of these actions would stand up as sexual harassment in a court of law very much depends on a number of contextual factors, so this activity is not about arriving at definitive answers. However, students should leave the activity with increased awareness that touching, gesturing at, or talking about someone's body in a sexual way without their consent; making sexual comments or jokes in inappropriate places such as school or the workplace; talking publicly about somebody's sexual orientation or sexual practices, etc. are all things that are likely to constitute sexual harassment, whether or not they are prosecuted.

Discussing the behaviours listed on the worksheet (and the students may have ready examples of others) will give students an opportunity to reflect on their own behaviour, and that of others around them, with a view to avoiding actions that are likely to fall into the category of sexual harassment. If in doubt, it is always advisable to err on the side of caution, and be sensitive to the possible impact of one's behaviour

Telling someone they look good in their new outfit.	This would not generally fall into the realm of sexual harassment. However if this is done in a sexually suggestive way or in a way that makes the person feel targeted because of their sex, then it might qualify as sexual harassment.
Making sexual jokes loudly in the classroom.	While sexual harassment depends on the perception of the individual, this action is highly likely to fall into this category as it imposes a sexual behaviour on others without their consent that could cause them to be embarrassed, uncomfortable or scared. Whether or not it is harassment, making sexual jokes in a school or work setting is generally inappropriate.
Asking somebody out.	This would not generally fall into the realm of sexual harassment. However, if it was done in a suggestive, repetitive or hectoring way that made the person feel embarrassed, uncomfortable or scared, it might constitute sexual harassment.
Wolf whistling at people walking along the street.	While sexual harassment depends on the perception of the individual, this action is likely to fall into this category as it imposes a sexual behaviour on others without their consent that could cause them to be embarrassed, uncomfortable or scared.
Snapping someone's bra.	While sexual harassment depends on the perception of the individual, this action is likely to fall into this category as any unconsensual touching of another person, especially when targeted at breasts and genital areas, is inappropriate.

Teacher's note – Sexual harassment or not sexual harassment? Continued

Spreading rumours about a person's sexual activity.	This action is likely to fall into the category of sexual harassment as gossiping and spreading rumours about a person's sexual life is likely to cause them embarrassment, discomfort or otherwise create a hostile environment.
Forcing a student to share their homework.	This would generally be considered bullying rather than sexual harassment.
Making comment about someone's breasts.	This may or may not constitute sexual harassment depending on the relationship between the people involved and the context, i.e. the comment, who said it and why, and how it was received. Unless a person is very sure about its reception, commenting on someone's breasts runs the risk of constituting sexual harassment and should be avoided.
Forcing someone to squeeze past you on a crowded corridor.	While sexual harassment depends on the perception of the individual, this action is likely to fall into this category as it potentially imposes intimate contact on another that could cause them to be embarrassed, uncomfortable or scared.
Messaging a partner multiple times during the day to say how much you fancy them.	Whether this is sexual harassment very much depends on the relationship, the frequency and content of the messages, and how the other person receives them. It is not something to be done regardless of knowing whether or not the messages are welcome.
Showing up at the bus stop every day to be near someone you fancy.	This may or may not constitute sexual harassment depending on what is done, how it is done, and the impact on the individual (makes them feel uncomfortable, embarrassed or scared). It is probably not something to be done persistently without a positive response from the other person.
Repeatedly and loudly suggesting that the two lesbians in the class should date each other.	This may constitute sexual harassment as it is likely to be seen as unwanted sexual reference to peoples' private lives; potentially causing them to be embarrassed, uncomfortable or scared.
Putting a hand on someone's thigh during a conversation.	This may or may not constitute sexual harassment depending on the relationship between the people involved, but in general any unconsensual touching is inappropriate.
Outing someone as gay or trans (without their permission).	This is likely to constitute sexual harassment as it makes reference to a person's sexuality without their consent, in a way that could make them embarrassed, uncomfortable or scared.

The Three Ds Model of Sexual Harassment Intervention

Distract

Creating a distraction to interrupt the situation can be a lower risk, non-confrontational way to support the person who is, or might be, being harassed.

You can try distracting the person who is being sexually aggressive, or you can distract the potential victim. Either way, your goal is to stop a situation from worsening. You could insert yourself into the conversation, for example: 'Hey aren't you John's friend?' or 'Where do I get the bus to...?'. This might give you time to check with the potential victim and ask if there's a problem, or just give them an opportunity to leave.

Delegate

There are times when, because of the safety risk, or the availability of people who are in a better position than you to do something, it's better to ask others to intervene. For example, in a bar or nightclub you could ask a staff member to check on someone you feel is vulnerable.

Sometimes when you don't know the victim and the abuser, friends of the people involved might be in a better position to do something. You could say to them, 'I'm concerned about that person. Would you be able to check in on the situation?'

Important: Phone the Gardaí if you witness a situation you feel is dangerous.

Direct

Sometimes you might need to make a direct approach to the potential victim or the potential abuser.

It might be enough to use body language to show your disapproval and concern about what is going on. You could do this by watching and making it clear that you're keeping an eye on the situation.

If you have to say or do something it should never be violent, as you'd be putting yourself and the potential victim in danger.

You can ask the person you're concerned about if they're ok, and you can offer to call them a taxi or find a safe way home. You can tell the potential abuser that you are concerned about the potential victim, or that you're uncomfortable leaving them alone in that situation.

Important: Never put yourself in danger if you think there is a risk of violence. Seek the help of a trustworthy adult.

Source: This content is adapted from <https://www.gov.ie/en/publication/ea0f39-how-to-help-and-become-an-ally/>



Sexual harassment scenarios

Scenario 1

One of your friend group has been in a relationship for over six months. Another friend continuously makes sexual comments about the relationship that are obviously making your friend uncomfortable.

How might you intervene?

- Choose the 'D' strategy you think would work best in this situation.
- Describe what you would say or do.
- What might the outcome be?
- What could you do if the intervention didn't work?

Scenario 2

A girl in your year-group 'came out' at school. You're in the bathroom in school and see someone writing sexual comments about her on the back of a door.

How might you intervene?

- Choose the 'D' strategy you think would work best in this situation.
- Describe what you would say or do.
- What might the outcome be?
- What could you do if the intervention didn't work?

Scenario 3

A person you know is sending sexual images to a boy in 5th Year for a laugh, as they know it is upsetting him.

How might you intervene?

- Choose the 'D' strategy you think would work best in this situation.
- Describe what you would say or do.
- What might the outcome be?
- What could you do if the intervention didn't work?

Scenario 4

You're in a club and notice that a large group makes it difficult for a girl to get past; pushing up against her and making sexual comments.

How might you intervene?

- Choose the 'D' strategy you think would work best in this situation.
- Describe what you would say or do.
- What might the outcome be?
- What could you do if the intervention didn't work?



Sexual harassment scenarios continued

Scenario 5

You're in your part-time job and you notice that the manager has taken to touching one of your new co-workers unnecessarily, hovering over them when they're working. Your co-worker is obviously uncomfortable.

How might you intervene?

- Choose the 'D' strategy you think would work best in this situation.
- Describe what you would say or do.
- What might the outcome be?
- What could you do if the intervention didn't work?

Scenario 6

You witness a girl at the bus stop being jeered at and called names by a group of young boys.

How might you intervene?

- Choose the 'D' strategy you think would work best in this situation.
- Describe what you would say or do.
- What might the outcome be?
- What could you do if the intervention didn't work?

Scenario 7

You see a gang of lads standing under the stairs at school looking up the skirts of female students and taking photos.

How might you intervene?

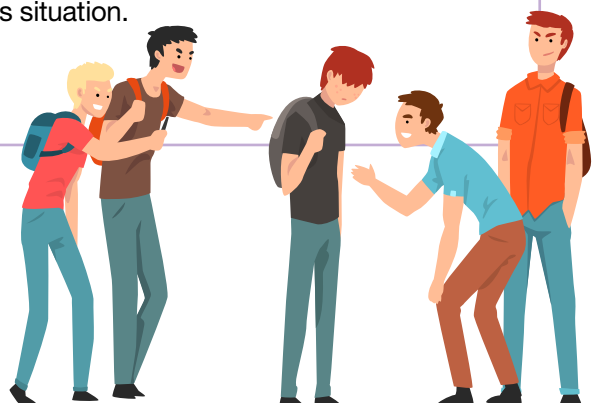
- Choose the 'D' strategy you think would work best in this situation.
- Describe what you would say or do.
- What might the outcome be?
- What could you do if the intervention didn't work?

Scenario 8

You're playing a football match and you hear one of your team mates calling one of the opposition a homophobic slur.

How might you intervene?

- Choose the 'D' strategy you think would work best in this situation.
- Describe what you would say or do.
- What might the outcome be?
- What could you do if the intervention didn't work?





Activity 4 – The influence of popular culture (LO 3.10)

In this activity students will discuss the influence of popular culture on young people's understanding and expectations around relationships and sex, by examining a selection of song lyrics and music videos. The aim is to develop students' awareness of the influences that shape them, and to develop critical thinking and questioning skills that can be applied when consuming popular media.

Teacher's note

Every day, young people can be exposed to a wide range of influences in relation to sex and sexuality. They are particularly vulnerable in their early teenage years, when gender roles and attitudes to sex, sexuality and relationships are being formed. Many song lyrics, social media videos, video games, programmes and films portray relationships and sexual behaviour in a manner which might not correspond to the values that young people hold, nor what they would want in a relationship. Providing opportunities for young people to consider and question the values and messages portrayed by pop culture is important, as it provides space for them to consider their own attitudes and values concerning relationships and sexuality.

Popular culture refers to cultural products that are consumed by the majority of people – it includes music, art, games, fashion, film, TV, radio, etc. Popular culture can influence and shape our attitudes, behaviours and social norms.

In discussing this topic there is an opportunity to make linkages with previous classroom discussion related to social norms and gender stereotypes. For example, pop culture can reinforce stereotypes or challenge them, e.g. through the portrayal, or the invisibility, of LGBTQ+ individuals, people with disabilities, gender diversity, race, etc.

This lesson is framed around three pop songs. They are not current but have been chosen as examples of different types of messages about relationships that are common within popular culture, to stimulate discussion and critical thinking. The intent is not to suggest that any one song has a significant impact, but to raise awareness of the possible cumulative effect of some common messages and images that we consume in pop culture, often without conscious thought.

Note: All song lyrics and videos should be previewed for suitability for your students and school context. You may choose alternative songs for the purpose of critical analysis.

Step 1: Let's talk about pop music

Explain that today's class will look at the impact of popular culture on young people's understanding and expectations around relationships and sex, by examining some examples from popular music. In other words, we are asking the question, 'Does pop music impact on how young people think and act?'

Teacher's note

The order in which Step 1 and Step 2 are done can be swapped around if you feel it would enhance engagement from your class.

Song lyrics for the three sample songs can be copied for classroom use. See pages 35, 36 and 37. Alternatives may be selected as appropriate to your students and school. In either case, carefully chosen excerpts of both lyrics and video are usually sufficient to support a critical discussion.

Divide the class into six groups and assign a set of lyrics to each group; using three different songs means that each song will be discussed by two groups. Ask each group to appoint a reporter who will share the group's findings with the whole class.



Project or hand out the **Worksheet: Let's talk about pop music**. Ask the class to discuss the questions in their groups.

They should then use their discussion to summarise and report back on their group's opinion.

Take note of some key points on the board.

Step 2: Pop music through the camera lens

In this part of the task students will look critically at the way music videos show relationships and sex.

Staying in their small groups, ask the students to look at the music video that was produced for the song they discussed in Step 1.



Project the **Worksheet: Pop music through the camera lens** and ask the students to discuss the questions in their groups.

(If internet access is restricted, the exercise can be done as a whole class, viewing and discussing each video sequentially).



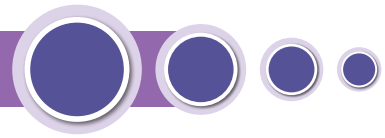
Taylor Swift – You Belong With Me (Duration: 3 minutes, 8 seconds).

Copyright (C) 2009 Big Machine Records.

James Arthur – Say You Won't Let Go (Duration: 3 minutes, 30 seconds.

Recommend cutting at 2 minutes, 30 seconds). Copyright (C) 2016 Columbia Records.

Robin Thicke – Blurred Lines (Duration: 4 minutes, 31 seconds. Recommend cutting at 1 minute, 24 seconds). Copyright (C) 2013 Star Trak Recordings and Interscope Records.



Suggested discussion points

- Do you think popular music could influence expectations about relationships and sexual behaviour? In what ways might this be positive? In what ways might it be negative?
- How do you think the portrayal of relationships on screen affects teenagers? Does it impact their expectations about relationships?
- Do you think popular culture contributes to a pressure on teenagers to be in a relationship or to feel that they should behave or dress in a sexual way?
- What types of people are commonly featured in pop culture (*e.g. good looking, slim, able-bodied, limited range of ethnicities, etc.*) and who is missing?

Encourage students to apply the same critical questions and critical thinking skills that they applied today to other forms of popular culture that they consume in the future. Emphasise that this skill goes beyond pop music to all media.

Step 3: Individual reflection (as a springboard for next activity)

Ask students to think about and note in their SPHE copybook or journal any specific examples from pop culture that have shaped their own or their peers' expectations about relationships and sex. What messages were they promoting and what effect have they had?

Teacher's note – Pop music through the camera lens

Prompts to support classroom discussion

You belong with me

In reporting back from their group discussion, notice if the students mention the following: the stereotype of nice girl versus mean/drama queen girl (e.g. *the bespectacled, quiet girl is jealous and competes for the boy against the glamorous, popular, but unkind girl*); to get noticed a girl needs to change how she looks; the boy has the power to choose and is calling the shots; alternatively, boys are easily manipulated by women to transfer their affections.

Say you won't let go

In reporting back from their group discussion, notice if the students mention how the video depicts the deep feelings of love that James Arthur wants to last forever, yet he is insecure and fearful that love won't last. Invite them to notice the positive portrayal of affection, care and commitment. Discuss how the couple's first meeting is described in the song. Any alarm bells? (e.g. *getting drunk and going home with someone you don't know*).

Blurred lines

Notice if the students observe how the men are all fully clothed (in smart suits) while the women are scantily clothed. What might this suggest about who has power and who is vulnerable? How are the women referred to in the song? What gender stereotypes are evident? (e.g. *women as passive and submissive objects of men's desire*). What's the meaning of 'blurred lines' (e.g. *women pretend not to 'want it' but really 'want it', i.e. say no and mean yes to sex. Conveys that women's desires or wants can be confusing or 'blurred'*). How does this relate to messages regarding consent?



Taylor Swift – You Belong With Me (Lyrics extract)

You're on the phone with your girlfriend, she's upset
She's going off about something that you said
'Cause she doesn't get your humour like I do
I'm in the room, it's a typical Tuesday night
I'm listening to the kind of music she doesn't like
And she'll never know your story like I do

But she wears short skirts, I wear T-shirts
She's Cheer Captain and I'm on the bleachers
Dreaming 'bout the day when you wake up and find
That what you're looking for has been here the whole time

If you could see that I'm the one who understands you
Been here all along, so why can't you see?
You belong with me, you belong with me.

Walking the streets with you and your worn-out jeans
I can't help thinking this is how it ought to be
Laughing on a park bench, thinking to myself
Hey, isn't this easy?
And you've got a smile that could light up this whole town
I haven't seen it in a while since she brought you down
You say you're fine, I know you better than that
Hey, whatcha doing with a girl like that?

She wears high heels, I wear sneakers
She's Cheer Captain and I'm on the bleachers
Dreaming 'bout the day when you wake up and find
That what you're looking for has been here the whole time



James Arthur – Say You Won't Let Go (Lyrics extract)

I met you in the dark
You lit me up
You made me feel as though
I was enough
We danced the night away
We drank too much
I held your hair back when
You were throwing up

Then you smiled over your shoulder
For a minute, I was stone cold sober
I pulled you closer to my chest
And you asked me to stay over
I said, I already told ya
I think that you should get some rest

I knew I loved you then
But you'd never know
'Cause I played it cool
When I was scared of letting go
I knew I needed you
But I never showed
But I wanna stay with you
Until we're grey and old
Just say you won't let go
Just say you won't let go

I'll wake you up with some breakfast in bed
I'll bring you coffee
With a kiss on your head
And I'll take the kids to school
Wave them goodbye
And I'll thank my lucky stars for that night

When you looked over your shoulder
For a minute, I forget that I'm older
I wanna dance with you right now, oh
And you look as beautiful as ever
And I swear that everyday you'll get better
You make me feel this way somehow

I'm so in love with you
And I hope you know
Darling your love is more
Than worth its weight in gold
We've come so far my dear
Look how we've grown
And I wanna stay with you
Until we're grey and old
Just say you won't let go
Just say you won't let go





Blurred Lines – Robin Thicke (Lyrics extract)

If you can't hear what I'm trying to say (Hey girl, come here!)

If you can't read from the same page (Hey)

Maybe I'm going deaf (Hey, hey, hey)

Maybe I'm going blind (Hey, hey, hey)

Maybe I'm out of my mind (Hey, hey, hey)

Everybody get up

Okay, now he was close

Tried to domesticate you

But you're an animal

Baby, it's in your nature (Meow)

Just let me liberate you (Hey, hey, hey)

You don't need no takers (Hey, hey, hey)

That man is not your maker (Hey, hey, hey)

And that's why I'm gon' take a (Everybody get up)

I hate these blurred lines

I know you want it (Hey)

I know you want it (Oh yeah)

I know you want it

But you're a good girl

The way you grab me

Must wanna get nasty

Go ahead, get at me

Everybody get up (Come on!)

Good girl

I know you want it (Hey)

I know you want it

I know you want it

You're a good girl

Can't let it get past me

You're far from plastic (Alright)

Talkin' 'bout getting blasted





Worksheet: Let's talk about pop music

Read through your song lyrics and discuss these questions in your group.

Appoint a reporter who will share the group's findings with the whole class.

1. What is the overall message of the song?

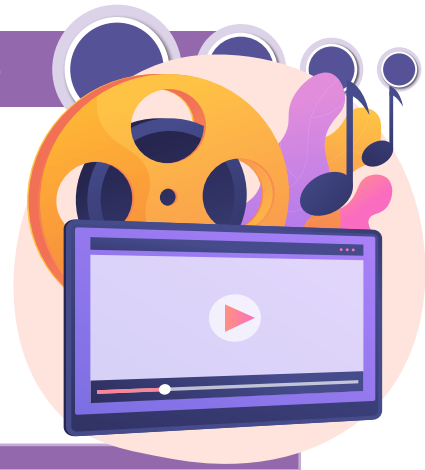
2. How would you describe the relationship that this artist is singing about?

3. What messages might a person pick up from this song about relationships and sex?

Based on your discussion of the questions above, summarise your group's views on:

The kind of relationship this song is about.

The message the song is sending out?



Worksheet: Pop music through the camera lens

Watch the music video that was produced for the song you were assigned. Discuss the questions below in your group and note some points on each, for feedback to the class.

What do you notice about the way men and women are shown in this video?

How would you describe the relationships – healthy/caring or unhealthy/harmful?

Do the characters share equal power?

Popular culture can reinforce stereotypes. Did you notice any particular stereotypes in the music video that you viewed?

Activity 5 – Pornography: What’s the harm? (LO 3.10)

In this activity, students will discuss why there is growing concern about the harmful effects of pornography, particularly if consumed by adolescents at this stage of their development.

It is important to read the Teacher’s note carefully before proceeding with the class activity.

Teacher’s note

What is pornography?

Dictionary definitions of pornography typically define it as depictions of sexual acts for the purpose of creating sexual arousal. This definition does not adequately describe pornography today, which has evolved to a point where almost 90% of freely available pornography depicts physical violence and verbal aggression.

Most pornography portrays female subordination and male dominance and normalises violent and degrading acts, including choking, strangulation and hitting. In discussing the potentially harmful effects of pornography, the focus is on depictions of sex that show dehumanising and violent acts. Pornography therefore needs to be distinguished from other sexually explicit imagery which is erotic in nature.

Key messages to communicate when teaching about pornography

- We live in an increasingly sexualised world, surrounded by sexual images and messages. These images and messages influence us all, and in particular adolescents who are developing their understanding of sexuality and relationships.
- When discussing pornography, avoid an approach that (even unintentionally) normalises pornography. This would include the suggestion that everyone has seen pornography.
- Acknowledge, without judgement, that students may/may not have viewed pornography and avoid shaming or embarrassing students.
- Affirm that while it is normal to be curious about sex, pornography is not a good place to learn about sex as it is not reflective of healthy sex and can be disturbing and even cause long-term damage for young people.
- Pornography is a business driven by the motive of making money. The industry worldwide has an income of nearly \$100 billion. To maintain people’s interest, it must keep pushing out more extreme content. Encourage students to think about who benefits from the pornography industry and who is paying the price.

Note that, while the production of pornography and the industry is related to significant harm, the focus of this lesson is on the consumption of pornography, how it contributes to the normalisation of violence against women, and how it can affect a person’s ability to have healthy and respectful sexual relationships.

See [NCCA Junior Cycle SPHE Toolkit](#) for additional guidance when teaching this topic.



Introduction

Introduce this lesson by reminding students that pop culture is selling us fiction – whether it is the fiction of fairy-tale romance or the fiction of pornography. In both, we are seeing depictions of sex and relationships that are not real. Hence the need to look critically at what we might be consuming.

We live in a world that is saturated with sexual imagery. As a first step, invite students, in pairs, to draw up a list of the places where we encounter sexual images on a daily basis (responses might include TV, music videos, video games, social media, magazines, advertisements, etc.)

Clarify that in this exercise the students are going to focus on the subsection of media which is defined as ‘pornography’. Explain that pornography is a word that has changed its meaning. Previously it was defined as depictions of sexual acts aimed at creating sexual arousal. However, this definition does not take into account the majority of pornography that is freely available today, which is more hardcore than that of the past and is becoming ever more violent and extreme. This is one of the reasons that pornography is now a global concern. Explain that, as a class, you are going to examine why pornography is such a big concern and will be asking: What’s the problem? What’s the impact of viewing pornography, particularly for young people?

Step 1: Discussing the risks

Introduce the first activity by sharing the following fact:

A survey of Irish children and teenagers found that 53% of boys and 23% of girls first saw pornography between the ages of 10 and 13. ([Porn Report, NUIG, 2018](#)).

Brainstorm as a class:

'What are the reasons why children as young as 11 or 12 years of age might look at pornography?' (*e.g. by accident, curious to know what having sex looks like, for the thrill, someone might share it without the child asking for it*). Note responses on the board.

Given that research finds the main reason for young people viewing pornography is to learn about sex, the next activity asks the question, 'What are the risks....from pornography?'

Step 2: Considering the evidence

Project **Newspaper Headlines** on to the board (or print and distribute as handouts), allowing the students time to read the headlines and the short text that accompanies each one.

In pairs or small groups, ask the students to create a list of the risks that pornography poses for young people and for society more broadly, based on what they have read in the headlines. Once they have created that list, add any other risks that they can think of.

Note their ideas regarding the risks, for reference later, without engaging in detailed discussion at this point.

Inform the class that the influence of pornography is not just a concern in Ireland and England, but across the world. In New Zealand, the government is so concerned that it launched a TV awareness campaign aimed at opening up conversations about the possible harm for young people of viewing pornography.

Show the ad and prompt the students to note the specific problems with pornography that are mentioned in the script.



[‘Porn stars’ deployed in New Zealand government’s online safety campaign](#)
(Duration: 1 minute)

Suggested discussion points

- What are the concerns that are mentioned in this ad? (*e.g. porn does not reflect sex in the real world and it doesn’t talk about consent*).
- What are some of the other problems that could be mentioned but aren’t? (*Refer back to newspaper headlines exercise*).
- Do you think a campaign like this is needed in Ireland? Why/why not?

Optional additional activity

Divide the class in two and then into smaller groups.

Ask the small groups in one half of the class to discuss: How do you think watching pornography might affect boys attitudes, expectations and behaviour?

Ask the other half to discuss: How do you think watching pornography might affect girls attitudes, expectations and behaviour?

Allow time for small group discussion and then share and compare responses.



Step 3: How does pornography mess with the teenage brain?

Inform the class that you will now be looking at the evidence behind why a teenage brain is more vulnerable to harm from pornography.

Read the following short excerpt from a radio interview that singer Billie Eilish gave in December 2021. In it, she mentions how she began watching pornography at age 11, and how it gave her nightmares and created issues when she started dating.

Billie Eilish says watching porn from age 11 'really destroyed my brain'

“I think porn is a disgrace. I used to watch a lot of porn, to be honest. I started watching porn when I was, like, 11,” the singer said. She went on to say it helped her feel as if she were cool and ‘one of the guys.’ She added ‘I think it really destroyed my brain and I feel incredibly devastated that I was exposed to so much porn,’. Billie said she suffered nightmares because some of the content she watched was so violent and abusive. She said she is now angry at herself for thinking it was acceptable to watch porn. ‘The first few times I, you know, had sex, I was not saying no to things that were not good. It was because I thought that’s what I was supposed to be attracted to.’”

1. What reason did Billie Eilish give for why she started to watch porn?
2. She mentioned a few different consequences of watching porn. What were they?

Billie Eilish mentions that watching pornography messed up her head. Let’s look at the science to see how watching pornography can affect the teenage brain.



Show the **PowerPoint presentation: Pornography – the evidence**

Following the first slide, '**Pornography and the teenage brain**', ask the class:

- Is it possible that the porn industry is targeting teenagers? Why would they do this? (e.g. *The porn industry knows that teenagers are 1.) Curious about sex and 2.) Their brains are malleable and receptive to stimuli*).

Show slides 2 and 3, '**The Impacts**' and invite students' reactions, asking:

- Do you find anything surprising?
- What’s new here that hasn’t already been mentioned in class?

To conclude this activity set the students into small groups with the following task:

Imagine the Irish government decided to conduct a campaign like the one in New Zealand. You have been asked to advise them on this. Based on all the evidence and discussion from today's class, what advice would you give regarding the big message that young people in Ireland need to hear? What message needs to be highlighted in an Irish campaign?

End of class check-in

Ask students to use exit slips to answer this question:

- What is the main learning I am taking away from today's class?

Be sure to mention where students can get support if this topic has been upsetting or if they are worried for themselves or others.

Teacher's note

Further research findings regarding pornography use and its impact on young people

The [My World Survey 2 \(2019\)](#) (national study of youth mental health in Ireland) tells us that:

- In senior cycle 86% of males reported having ever watched pornography compared to 24% of females.
- Among males 21% watched pornography once a week and 44% watch it more than once a week. Females reported watching pornography less frequently.

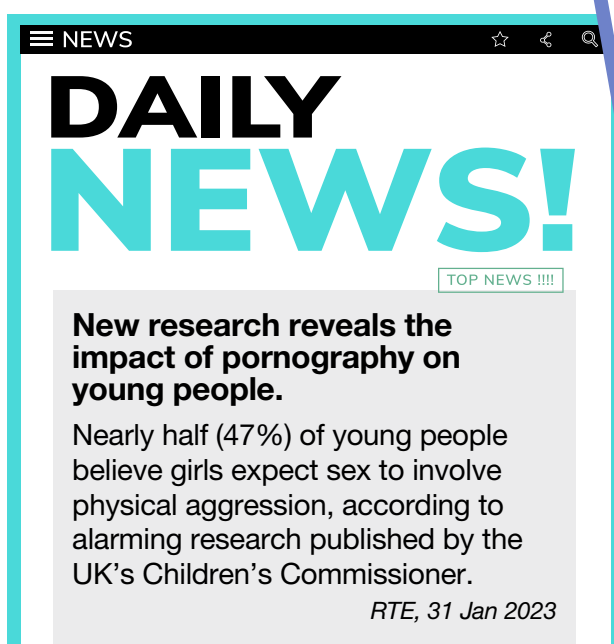
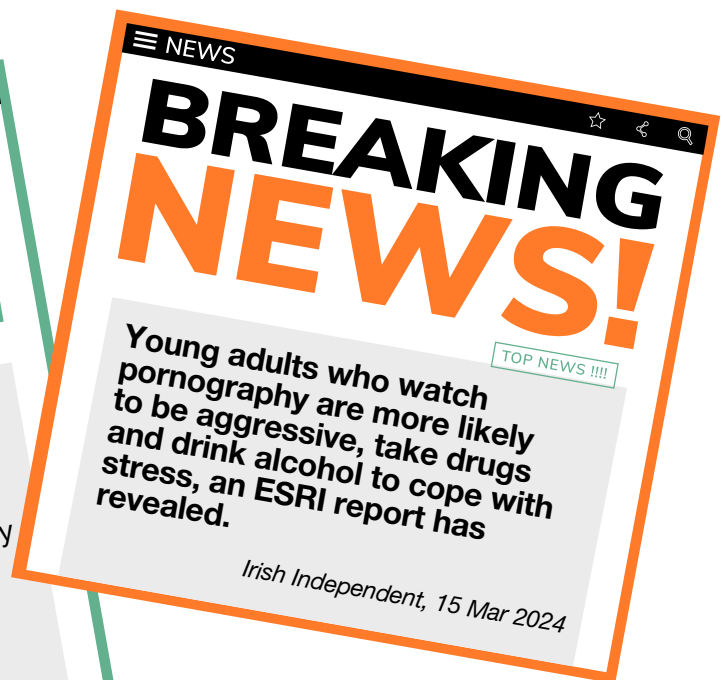
An ESRI research paper [Use of Pornography by Young Adults in Ireland \(2024\)](#) includes these findings:

- Pornography use is gendered, with 64% of young men and 13% of young women reporting use.
- Among both women and men, those who use pornography have higher levels of aggression. They are also more likely to cope with stress by using negative strategies, such as drinking alcohol or drug-taking.
- Men who use pornography have poorer wellbeing than non-users, reporting being less satisfied with their lives, having depressive symptoms and a poorer self-image.
- The highest pornography use among young adults is found among those using the Internet as a source of information on sex from early adolescence onwards. This points to a possible link between using the Internet (including porn sites) as a source of information as a teenager and drifting into habitual use of pornography in young adulthood.

The [Council of Europe](#) has expressed serious concern about the impact that pornography is having on young people. (The Council is a pan-European organisation. It includes 46 member states, 27 of which are members of the European Union.)

The Parliamentary Assembly is alarmed by the unprecedented exposure of children to pornographic imagery, which is detrimental to their psychological and physical development. This exposure brings increased risks of harmful gender stereotyping, addiction to pornography, early and unhealthy sexual relationships, as well as difficulties with developing balanced, respectful relationships in future life.

Newspaper headlines







Activity 6 – Condoms and contraception (LO 3.9)

In this activity students will revise the importance of condom and contraceptive use for people who are sexually active, and discuss some of the barriers to consistent and correct use. They will particularly focus on the need to discuss safer sex practices with a future partner, and to challenge gender stereotypes when it comes to responsibility for condom and contraception use.

Teacher's note

This activity follows on from [RSE 2](#) Activity 10 – Reproductive health – contraception.

For more detail on each contraceptive or for a more extensive list of contraceptives visit <https://www.sexualwellbeing.ie/sexual-health/contraception/>

Key Messages

- The legal age to consent to sexual activity is 17. Research shows that the large majority of young people wait until they are at least 17 to have sex, and many until they are older. For additional information about consent, see [RSE 2](#) Activities 4, 5 and 6 (link to full unit above).
- At this stage of development students do not necessarily need to know all the details of each contraceptive method. The key message is that there is considerable choice when it comes to choosing the right contraceptive that fits with a person's health and lifestyle needs.
- With the wide range of contraceptive methods available, it is possible for the vast majority of people to find a method that best suits their health and lifestyle needs. This decision is usually reached after a consultation with a doctor or other appropriate healthcare provider.
- All methods of contraception, even accounting for typical, rather than perfect use, have a good rate of effectiveness. However, condoms are the only method that also protects against sexually transmitted infections. When there is a risk of an unplanned pregnancy, it is advisable to use both condoms and hormonal contraception for safer sex.
- Contraception is the responsibility of both sexual partners. They should talk about it and decide what to use in advance of any sexual activity which could result in a pregnancy.
- In Ireland, the free contraception scheme is open to women, girls and people identifying as transgender or non-binary who are ordinarily resident in Ireland and for whom prescription contraception is deemed suitable by their doctors. Before class, check <https://www.sexualwellbeing.ie/sexual-health/contraception/free-contraception/> for details, including current age eligibility.
- The HSE offers free condoms and lubricant to people aged 17 years and older. These are available through postal services or community venues. See www.sexualwellbeing.ie
- This lesson will help prepare students for important conversations if they choose to be sexually active in adult life. The more confident they are to have this conversation, the safer and more enjoyable the experience is likely to be.

Step 1: Contraception revision

Check in with what students already know about contraception. Take feedback on the meaning of the word contraception. Explain that contraception is the term given to the various methods used to prevent pregnancy.

Ask students to name as many contraceptives as they can think of. Note responses on the board and use the **Teacher's note – Contraceptive categories** on page 53 to enhance the list if it is limited.

Note: In limited time it is not advised that you prioritise detailed knowledge of the different types of contraception. The focus in this activity should be on the broad categories of contraception and raising awareness of the things that impact on correct and consistent use.

Remind the class that contraception can be categorised in a number of ways, one of which is '**hormonal**' and '**non-hormonal**'. Ask the students to identify which contraceptive is which, and put a '**H**' or '**NH**' beside each method as appropriate.

Explain to students that the methods can be further categorised by:

- Those you have to take every day or use every time a person has sex (**E**).
- Those you have to use regularly, e.g. weekly or three-weekly (**R**).
- Those that are longer acting (**LA**).

Ask the students which of these categories they think each contraceptive falls into and label accordingly (use the Teacher's note at the end of the exercise to clarify).



Suggested discussion points

1. What might be the benefits of contraceptives that:
 - a. are taken every day (e.g. can be used as needed such as condoms, can be stopped quickly if necessary such as the pill, though there may be some residual effects for a while).
 - b. are used regularly but not everyday (e.g. good for people who might forget to take a pill or be unable to use them; can be stopped relatively quickly if they don't suit the person or the person wants to become pregnant, although some can impact on fertility for a time after).
 - c. that act over the longer term (e.g. are good for people who might forget to take a pill; who are sure they don't want a pregnancy in the near future; for whom an invisible contraceptive is important).
2. Why is it important to use condoms when having sex, whether or not there is a risk of pregnancy? (STI protection – using condoms properly, every time a person has sex, is a crucial safer sex message).



End this section by showing the HSE video [How to use a condom](#) (Duration: 30 seconds).

Step 2: Contraception/condom use scenarios

Tell the students that they're now going to look at condom and contraceptive use in different scenarios (age-related consent is not the focus as all couples are over 17 years of age).

Invite the class to get into groups of four and allocate a scenario card to each group, giving them time to discuss and note their responses before sharing with the full class.

Suggested discussion points

- From all the scenarios, what do you think are the most common reasons for not using condoms and contraception? (e.g. unable to bring up the subject with partner, not being aware of/thinking about STI risk, cost. This can be an opportunity to reinforce awareness of the free condom and free contraception services).
- Why do you think it is important to talk to a potential partner about condom use and contraception? (e.g. taking joint responsibility, being prepared, etc.).
- Who in a couple should take responsibility for getting and using condoms and contraception?

Step 3: Advice and information

Starting conversations about contraception can be difficult for many people.

Ask each group of students to identify three pieces of advice that they would give a young adult that might make it easier to talk about contraception and condom use with their partner.

Take feedback (*possible suggestions might be: look up the information on contraception and the free contraception scheme, wait until you are alone with time to talk, don't leave it till the last minute to have the conversation, be open and honest, practise the conversation first, especially if you think they may not be keen on condom use, be patient as your partner might feel awkward with the conversation at first, but be clear on your right to use protection, etc.*).

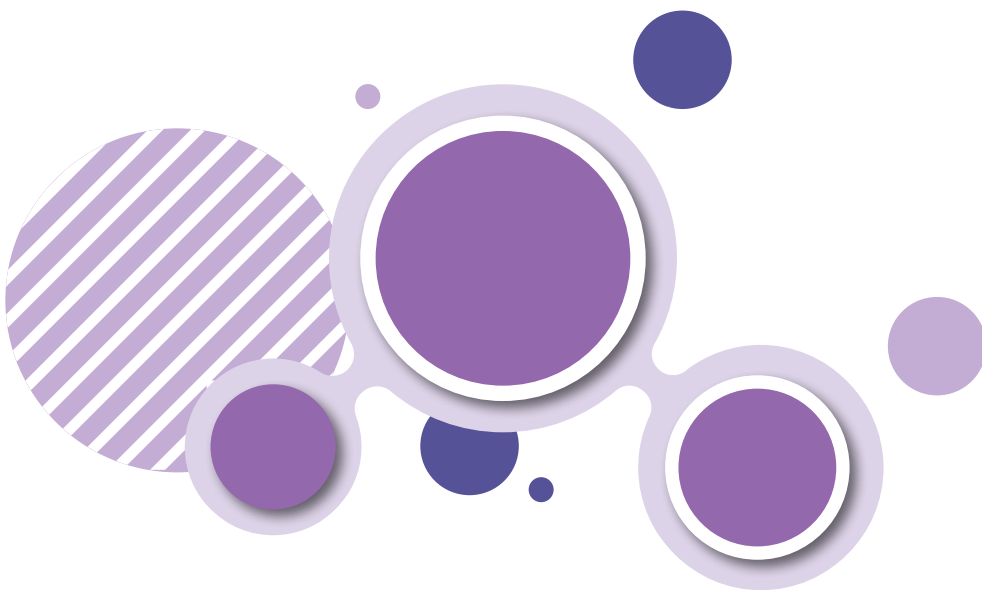
If you feel students might struggle to come up with suggestions, an alternative task might be to give them the above suggestions, ask them to add more, and then rank their top three pieces of advice.

Groups can also be asked to rank the advice out of five, agreeing how difficult or awkward they imagine it would be to implement (1 being easy and 5 being really difficult).

Take feedback from each group and document the feedback on the whiteboard.

If the level of difficulty is so great that the advice is unlikely to be implemented, students can be asked to consider if they think the person is ready to engage in sexual activity.

Closing reflection: The most important piece of learning that stays with me from this activity is...





Contraception/condom use scenarios

(Print and cut into separate scenarios or project and direct each group to a specific scenario).

Scenario 1 (Both people are over 17)

Daniel and Jenna had sex. It wasn't planned and neither of them had condoms at the time. Jenna said it was ok because she is on the pill.

Suggested discussion points

- Are there risks? What are they?
- What should they do next?
- Any advice for them for the future?

Scenario 2 (Both people are over 17)

Lee didn't use a condom with his new boyfriend, Kevin, because Kevin didn't want to and told him he didn't have an STI.

Suggested discussion points

- Are there risks? What are they?
- What should they do next?
- Any advice for them for the future?

Scenario 3 (Both people are over 17)

Irina is Peter's first girlfriend. He stayed over in her house last night and they had a few drinks. One thing led to another and they had sex. He was too embarrassed to even bring up the question of condoms and she didn't mention it either.

Suggested discussion points

- Are there risks? What are they?
- What should they do next?
- Any advice for them for the future?

Scenario 4 (Both people are over 17)

Carla and Alexandra have been seeing each other for a while. They talked about taking their relationship to the next level, what each of them wanted and their boundaries, and discussed protection from sexually transmitted infections (STIs).

Suggested discussion points

- Are there risks? What are they?
- What should they do next?
- Any advice for them for the future?

Scenario 5 (Both people are over 17)

Anna and Paul had sex and used a condom. Paul got the condom the wrong way around at first, but quickly turned it over and rolled it on.

Suggested discussion points

- Are there risks? What are they?
- What should they do next?
- Any advice for them for the future?

Teacher's note – Contraceptive categories exercise

This table shows commonly used contraceptives. Natural methods of contraception are not discussed within this lesson as they involve tracking periods to see when a person is most fertile. These methods of contraception are not adequately effective for young people who menstruate as they require an in-depth knowledge of their menstrual cycles. For some people a regular cycle can take years to establish. There are also other things within a young person's life that can interfere with the regularity of their menstrual cycle or timing of ovulation, such as stress, exercise, illness etc. Also this lesson does not refer to the diaphragm, the cap or the female/internal condom as these are not typically recommended as reliable forms of contraception to young people. The Copper Coil and IUS are also not commonly used by this group, but may be referenced. However, if you'd like to include more detail on all of these, go to <https://www.sexualwellbeing.ie/sexual-health/contraception/>

Contraception method	Hormonal/ Non-hormonal	Every day or every time (E), Regular (R) or Long Acting (LA)
Condom (male/external)	NH	E (use every time)
Combined pill	H	E (take every day)
Mini pill (progestogen only)	H	E (take every day at the same time)
Patch	H	R (use one per week for 3 weeks out of every 4)
Vaginal ring	H	R (use one for 3 weeks out of 4)
Injectable contraceptive	H	LA (lasts 12 weeks)
Implant	H	LA (lasts 3 years)
Copper coil IUCD (intrauterine copper device)	NH	LA (lasts 5-10 years)
Hormonal coil IUS (intrauterine system)	H	LA (lasts 3-8 years)



Teacher's note – Contraception and condom use scenarios

Each scenario outlines some relationship and health issues. The public health message is clear in relation to the need for both partners to take responsibility for their own health, their partner's health, and societal health, by using condoms correctly and consistently, along with another form of contraception if a pregnancy is possible.

Scenario 1

This scenario is designed to tease out issues related to people's focus on avoiding a pregnancy without necessarily thinking about the danger of catching or passing on a STI. There is also the benefit of double protection from an unplanned pregnancy when using condoms and another form of contraception. There are circumstances which impact on the pill's effectiveness (e.g. not taking it as prescribed, vomiting or having diarrhoea over a few days).

Depending on their past sexual history, they both might require an STI test.

Scenario 2

This scenario is designed to tease out issues related to:

- issues of appropriate trust in a recently formed relationship
- people who have an STI (or more than one STI), may be asymptomatic, or appear so. Testing is the only way to be sure that a person does not have an STI.

In this scenario, depending on their past sexual history, they both might require an STI test.

Scenario 3

This scenario is designed to tease out issues related to:

- a reduced capacity to make healthy decisions regarding sexual activity and to use safer sex practices when intoxicated by alcohol.
- depending on the amount of alcohol taken and the effect, there could also be questions relating to consent.

If Irina is not using another form of contraception, she might wish to access emergency contraception. Depending on their past sexual history, they both might require an STI test. If neither one of them is confident enough to bring up the subject of contraception and STI protection beforehand, or to discuss the possible consequences of not using protection afterwards, it raises the question as to whether they were ready to have sex in the first place.

Teacher's note – Contraception and condom use scenarios continued

Scenario 4

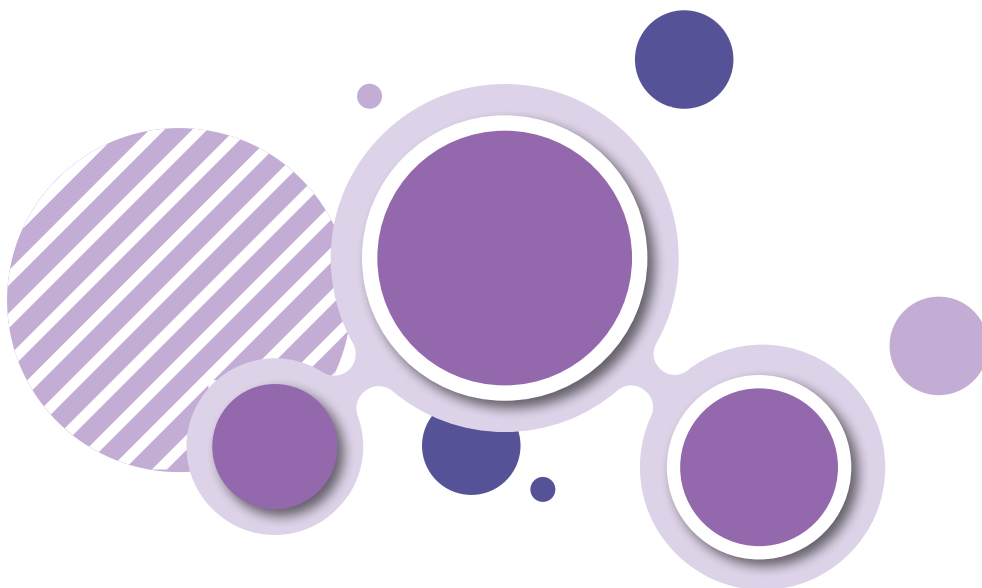
This scenario is designed to tease out the benefits of considering sexual activity in advance, making a decision about the sexual activity that they want and don't want, and how to keep themselves as safe from an STI as possible.

Depending on the sexual activity, the next step might be for them to agree who is getting the condoms or dental dams ((a dental dam is a thin piece of latex that can be placed over the vulva or anus to protect against STIs during oral sex. If unavailable, condoms can be cut open and used).

Scenario 5

This scenario is designed to tease out the dangers of taking a chance in a moment of sexual excitement. The condom may now have semen on the outside which may cause an unplanned pregnancy or pass on an STI. Unless people are aware of this danger in advance, there can be an understandable temptation to use a (possibly contaminated) condom, especially if the couple are unprepared and only have one.

If Anna is not using another form of contraception, she might wish to access emergency contraception. Anna might also require an STI test.



Activity 7 – Sexually transmitted infections (LOs 3.5, 3.9)

In this activity students will discuss ways to reduce or prevent the risk of acquiring and passing on a sexually transmitted infection (STI). Students will have the opportunity to challenge some STI-related myths. The aim is to destigmatise, but not trivialise, sexually transmitted infections, and thus encourage prevention and help-seeking behaviour in the event of a suspected, or actual, infection.

Teacher's note

This activity does not go into the detail of each type of sexually transmitted infection, as the main message is that people should use condoms, and go for testing if they have been at risk of contracting an STI. However, if desired, more detail on specific STIs may be found on www.sexualwellbeing.ie.

For this age and stage of student development, the **key messages** are:

- The legal age of consent to sexual activity is 17 years, and the majority of young people in Ireland are not sexually active before then. It is important that young people are aware of health issues like STI prevention, testing and treatment before they become sexually active.
- STIs are, like most other infections, best prevented, often curable, and **always** treatable. Early diagnosis and treatment result in the best outcomes.
- Anyone who is sexually active may be at risk of contracting an STI, depending on the circumstances. For detailed information on how to prevent STIs see <https://www.sexualwellbeing.ie/sexual-health/sexually-transmitted-infections/how-do-i-prevent-stis-/>.
- In addition to condom use, there are a number of vaccines and medications available that can help prevent STI and HIV infection. The HPV (human papillomavirus) vaccine is offered to all young people in first year of secondary school. This gives protection against genital warts and a range of HPV-related cancers. See <https://www.hse.ie/eng/health/immunisation/pubinfo/schoolprog/hpv/>. Vaccines are also available to protect against hepatitis A and B. See <https://www.sexualwellbeing.ie/sexual-health/vaccinations/>.
- In heterosexual sexual activity, in order to minimise the risk of contracting an STI, condoms must be used in addition to hormonal contraception (e.g. the pill, implant (bar), patch, ring, injection) or non-hormonal contraception (e.g. the coil). The exception is if a couple are in a long term exclusive relationship, know their STI status, and possibly want to conceive.



Teacher's note continued

- Many STIs are initially asymptomatic, so it is impossible to be sure whether a person has an STI without proper testing. If a person has unprotected sex or has symptoms of an STI, it is vital that they are tested, diagnosed, and treated as soon as possible in order to avoid damage to their own health and transmission of the STI to other people.
- See <https://www.sexualwellbeing.ie/> for more information on STIs, and on the free and confidential STI testing and treatment services available through public clinics, and the home testing service to over 17s.
- Sixteen is the legal age of medical consent in Ireland. People younger than that are legally considered children. However, STI clinics will generally encourage all young people under 17 to bring a parent or guardian to an appointment. Confidentiality is assured unless there is a risk to the client or to someone else.
- Some STI clinics will see young people under the age of 16 and there are two specific STI youth clinics in the country: Dublin (<http://guideclinic.ie/sti-clinic/young-personsclinic>) and Cork (www.mysexualhealth.ie/youth-health-services)



Step 1: What is an STI?

Write the letters **STI** on the whiteboard and ask the class if they know what the letters stand for and then, if they know what a 'sexually transmitted infection' is.

Take feedback from a few students and then read out the definition of an STI to the class.

Highlight the word '**infection**' on the board and explain that, like many infections, STIs can be treated. Early diagnosis and the correct treatment can often result in cure and reduce the impact on health.

Ask the group if they can name a few STIs. Take some feedback but do not spend too much time on this.

Point out that STIs are much like any other infection that people can get from close contact with another person, and that they can generally be categorised into viral, bacterial, and parasitic or germ infections.

Definition

A sexually transmitted infection (STI) is an infection that is passed on through sexual contact (i.e. contact with bodily fluids and faeces, or through skin-to-skin contact during vaginal, oral and anal sex) with someone who has an infection.

Ask the class how:

- viral infections are generally treated. *(there are no 'cures' for viral infections, the body might clear the infection itself in time, or the infection might become chronic. In both cases, it is very important to go to a doctor as there are medicines that can treat the symptoms and help reduce the impact of the infection on the body).*
- bacterial infections are generally treated. *(antibiotics clear most bacterial infections if taken as prescribed. It is still better to avoid getting the infection in the first place, and there is also concern about the increase in antibiotic-resistant infections.)*
- parasitic infections are generally treated. *(with a variety of medications, depending on the nature of the infection, e.g. antibiotics, antifungals).*

Show the students this short video, asking them to take note of all the ways mentioned that a person can reduce their chances of getting an STI.



Video: [Amaze, STI Prevention Beyond Condoms](#) (Duration: 3 minutes, 53 seconds).

Suggested discussion points

- What are the main message(s) you take from this video?



Step 2: STI Transmission



This activity can be done individually or in pairs. Distribute the **Worksheet: STI transmission** to each student or pair, and project the **STI transmission exercise - Information sheet** on to the board.

Ask students to draw lines on the sheet between the people who have had sexual contact within a calendar year. Note the month of contact along the connecting line.

Note: When students have completed that task, give them the additional information that Johanne had an STI infection the Dec before. She didn't know she had the infection as she had no obvious symptoms.

With reference to their worksheets ask the students:

- Who might have got an STI as a result of having sex with Johanne? (*Radu and Patrick*).
- Who could have got an STI from having sex with these people? (*Abigail and Jane*).
- Is it only the people who had sex with Johanne, and the people who had sex with them, who are at risk of an STI? (*No, Johanne is only one known source of transmission, anyone who has sexual contact without using a condom or dental dam is at greater risk of contracting an STI*).
- How could Johanne and others have avoided or reduced the chance of becoming infected? (*Abstaining from sexual contact involving the sharing of bodily fluids or close skin-to-skin contact, or using a condom properly every time they had sex*).

Inform students that many people want to know from whom they got an STI, and it is not always possible to tell. Not everyone who has an STI and has sex with someone **will pass on** the STI, and not everyone who has sex with that person **will get** the STI. There are a number of factors at play for both people.

The key message is that people should take precautions to avoid an STI and if they have been at risk, should focus on getting tested and, if necessary, treated.

Step 3: Quiz



Read through the statements in the **STI quiz** and ask the students, whether working individually or in groups, to answer 'true' or 'false' to each one. Use the notes given with each statement in the STI quiz answer sheet to generate a discussion.

Suggested discussion points

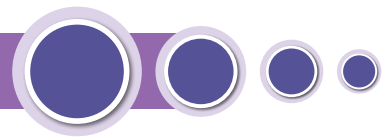
- Do you think young people are concerned about STIs? Why? Why not? Should they be?
- In the video it is advised that condoms must be used 'correctly' and 'consistently'. What is meant by that? (*refer back to the HSE video in Activity 6 on page 49, 'How to use a condom'*).
- What might increase the likelihood of young people using condoms consistently and correctly? (*e.g. if condoms were free, if people had them to hand, if neither person was intoxicated, if condom use was discussed with a partner in advance*).

Reflection question: *One thing I have learned about taking care of my sexual health in adult life...*

STI Transmission exercise – Information sheet

- **Peter and Karl had sex in early February**
- **Kai and Jordan had sex in July**
- **Tom and Jane become each other's first ever sexual partners in April**
- **Johanne and Patrick had sex in May**
- **Radu had sex with Johanne in January**
- **Giovanni and Nicola had sex in March**
- **Patrick and Jane had sex in December**
- **Abigail and Radu had sex in June**





Worksheet – STI transmission

Use the information on the board to draw lines between the characters who had sex with each other and note the month of contact.



Tom



Jane



Saoirse



Kim



Sam



Kai



Alex



Louise



Johanne



Patrick



Teresa



Jordan



Paval



Radu



Ann



James



Karl



Lia



Giovanni



Nicola



Abigail



Emma

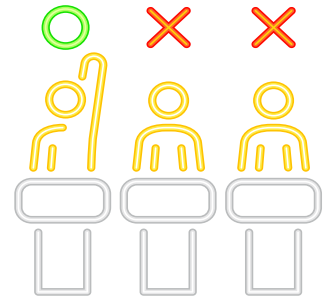


Aidan



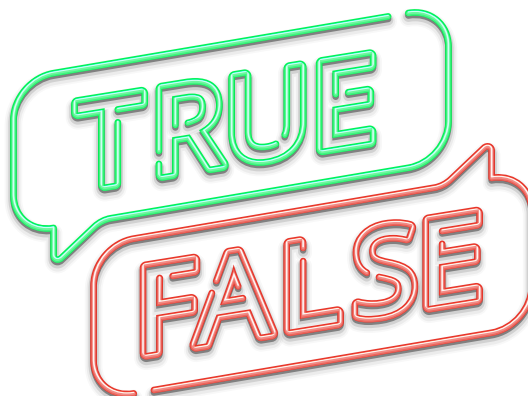
Peter

QUIZ



STI quiz – True or false?

1. The HPV vaccine gives protection against genital warts.
2. Someone can have an STI without knowing it.
3. Someone can get an STI even if they do not have penetrative/insertive sex (sex where a part of one person's body is inserted into another's, e.g. oral, anal and vaginal sex).
4. The contraceptive pill protects against STIs.
5. A person cannot get an STI the first time they have sex.
6. A person can get an STI again, even if it has been treated before.
7. A person cannot get an STI if the penis is withdrawn before ejaculation.
8. STIs can be spread by having oral sex.
9. The free HPV vaccine, given by the HSE in schools, is only offered to girls.
10. The HSE STI testing and treatment services are free and confidential.





ANSWERS

STI quiz – Answer sheet

1. The HPV vaccine gives protection against genital warts.
True. The HPV vaccine gives protection against the two strains of the HPV virus which can cause genital warts. In countries where the HPV vaccine is used, the number of cases of genital warts has decreased dramatically. The HPV vaccine also gives protection from the strains of the virus that cause or are linked with a range of cancers. The strains of HPV that cause cancer are different to those that cause genital warts.
2. Someone can have an STI without knowing it.
True. Many STIs are asymptomatic. Many people will not look or feel ill. Some have early symptoms that go away, but the infection stays in the system, causing harm unless treated (e.g. syphilis).
3. Someone can get an STI even if they do not have penetrative/insertive sex.
True. For example, the viruses that cause genital warts and herpes can be contracted through close skin-to-skin contact.
4. The contraceptive pill protects against STIs.
False. The contraceptive pill only protects against pregnancy. Using a condom along with hormonal contraception will give the best protection against both STIs and pregnancy.
5. A person cannot get an STI the first time they have sex.
False. A person may be at risk of an STI, even the first time they have sex, if their partner has had sex previously and has an infection. If sexually active, the best protection available is proper condom use, along with other safer sex practices (like regular STI testing).
6. A person can get the same STI again, even if it has been treated before.
True. A person can contract an STI multiple times, and multiple STIs at the same time, through unprotected sex or close skin-to-skin contact with a person who has an infection.
7. A person cannot get an STI if the penis is withdrawn before ejaculation.
False. Even when a penis is withdrawn before ejaculation, the pre-ejaculation fluid released (pre-cum) may still carry bacteria and viruses. An STI can be transmitted through this as well as through vaginal fluids, blood, faeces and through close skin-to-skin contact.
8. STIs can be spread by having oral sex.
True. Many STIs (e.g. chlamydia, herpes, human papillomavirus (HPV), gonorrhoea, syphilis) can be spread through oral sex if an appropriate barrier (e.g. a condom or a dental dam) is not used. A dental dam is a thin piece of latex that can be placed over the vulva or anus to protect against direct mouth-to-genital or mouth-to-anus contact during oral sex, and reduces the risk of contracting an STI. STIs can also be spread through vaginal and anal sex.
9. The free HPV vaccine, given by the HSE in schools, is only offered to girls.
False. Initially the free HPV vaccine was only offered to girls and people with a cervix, because cervical cancer is the most common cancer caused by the HPV virus. However, the vaccine is now offered to everyone in first year because, in addition to causing cervical, vaginal and vulval cancer, HPV can also cause cancer of the penis, the anus and the oropharynx (part of the throat at the back of the mouth).
10. The HSE STI testing and treatment services are free and confidential.
True. The STI home testing service is available free of charge to people from 17 years of age. In-person HSE STI clinics are also available around the country, all of which offer a free and confidential service to people from 17 years of age.

Activity 8 – Safer sexual activity (LOs 3.8, 3.9)

In this activity, students will examine what is meant by the term ‘safer sexual activity’, from both a physical and emotional perspective. They will identify potential risks attached to sexual activity and discuss ways to ensure the experience is safe, consensual and enjoyable for all parties.

Teacher's note

The class should be reminded at the outset, that the legal age to consent to sex in Ireland is 17. The majority of young people are not sexually active at that age but most will become so during their lifetime. If people begin to consider what would make these experiences physically and emotionally healthy and pleasurable before they become sexually active, there is a better chance the experience will be good when the time comes.

Safer* sexual activity is generally understood as consensual sexual contact that does not put one at increased risk of STIs and unplanned pregnancy. For the purposes of this activity, we are extending the discussion to include other behaviours and factors that contribute to emotional as well as physical safety.

*The term ‘safer’ sex is used rather than ‘safe’ sex as there is no guarantee of safety when it comes to close sexual contact with another person. For some it will include a risk of pregnancy, and for all it will include a risk of catching an STI. That said, there are practices that can make sexual activity much safer for everyone involved.

Step 1: Brainstorm

Introduce the activity, using the content of the first paragraph in the Teacher's note.

In pairs or small groups, ask the students to discuss what they think the term ‘safer sexual activity’ means.

Take feedback and then share the definition.

Ask them if they think anything else is necessary for people to feel safer when engaging in sexual activity.

Take feedback and tell them that this activity will look at how people can make sexual activity safer in both the physical **and** emotional sense.

Definition

Safer sexual activity is generally seen as consensual sexual contact that does not put a person at increased risk of STIs and/or unplanned pregnancy.



Step 2: Risky or safer?

Divide the class into groups of four.



Give each group a set of cards describing various behaviours related to sexual activity. Ask students to discuss the cards one by one and put them into one of the two categories:

Risky sexual activity

Safer sexual activity

Someone in the group should take a note of the rationale for their decisions. If there is disagreement, a brief note of the different opinions should also be taken.

When the groups have finished, take feedback from the class as to where each card should be placed and why.

Encourage discussion and debate on each behaviour card, for example:

- What would help make some of the behaviours less risky and more mutually enjoyable?
- Do you think the safer behaviours are 'doable' in real life? Why? Why not?

Note: If the students haven't already raised it then make sure to highlight that the statements with the asterisk are not just risky but are, or could be, illegal.

- If someone shares or even threatens to share explicit images or videos of another person without their permission, this is image-based sexual abuse. It is against the law under the Harassment, Harmful Communications and Related Offences Act 2020. For more information on this offence go to <https://www.irishstatutebook.ie/eli/2020/act/32/enacted/en/print>
- If someone doesn't make sure that their partner is consenting to sexual activity they may be committing an offence. For more information on this offence go to <https://www.irishstatutebook.ie/eli/2017/act/2/enacted/en/html>

Suggested discussion points

- Which cards caused particular debate or disagreement in your group?
- Can you identify other safer sex actions or other risky actions not mentioned on the cards?
- What contributes to risky sexual behaviours? (*e.g. using alcohol or drugs*, not being prepared*)
- Why is it important to use condoms correctly during sexual activity where pregnancy or STIs are a risk?
- What are the benefits of somebody who is sexually active getting regular STI testing?
- Are there times when abstaining from sex might be the best course of action? (*e.g. when someone is intoxicated by alcohol or other substances; when the activity is not in keeping with a person's values – personal, religious, or cultural; when it's not what a person really wants; when people haven't got their contraceptive or STI protection sorted out, etc.*).

*It is important for the teacher to emphasise that if a person is affected by alcohol or drugs to the point that they can't really make a decision, they cannot legally consent to engage in sexual activity. As this can be hard to tell, it is always best to make decisions about sex when both people are sober.

Alternative method: Snakes and Ladders

Tip: Print the board and the sets of cards on card and laminate for future use.

Divide the class into smaller groups of three or four.

Give each group a copy of the snakes and ladders game, a die (may be available to borrow from the Maths Department), a set of counters (or students can use whatever they have, e.g. coins, pen tops, etc.) and a set of snake and ladder cards in two separate bundles, turned face down.

Ask students to play the game for about 20 minutes or so (it doesn't matter if nobody has won when you call a stop). Each time a student lands on a snake or ladder they move as directed and take the appropriate card from the pile. The group then briefly discusses why that action is a snake or a ladder, including all the ways in which that action might make a sexual activity more or less safe, mutually enjoyable, etc. They can shuffle and reuse cards if necessary within the given time.

Use the **Suggested discussion points** on page 65 to explore the learning.

Note: See page 65 for note on statements with asterisks.

Step 3: Reflection

Reflecting on what you have learned from today's class, list your top five tips on safer sexual activity and say why you have chosen them.



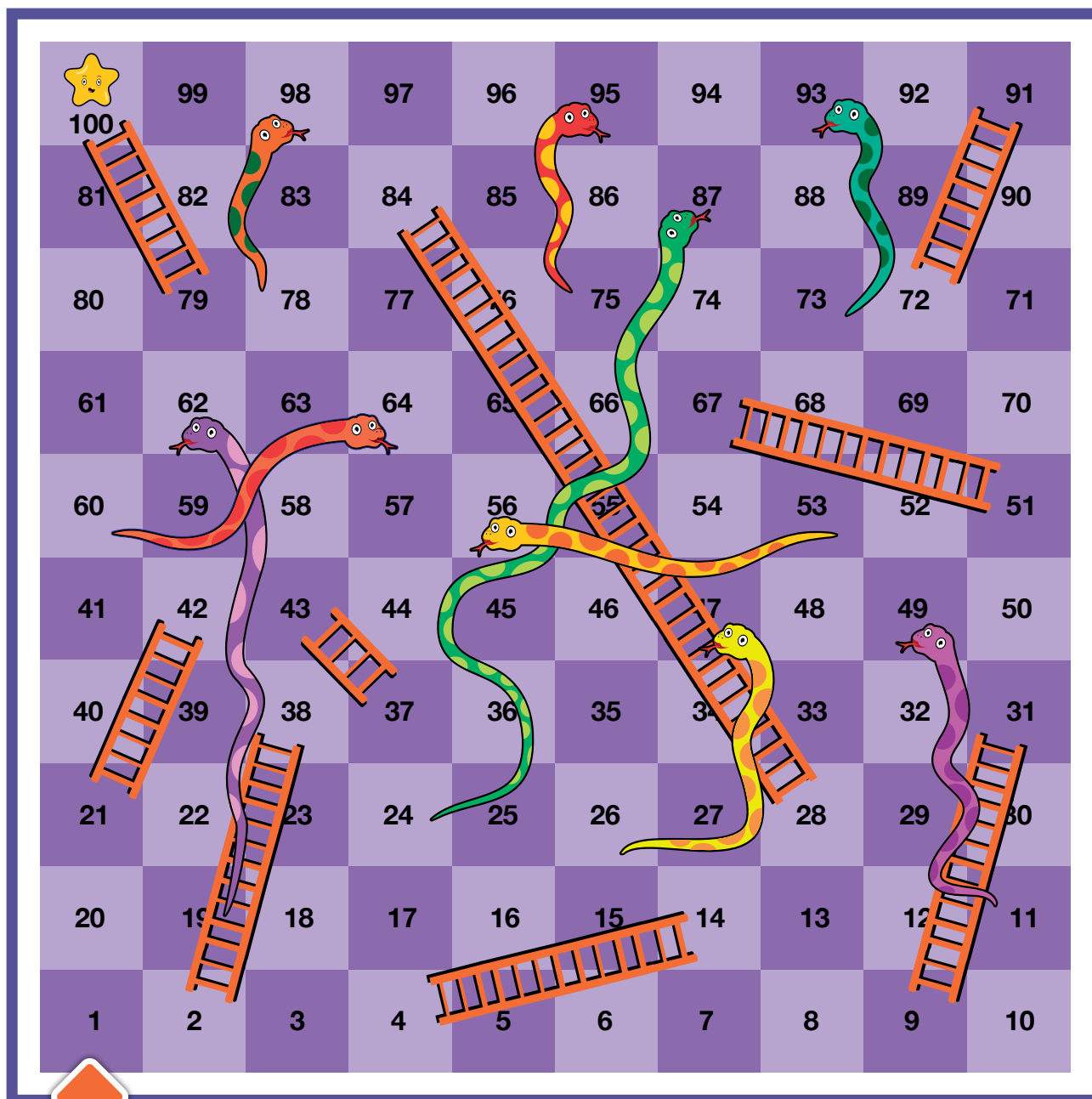
Worksheet – Risky or safer sexual activity cards

(Print as many sets as required, cut into individual cards, and shuffle before lesson)

Gives respect and expects respect in every sexual relationship and activity.	Gets tested, and if necessary, treated, for STIs if they have had unprotected sex.
Always uses contraception when sexually active, to prevent an unplanned pregnancy.	Doesn't know anything about a partner's relationship and sexual history.
Talks about sexual preferences and boundaries with partner and agree activities.	Pays attention to partner's words and body language to make sure that their sexual activity is consensual.
Assumes that sexual activity seen on screen or in porn is wanted by a partner.	Uses condoms every time sexual activity involves a risk of pregnancy and/or STIs.
Ignores ongoing disrespectful behaviour from a partner.	*Shares a partner's intimate photos online without permission.
Checks to make sure that sex is consensual and wants it to be pleasurable for both partners.	*Ignores the non-verbal signs that their partner may not really be into the sexual activity in which they're engaged.
Accesses emergency contraception and gets tested for STIs if at risk of unplanned pregnancy or contracting STIs.	Doesn't make a habit of carrying condoms, although they know there is a likelihood of having sex.
Doesn't know their own and/or partner's STI/HIV status.	Doesn't bother with using a condom if a sexual partner looks healthy.
Thinks carefully about whether they are ready to get into a sexual relationship before making a decision.	Gossips with friends about the details of their sexual relationship – without their partner's consent.



Safer sexual activity – Snakes and ladders board



Legally able to consent



Safer sexual activity – Snakes and ladders cards

(Print as many sets as required, laminate, cut into individual cards and sort into separate Snakes and Ladders piles before starting)

	Gives respect and expects respect in every sexual relationship and activity.		Assumes that sexual activity seen on screen or in porn is wanted by a partner.
	Always uses contraception when sexually active, to prevent an unplanned pregnancy.		Doesn't know anything about a partner's relationship and sexual history.
	Talks about sexual preferences and boundaries with partner and agree activities.		Ignores ongoing disrespectful behaviour from a partner.
	Gets tested, and if necessary, treated, for STIs if they have had unprotected sex.		Doesn't know their own and/or partner's STI/HIV status.
	Pays attention to partner's words and body language to make sure that their sexual activity is consensual.		*Shares a partner's intimate photos online without permission.
	Checks to make sure that sex is consensual and wants it to be pleasurable for both partners.		*Ignores the non-verbal signs that their partner may not really be into the sexual activity in which they're engaged.
	Accesses emergency contraception and gets tested for STIs if at risk of unplanned pregnancy or contracting STIs.		Doesn't make a habit of carrying condoms, although they know there is a likelihood of having sex.
	Uses condoms every time sexual activity involves a risk of pregnancy and/or STIs.		Doesn't bother with using a condom if a sexual partner looks healthy.
	Thinks carefully about whether they are ready to get into a sexual relationship before making a decision.		Gossips with friends about the details of their sexual relationship - without their partner's consent.

Activity 9 – No regrets! (LO 3.7)

In this activity students will explore reasons for becoming sexually active and consider the importance of it being an informed and considered decision. Students will also discuss how young adults might give themselves the best chance to make their first sexual encounter physically and emotionally healthy.

Step 1: Decisions, decisions

Point out to students that we make a huge number of decisions every day without a lot of thought, but important decisions have consequences and deserve more time and consideration.

1. Ask the students to think of a decision they have made, which they believe was good for them. Then ask, 'How do you feel in your head (think), heart (feel emotionally) and gut (feel physically) after you have made a decision that is right for you?' Take feedback.
2. Ask the students to think of a decision they have made, which they knew or suspected was bad for them. Then ask, 'How do you feel in your head (think), heart (feel emotionally) and gut (feel physically) after you have made a decision that is not right for you?' Take feedback.
3. Ask the students if, and how, they have found 'gut reactions' useful in decision-making (*acknowledge that it isn't always easy to interpret our gut reactions, but they are generally telling us that there's something to which we need to pay attention, to think about more*).



Give each student or pair the **Worksheet: Thinking about decisions**. Read out the following scenario.

Scenario: If Sam goes out this weekend, they know they will be put under pressure to drink even though they don't want to. Everyone else is going out.

As a class (it can also be done individually if the time allows), work through the steps on the worksheet to help Sam make the decision that is likely to have the best outcome. Ask the students to consider any of their head (thinking), heart (emotional feeling) and gut (physical feeling) responses when considering each of the three options. Based on this, ask them to vote on the options to suggest a preferred course of action for Sam.



Suggested discussion points

- What was easy/difficult about this exercise?
- How much were you influenced by:
 - » other people's thoughts and opinions? (e.g. *did anyone start off with one preferred course of action and be swayed by the arguments of others? Was this a positive or negative influence in terms of the healthiest outcome for Sam?*)
 - » your own attitudes and values? (e.g. *how did your personal values about friends, alcohol, etc. affect your decision-making for Sam?*)
- Did thinking about your head, heart and gut responses to the options and consequences help you to make a decision?

Step 2: Jas and Ali

Tell the students that the decision to have sex for the first time is a really important one in many people's lives, and can have lasting impacts. While someone's first sexual experience may not be their best, it shouldn't be one that leaves them with regret and other unwanted consequences. Because of this, whether, when, and with whom a person has first and subsequent sex should be active, rather than passive, decisions. Even after becoming sexually active, a person shouldn't be expected or pressurised to continue to be sexually active on other occasions or in other relationships. It is always the person's right to decide.

Ask the class what the legal age of consent is in Ireland. Confirm that it's 17 but tell them that this doesn't mean that most people have sex at that age. National research tells us that most young people in Ireland have sex for the first time somewhere between 17 and 20 years of age, with one in six people waiting until they are in their 20s⁷.

NB It is also important to acknowledge that some people will choose not to be sexually active at all.

Point out that the vast majority of students their age are not yet sexually active, but it's important to think of these things well in advance. The following activities will help the students to think about what would be important to consider when making decisions about sexual activity in the future.



Ask the class to get into pairs or small groups of three and allocate each small group the **Worksheet: A decision to be made**, or project it onto the whiteboard.



Using the prompts from their previous **Worksheet: Thinking about decisions**, ask half of the students to help Ali to make a decision as to what to do, and the other half of the students to help Jas.

When they have had enough time to complete the task, bring the class back together and hear each group's decision and reasoning. Prompt them to elaborate on the small group discussions, especially where difference of opinions occurred.

⁷ ESRI (2025) Sexual Initiation and sexual health behaviours amongst young adults in Ireland

Suggested discussion points

- Was it useful to work through some of the options and their possible consequences in helping Ali and Jas come to a decision?
- Did your group agree on the best option? Why? Why not?
- Do you think that the decision your group made would be realistic in everyday life? Why? Why not?
- What do you think of the role of friends in influencing the decision? Should they be the only people a young person turns to for support in making a big decision like having sex for the first time? Why? Why not?
- Apart from friends, who else could a young person ask advice from when they're making a decision like this?

Step 3: No regrets!

People are less likely to regret their first sexual experience if they have been able to make an informed and considered decision, free from coercion and pressure, and they have thought about how to make the experience as good and safe as possible. Explain that this next activity will help them tease out how a person might go about doing that.



Project the **Worksheet: No regrets!**

Read through the activity instructions and, ensuring that the students know how to do a Diamond 9 ranking, ask students to complete the diamond individually and then share as much or as little of their responses as they wish.

Suggested discussion points

Invite a few responses to the following questions, respecting students' right to not share.

- What were your top and bottom factors and why?
- Did you add more factors? Explain why you think they're important?
- How easy or difficult was it for you to decide the ranking?
- Do you think an older or a younger person is more likely to be able to put in place the things that will help make a first sexual experience physically and emotionally good?

Take a few examples from the list (*e.g. to make a considered and informed decision, free from coercion and pressure, to be in a relationship of trust, to be able to talk about and agree contraception use, to have a safe and private space, use protection against STIs, etc.* Research tells us that there are good health reasons for deciding to delay first sexual activity until someone is older and experienced enough to have a better chance of taking care of their health and that of their partner.)

Closing individual student reflection: *An important learning for me from today's class is...*



Worksheet: Thinking about decisions

Your options

- 1.
- 2.
- 3.

Possible consequences of option 1 (including who else might be affected by the decision)

Positive Negative

Possible consequences of option 2 (including who else might be affected by the decision)

Positive Negative

Possible consequences of option 3 (including who else might be affected by the decision)

Positive Negative

Worksheet: A decision to be made

Ali and Jas have been in a relationship for a while. Neither of them has yet had sex. Ali has invited Jas over to work on their Leaving Cert history projects. Ali has a free house and they are both conscious that 'one thing might lead to another' but neither has mentioned it.

Ali hangs around with people who are a bit older and most seem to be sexually active. Although they've never said anything, Ali is feeling a bit of pressure to get on with it. When Ali invited Jas over, it was with the intention of taking advantage of the situation to have sex for the first time, but Ali is less sure about it as time goes on. Although not really a drinker, Ali is wondering about getting a few cans in, to ease the tension.

Jas really likes Ali and enjoys 'messaging around' together but is not sure about having sex. It's going to be hard to say 'No', once they're alone in the house. Friends all seem to have an opinion. Sophie thinks they should either talk it through beforehand or avoid the house on the night, but Jess thinks they might as well get it over with.

Help Ali and Jas make a decision they have the best chance of being happy about. Use the **Worksheet: Thinking about Decisions** and discuss the questions below as you work through the options.

Consider the following questions when discussing Jas' and Ali's options

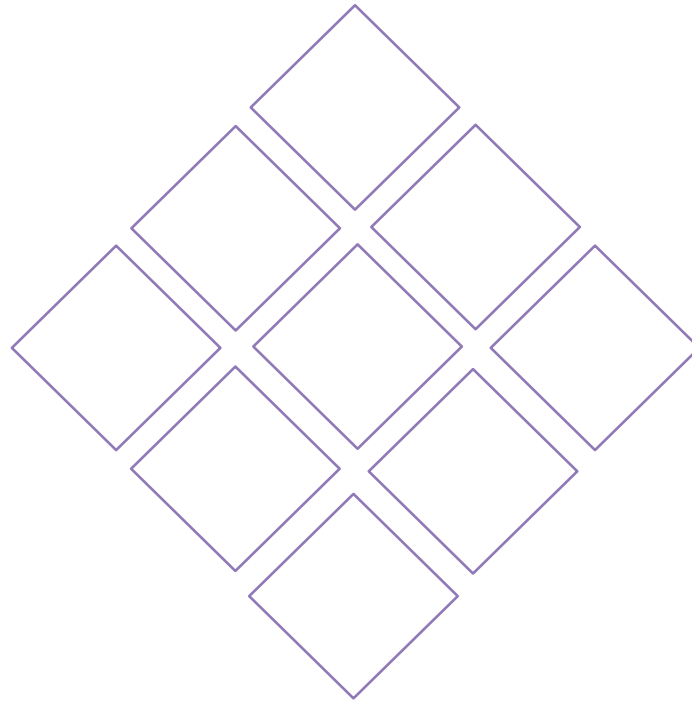
- Is there an urgency for this decision to be made? Why? How might this affect the decision?
- Who is feeling pressure in this situation and where is it coming from?
- Jess thinks they might as well 'get it over with'. Why might she say this? Is it likely to lead to a good experience for the two people involved?
- What might Jas' and Ali's 'guts' be telling them?
- Who might be a good source of advice for each of them?





Worksheet: No regrets!

1. Draw a blank Diamond 9 model onto a sheet of paper or into your exercise book as follows.



2. Using the items below or adding additional factors of your own, decide the top nine factors which you think would help make a couple's first sexual experience a good one.

They are in a relationship and have built up trust.	Both people can trust that they will treat each other well before, during and after sex.	They love each other.
They are married/in a long-term committed relationship.	They care about it being a good experience for each other.	They agree and trust that they will not share details with other people that could hurt or humiliate their partner.
Both feel sexually attracted to each other.	Both partners can talk about what they do and don't want to happen.	They have a comfortable, private location.
The timing and circumstances fit with their personal values (moral, cultural, religious, etc).	They can work out what they do together – there's no pressure to perform.	They have talked about STIs and, if relevant, unplanned pregnancy protection, and are equipped with condoms and contraception.
They have freely consented to the activity before and during the sexual activity.		

Activity 10 – Bringing it all together (LO 1.2)

In this activity students will review and assimilate their learning from this unit. They will reflect on what they have learned and what it means for them. From this, they will create a visual representation to show their hopes for relationships in their future lives.

Step 1: Reflecting on learning

Think, Pair and Share

Begin by asking students to think about this term's lessons in SPHE, and to jot down any stand-out moments or topics that they remember. Ask them to particularly focus on anything that stands out because it marked an important learning experience for them – perhaps a particular classroom discussion, a moment when they were challenged to think or act differently, a moment of personal awareness or awareness of others, or a skill or strategy they learned. Allow a couple of minutes for this reflection. Students might find it helpful to look back through their SPHE folder/ copybook to prompt their memory.

Then ask students to **Pair and Share** one moment of important learning. If they feel comfortable, invite them to share with their partner why they chose this example of learning and how this learning might be relevant in their lives now or in the future.

Invite students who wish to share an example of their learning with the whole class, to do so. Explore these examples and why they were of importance.

Step 2: Reach for the stars

In introducing this part of the lesson, acknowledge that a number of recent lessons have addressed challenges related to relationships and sexuality. Point out that despite the challenges, it's important to remember that relationships can be a major source of happiness in our lives – especially when relationships are healthy, loving and supportive.

While life is not a fairy tale and relationships will always involve a degree of effort and compromise, it's important to affirm that everyone needs some loving relationships in their lives. Emphasise that we deserve to be treated with respect and dignity in all relationships. Explain that in this part of the lesson, the students will be drawing upon what they have learned, as well as their own personal values and beliefs, to create a visual of the kind of relationships they hope to have in the future. They can choose to focus on any type of relationship including intimate/ romantic relationships. Alternatively, they can broaden it out to include the qualities they want in **all** of their relationships.

Ask students to work individually to capture in some way all the things that they believe matter most to them in future relationships. Encourage the students to be creative in how they represent their hopes. Some students might like to use the heart or star template to capture their aspirations in word and image. Others might choose to represent their hopes with reference to an example from a movie, song or story. Students might also point to a role model or a couple they know,



and identify what it is they admire about how they are in a relationship. Allow sufficient time for students to engage meaningfully with this task. Inform them that they will have the opportunity to display their responses in the last part of the exercise.

Note: You may wish to allow students to complete this as a home activity, bringing it to their next class for display.

Step 3: Relationships gallery

Invite the students who wish to, to create a 'Relationships Gallery' of their hopes by displaying their items around the room. Allow time for the students to walk around and quietly review the gallery of words and images.

Give students time to make a note of the important features of relationships that they have noticed.

Suggested discussion points

1. What did you notice from looking at the gallery? What were the common words or themes across all the items?
2. From reflecting on the range of qualities that were listed, is there anything that you hadn't thought about that you'd like to add to your own list?
3. What do you think are the benefits of good relationships in people's lives?
4. Good relationships don't just happen, they require both people to be aware of their own qualities and challenges, and to develop relationship skills such as empathy, communication, negotiation, reasonable compromise, etc. Name one of the qualities that you can further develop in yourself to make it more likely that you will have healthy, loving relationships in the future.



Conclude this activity by facilitating the **Guided Meditation: The importance and value of human connection**.

Assessment or homework activity



Write a letter to your future self, giving advice on what's important to remember for future relationships

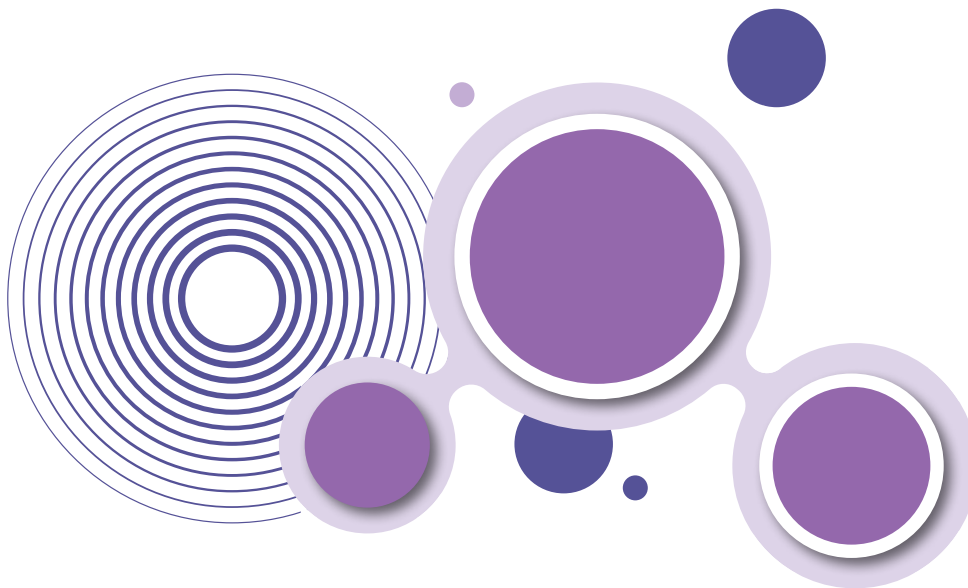
or

Write to a friend who has not been in SPHE class, telling them what you've learned about relationships and what you think might be helpful for them to know or be aware of too.

Teacher's note on the health benefits of relationships

Countless studies have verified the link between close relationships and overall health throughout life.

- A major US longitudinal study found that close relationships, more than money or fame, are what keep people happy throughout their lives. Those ties protect people from life's difficulties, help to delay mental and physical decline, and are better predictors of long and happy lives than social class, IQ, or even genes. According to Robert Waldinger, the study's lead:
 - » Good relationships are associated with less physical ill health, such as coronary artery disease or type 2 diabetes or arthritis.
 - » Good relationships don't just protect our bodies; they protect our brains. People with strong social support experience less mental deterioration as they age.
 - » Good relationships don't have to be smooth all the time as long as people feel that they can really count on the other person when the going gets tough.⁸
- Research studies have also indicated that those who are more satisfied with their romantic relationship report higher levels of positive affect and life satisfaction and lower levels of negative affect, and that marriage is associated with higher well-being and lower psychological distress.⁹

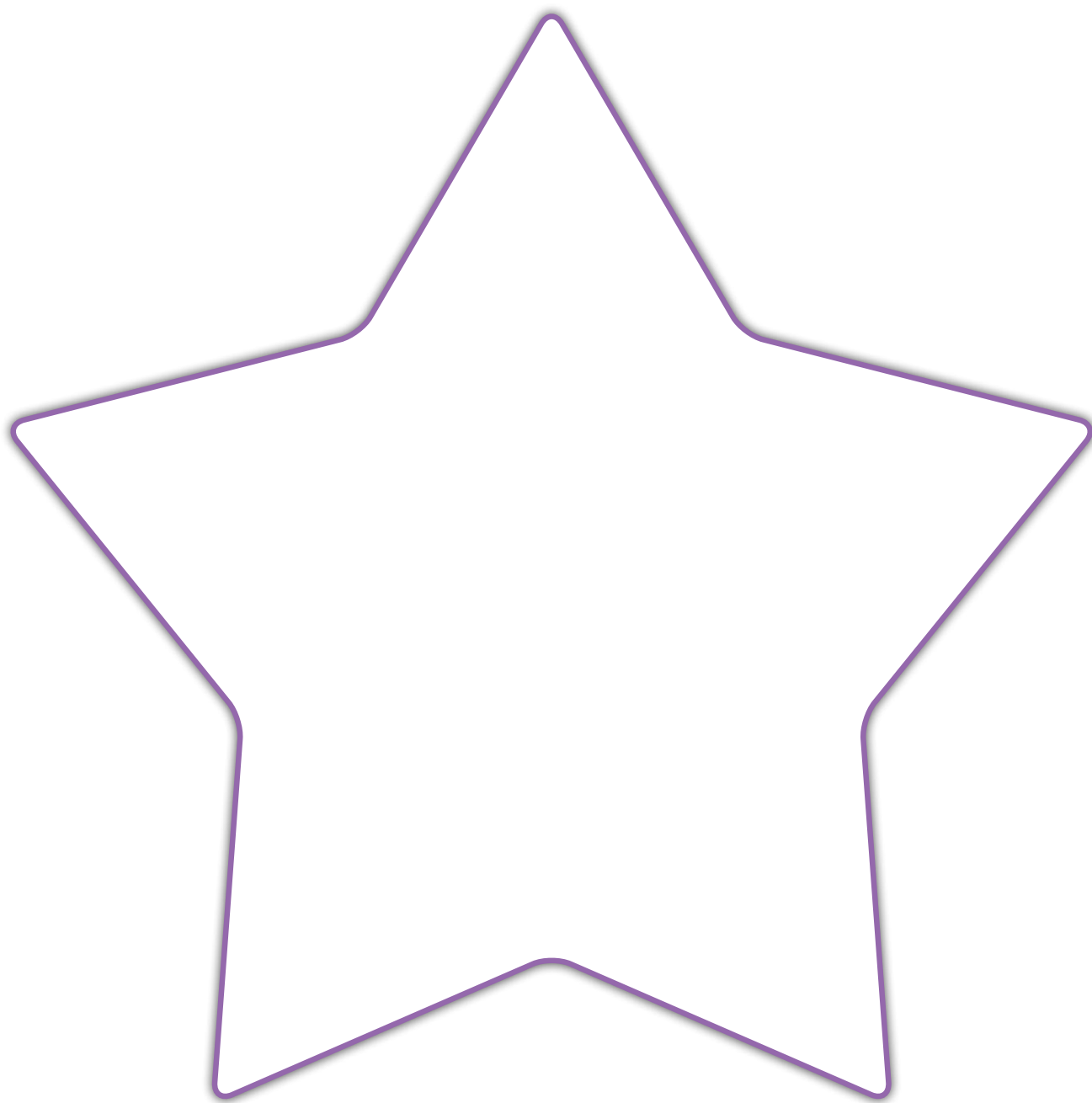


⁸ Harvard Study of Adult Development, <https://www.adultdevelopmentstudy.org/>

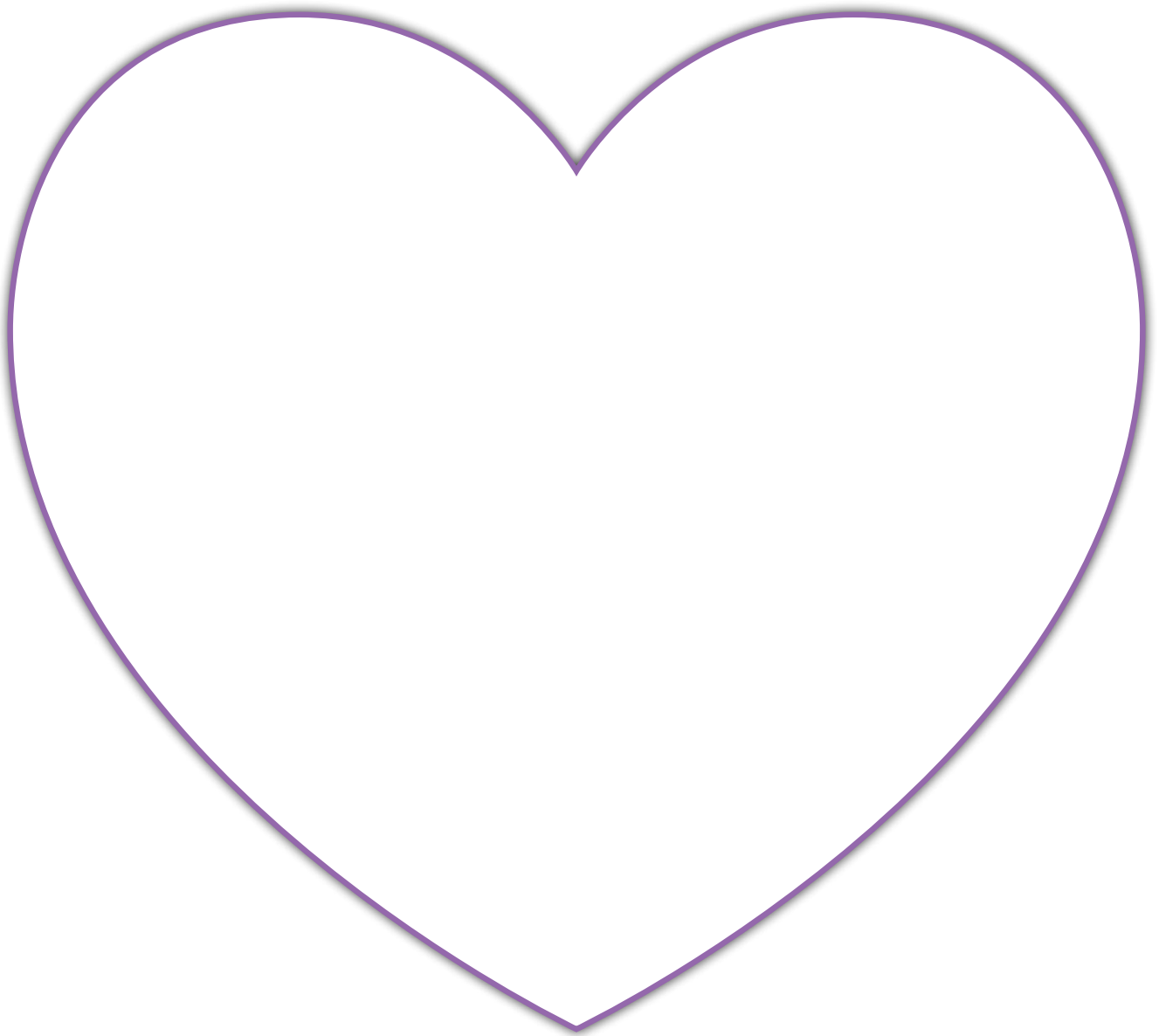
⁹ Benefits of Well-Being: Health, Social Relationships, Work, and Resilience <https://www.journalppw.com/index.php/jppw/article/view/15/12>

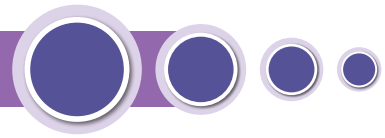


Worksheet: What matters most for me in a future 'ideal' relationship?



Worksheet: What matters most for me in a future 'ideal' relationship?





Guided meditation: The importance and value of human connection

Find a comfortable position, sitting straight in your seat with your feet flat on the ground. Close your eyes gently and take a deep breath in through your nose, feeling the air fill your lungs, and exhale slowly through your mouth, releasing any tension you may be holding onto.

In this moment focus on your breath. Feel the soothing power of your breath as it flows in and out, steady and calm. With each inhale, imagine breathing in positive energy. With each exhale, let go of any negativity or stress.

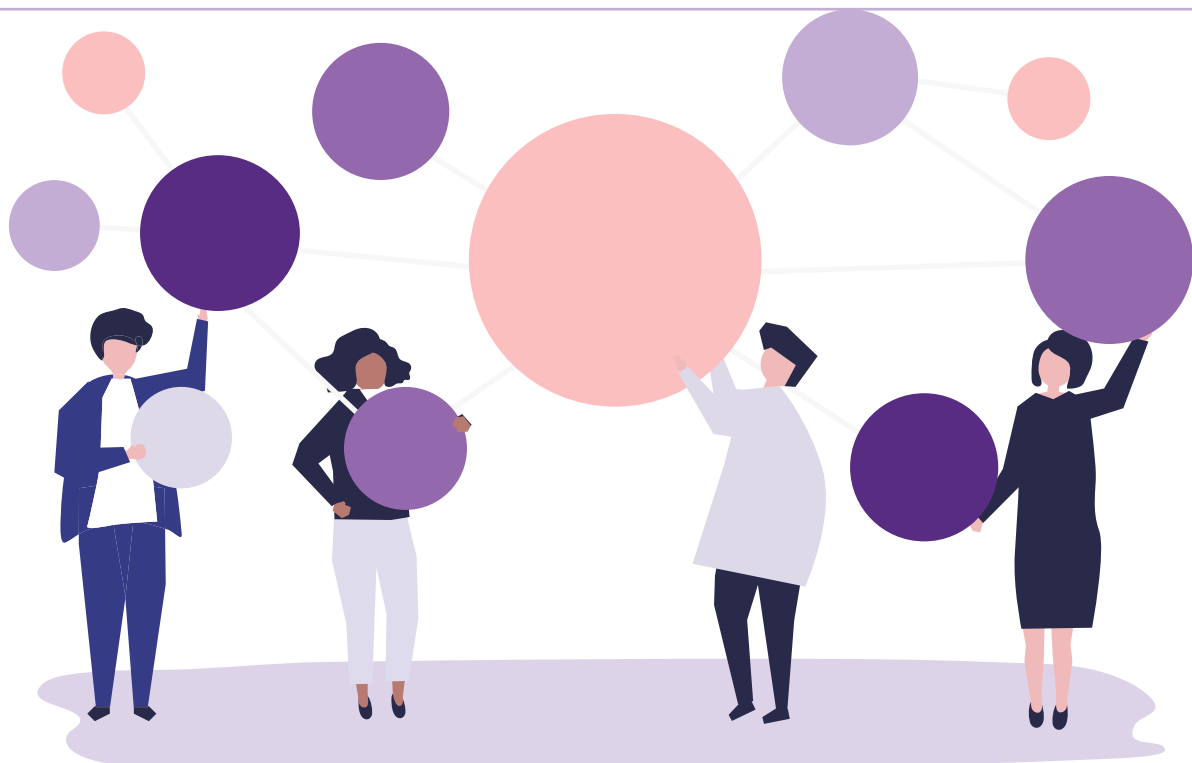
As you continue to breathe deeply, bring your awareness to the feeling of your body being supported by the chair beneath you, grounding you in this present moment.

I want you to imagine a warm, glowing light surrounding you. This light represents the energy of human connection – the bonds we share with others, the love and understanding that flows between us.

Visualise this light expanding outwards, reaching beyond the boundaries of your body, connecting with the people around you – your friends, family and classmates. We are all connected by this invisible web of energy, supporting us and our lives.

Take a moment to reflect on the importance of these connections in your life. Think about the people who support you and bring joy into your life. Feel gratitude for the relationships you have and the connections you share with others. With each breath this light of connection grows stronger.

Know that you are never alone, that you are a vital part of this interconnected web of humanity. Feel the warmth of human connection surrounding you.





An Roinn Oideachais
Department of Education



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