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TRAINING COURSE

# You & Me

KAUNAS, LITHUANIA  
14 - 22 MAY 2019



*When it's getting hot  
use a condom...*

PARTICIPATING COUNTRIES:

LITHUANIA POLAND ESTONIA FRANCE SLOVENIA TURKEY

# INSPIRATION

Youth can get a lot of unreliable/insufficient information from their parents and peers on sex-related topics. It's an issue to be addressed.

Good-quality sexuality education is needed as there is an increasing fear of STIs (sexually transmitted infections), teenage pregnancies (because of the lack of knowledge about contraception and responsibility), and sexual abuse. The sexual behaviour and attitudes towards sexuality are rapidly changing, as young people are experiencing more freedom in their sexuality (European Expert Group, 2015). In addition, there is a widespread of internet and media coverage which can distort a perception of sexuality (for example, youth watching pornographic content on the internet). A lot of times people do not understand their own sexuality; thus, it is hard to pass the knowledge to the younger generations.

Sexuality education is a lifelong learning. It includes physical and emotional well-being, sexual health, respect for yourself and others, as well as learning about sexual orientation, gender identity, and relationships. "Good quality sexuality education is grounded in internationally accepted human rights, in particular, the right to access appropriate health-related information" (WHO, 2013). For those reasons, sexuality education needs to be presented (in an acceptable way) to the youth to give them the right knowledge to live a healthy and happy life.

# OBJECTIVES

- 1) exchange knowledge and practices on sexuality education in the participating countries;
- 2) find implementable ways to incorporate it into the youth work;
- 3) raise social awareness about the importance of sexuality education;
- 4) break the taboos and myths surrounding the human sexuality.

# PROJECT'S PARTICIPANTS

24 active people from 6 different countries came to the training course which was held in Kaunas, Lithuania. During the mobility, participants have improved their empathy, creativity, communication, teamwork and problem-solving skills and knowledge about sexuality education. Moreover, they have got more information about the dangers of irrational sexual intercourse, which includes sexually transmitted infections, unwanted pregnancies, abortion, etc.

# ACTIVITIES

- Country workshops – sharing information and facts about sexuality education in the participating countries. Interactive presentation/discussions were encouraged;
- World café non-formal discussions + presentations of the different topics within sexuality to learn various arguments for/against;
- Workshop about sexuality education where the participants have learned about the importance of it for youngsters' well-being;
- Pop quiz with topic-related questions;
- Interactive games related to the topic (presenting the ways how you can introduce sexuality in a fun way);
- Workshop (sex and language): participants got to know different words about sexuality to later incorporate into their youth work;
- Workshop to brainstorm ideas on how to present sexuality to youth;
- Making a survey to find out the public opinion about certain issues of the topic and distributing free condoms, raising awareness on protected sex.



# WHY SEX EDUCATION IS IMPORTANT

Sex is a natural part of life, and it happens with or without sex education.

The project aims to enhance youth's ability to make conscious decisions about their sexuality and relationships, as well as their well-being and health. This will be done by equipping youth workers with tangible tools & information, which will help to positively impact younger people in their youth center, organizations, etc.

**To reach the main aim the following objectives have been set:**

- 1) exchange knowledge and practices on sexuality education in the participating countries;
- 2) find implementable ways to incorporate it into the youth work;
- 3) raise social awareness about the importance of sexuality education;
- 4) break the taboos and myths surrounding human sexuality.

The objectives of sex education are to help children understand the body structures of men and women and acquire the knowledge about birth.

Teach children to establish and accept the role and responsibility of their own gender by acquiring the knowledge of sex. Understanding the differences and similarities between two genders in terms of body and mind will set up a foundation for the future development in their acquaintance with friends and lovers and their interpersonal relationship.

Sex education is a kind of holistic education. It teaches an individual about self-acceptance and the attitude and skills of interpersonal relationship. It also helps an individual to cultivate a sense of responsibility towards others as well as oneself.

Nowadays, with rapid growth of information, sex information is everywhere. Children are curious about sex. Therefore, parents need to instill correct concepts of sex to their children as early as possible before they are misled by indecent magazines and irresponsible media.

# CONTRACEPTION - MYTHS AND FACTS

**Myth:** If your partner withdraws before he ejaculates you won't get pregnant

**Fact:** This so-called 'withdrawal method' is not an effective method of contraception. This is because it's still possible for sperm to be present at the tip of the penis before ejaculation, which can result in a pregnancy.

**Myth:** You can't get pregnant if it's the first time you have sex

**Fact:** If the egg meets sperm then it's possible to get pregnant, whether or not it's the first time you've had sex.

**Myth:** Emergency contraception is only effective the morning after unprotected sex

**Fact:** The emergency contraception pill (ECP) is sometimes called the 'morning-after-pill'. Although the ECP should be taken as soon as possible, it does not have to be taken in the morning. There are two types of ECP that work for up to four or five days after sex and they are both more effective when taken as soon as possible. The ECP is not an abortion pill. If you are already pregnant, ECP will not work.

ECPs are available from the chemist with no prescription.

A copper intrauterine device is the most effective form of emergency contraceptive if inserted up to five days after unprotected sex, and can provide effective contraception for five years or more.

**Myth:** Long-term use of contraception can make it harder to get pregnant later

**Fact:** Once women stop using contraception their periods and fertility will usually soon return to what is normal for them.

**Exceptions include:**

the contraceptive injection (Depo-Provera® or Depo-Ralovera® shot) - it can take up to 12-18 months for the hormones to leave your body and for your fertility to be fully restored

**Sterilisation** - which is intended to be permanent.

**Myth:** You can't get pregnant if you're breastfeeding

**Fact:** Many unplanned pregnancies happen in the first few months after childbirth.

Breastfeeding exclusively (without supplementing with formula or food) can stop you from ovulating, but even though there's a dip in your fertility at this time, breastfeeding is not a reliable method of contraception - it's much safer to arrange other forms of contraception after giving birth.

**Myth:** Intrauterine devices (IUDs) cause infection in the reproductive organs (known as pelvic inflammatory disease or PID)

**Fact:** There is a very small risk of PID in the first three weeks after an IUD is inserted. After that, IUD users have the same risk of developing PID as anyone else. Sexually transmissible infections (STIs) are the main cause of PID. Those at risk of STIs will be screened for them before an IUD is inserted.

**Myth:** IUDs cause ectopic pregnancy

**Fact:** An IUD reduces the overall chance of pregnancy therefore lowers the overall risk of ectopic pregnancy. In the unusual case of a woman becoming pregnant while using LARC, it is recommended to check for an ectopic pregnancy.

**Myth:** IUDs cause infertility

**Fact:** In a rare circumstance a complication from a perforation, infection or ectopic pregnancy could affect fertility. However, contemporary IUDs have not been shown to increase infertility. The effects of the IUD wear off very quickly after it is removed.

**Myth:** Long-acting reversible contraception (LARC) causes menstrual problems

**Fact:** Different types of LARC can cause different menstrual changes. Some women have lighter and reduced cycles when using LARC and welcome this change. Some women who continue to have a period may prefer this, even though it may be heavier in some women.

Your preference for one or the other may dictate which type of LARC you choose.

Accurate information about the available options will help you to make a choice that best suits your circumstances and your current needs.

**Myth:** Teenagers prefer condoms and the pill

**Fact:** Studies show that when teens receive accurate information about LARC options they are more likely to use and be satisfied with it. Many teenagers do not know about LARC, or have only heard the myths about it.

**Myth:** Parental consent is required

**Fact:** Most young people who require contraception are able to obtain it without parental consent. Your GP will explain about the method you choose and check that you have a suitable understanding of it, and that it is appropriate for you.

**Myth:** Teenagers and women who have not had a child shouldn't use an IUD

**Fact:** IUDs and contraceptive implants have the highest effectiveness, continuation rates and user satisfaction of all forms of LARC, including for teenagers and women who have not had a child. The IUD is now recommended as a good first choice for women who have not been pregnant or given birth to a baby, and can usually be inserted without difficulty.

**Myth:** An IUD should not be inserted immediately after giving birth

**Fact:** Although there is a slightly higher risk of the IUD coming out if it is inserted just after giving birth, the overall risk is low.

# SEX AND LANGUAGE

## Activities exploring language have many benefits, including:

- gauging the level of the group's knowledge and understanding
- introducing medical words
- coming to an agreement on what words you will use during your work
- clarifying what words mean to you and to the young people
- skill development – encouraging young people to ask for explanations for words they don't understand.

## Aims/purpose

- Explore the participants' level of knowledge about sex and language.
- Explore the participants' level of knowledge about parts of the body.
- Place all the words out in the open so that the participants can see you are not shocked and are there to deal with issues not 'bad language'.
- Gauge the level of explicitness of the group.
- Have a laugh!

## Explanation

- Don't use this exercise as an ice-breaker. Young people will need to feel comfortable before they engage fully with a group.
- Ask participants to get into three groups and give each group a piece of flip chart paper with the headings 'Male sexual parts', 'Female sexual parts' and 'Sexual activities' on them.
- Ask participants, in their groups, to brainstorm all the words for sexual parts/activities they can think of. It is a good idea not to make any suggestions to the participants about words they can include – this ensures that the work is the participants' own.
- After a few minutes rotate the sheets until all three groups have some words under each heading.
- When they have finished bring the participants back to a large group and ask them to read out their lists.
- Clarify words that participants don't know and discuss meanings.

**The facilitator can ask:**

- How are cultural, social and sexual attitudes revealed in language?
- How did you feel about doing the activity? What do you notice about each list?
- What kinds of words are there?
- How could you group or classify them?
- What does the use of language show us about our attitudes to sex?
- What differences are there between words for males and females? Would males and females use different words? If so, why?
- Are any of the words insulting? Which ones?
- Are any of the words more aggressive than others?
- Has anyone put down words such as skin, brain or lips for sexual parts and/or kissing and cuddling for sexual activities?
- Word meanings: What do we mean by ...?
- For a full explanation of this grid see How to use Jiwsu exercises at the start of this publication.



# HEALTHY RELATIONSHIPS

**TITLE:** Healthy vs. Unhealthy relationships

**DURATION:** 45 minutes

**MATERIALS:** flip chart, markers, paper

**PROCEDURES:**

1. In groups of 2-3, have participants write and discuss examples of what is a healthy and unhealthy relationship.
2. Ask participants to make a list of both the physical actions and emotional feelings involved for each category.

**Examples of healthy and unhealthy relationships:**

*Healthy Relationships:*

- respect
- you know and like each other and don't try to change one another's beliefs or appearances
- trust
- supportive, caring, honest
- feel good about yourself
- listen to each other

*Unhealthy Relationships:*

- criticisms (name calling)
- jealousy
- controlling
- abusive
- uncertain where the relationship stands
- ignores you

- pressures you to do things you don't want to do.
- yelling, fighting
- Lack of trust & communication

3. Have each group describe their ideas and give examples.

4. Process the activity with the following questions:

a) What are some examples of a happy and healthy relationship (on TV or in the media)? Is this the same for friends?

b) What are some examples of an unhealthy relationship? Could this apply to friendships? What should a person do if they are involved in an unhealthy relationship? What could happen if they stay together for a long period of time?

c) How could people try to solve their problems that are in an unhealthy relationship? (Name some solutions.)

5. Have each student take out a piece of paper and complete the following statements:

*A loving and healthy relationship is ...*

*My ideal relationship is ...*



# CELEBRATING DIVERSITY

**TITLE:** Cross the Room

**DURATION:** 30 minutes

**MATERIALS:** none

**PROCEDURES:**

1. Ask the entire class to move the desk and chairs along the sides of the wall.
2. Make a line across the room using masking tape.
3. State that they must cross the room IF they agree with the following statements:
4. Teacher's tips and responses are provided below (R: Response)
5. Thank participants for their honesty and participation.

***Cross the room if...***

1. You have ever met someone who is homosexual.
2. You think you can tell when someone is gay.

**R:** Some people believe that all gay men are effeminate and all lesbians women are tomboys. While there are some people who fit these stereotypes, they are not representative of all homosexual people.

3. You think homosexuality is an illness.

**R:** Homosexuality was once classified as a mental illness however this was removed as a diagnosis many years ago. Numerous studies have shown that homosexuality is not linked with any psychological disturbance. This is a harmful and hurtful stereotype.

4. You think that gay people have many sexual partners and don't develop long term relationships.

**R:** Studies show that most gay and lesbian people want long term partners and that a large majority are involved in stable long-term relationships.

5. You think that a gay or lesbian couple would be bad parents.

**R:** Some people believe that children of gay or lesbian people are more likely to grow up homosexual, in fact homosexuality has been shown to be something that you are born with as a preference. In fact being the victims of hate and discrimination make homosexual parents more committed to teaching their children the values of kindness, compassion and charity.

6. You think most homosexuals are infected with HIV/AIDS.

**R:** In the early 80's when the outbreak was first reported it was initially identified in a group of young gay men. While HIV/AIDS is now a pandemic that affects all genders, ages, ethnicities, of people around the world, there still exists a false belief that gay men are the most at risk. In fact statistics show that the fastest growing group being infected today are youth (people under 25) and straight women.

7. You think all parents would be ashamed if their child told them they were homosexual.

**R:** While some parents might have strong religious views opposing homosexuality, the overwhelming majority of parents still love and accept their child for who they are. In general, parents always want their children to be healthy and happy.



# SPEED DATING

1. What are some of your favorite songs?
2. What would be your ideal way to spend the weekend?
3. What's on your bucket list this year?
4. What's your favorite genre of book or movie?
5. What is something you think everyone should do at least once in their lives?
6. If you could visit any place in this world, where would you go and why?
7. What's something you like to do the old-fashioned way?
8. How different was your life one year ago?
9. What is the most annoying question that people ask you?
10. What city would you most like to live in?
11. Who inspires you to be better?
12. When/if you do go out to socialize, what things do you enjoy doing?

# TOPICS ABOUT SEX

## **Have sex with someone if you want to**

Our sex ed text books might cover the “sexual pressures” we face from strangers, but they never really discussed what to do when the person you're already having sex with wants to bang, and you absolutely do not. Even if you've had sex a thousand times with this person, you have every right to say no if you don't feel like doing it. You don't have to make up excuses. Or feel guilty. Your body is yours and you can have sex whenever you feel like it (if your partner is cool with it too, of course.)

## **When you're ready to have sex**

First of all, don't ever let anyone slut shame you. However, if you feel ready, then you feel ready. Think about it for awhile. Like, really think about it. When the time comes, use protection. Know that maybe someday you might regret your decision, or you might not.

## **All vaginas, boobs, and butts are unique.**

The perfect vagina, perfect breasts, and perfect butt are non-existent.

## **Google your own anatomy**

Get up close and personal with yourself. Do it. Your vagina is awesome and yours and you should be familiar with it.

## **Usage of lubrication**

Lube makes everything better and less painful, because yes: sex can sometimes hurt, and usually that pain can be handled with proper lubrication.

## **Orgasms**

Sex is not like the movies. It takes time to be “good” at sex and fully enjoy it. The best thing you can do for yourself if get comfortable with your body and with your partner.

## **If a guy refuses to use a condom**

If a dude doesn't want to use a condom because “it doesn't feel as good,” then tell him he can go and get vasectomy. Okay, maybe don't do that because that's a little harsh. But seriously, don't let a guy be selfish enough to refuse putting on protection. He's doing this for himself AND you — a condom isn't there to enhance his sexual experience, it's there to make sure you two don't pass any heinous cooties between you, and to ensure that he doesn't squirt baby sauce up into your vagina-hole. These are very important things. These are, in fact, non-negotiable things. Do not negotiate condom use with anyone ever.

## **Sexuality is totally fluid**

Homosexuality and bisexuality almost never get covered in sex ed, and that's a serious shame. Hopefully our society will progress enough to include these topics (also including gender identification), because it would save A LOT of unnecessary frustration, confusion, and guilt. If you're a girl and you're attracted to both girls and guys, that is TOTALLY FINE. If you're a boy and only like boys, that's perfectly okay too. Don't let anyone make you feel that your sexuality is abnormal. And furthermore, don't let anyone pressure you into deciding “what you are,” because our preferences can change and labels are just a social construct.

# WHY COMPREHENSIVE SEXUALITY EDUCATION IS IMPORTANT

Did you know that only 34 % of young people around the world can demonstrate accurate knowledge of HIV prevention and transmission? And that two out of three girls in some countries have no idea of what is happening to them when they begin menstruating? These are some of the reasons why there is an urgent need for quality comprehensive sexuality education (CSE).

Earlier this month, UNESCO published a fully updated *International Technical Guidance on Sexuality Education*, which advocates for quality CSE to promote health and well-being, respect for human rights and gender equality, and empowers children and young people to lead healthy, safe and productive lives.

## What is Comprehensive Sexuality Education?

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

## Why do young people need comprehensive sexuality education?

Too many young people receive confusing and conflicting information about relationships and sex, as they make the transition from childhood to adulthood. This has led to an increasing demand from young people for reliable information, which prepares them for a safe, productive and fulfilling life. When delivered well, CSE responds to this demand, empowering young people to make informed decisions about relationships and sexuality and navigate a world where gender-based violence, gender inequality, early and unintended pregnancies, HIV and other sexually transmitted infections (STIs) still pose serious risks to their health and well-

being. Equally, a lack of high-quality, age- and developmentally-appropriate sexuality and relationship education may leave children and young people vulnerable to harmful sexual behaviours and sexual exploitation.

CSE plays a crucial role in addressing the health and well-being of children and young people. Applying a learner-centered approach, CSE not only provides children and young people with age-appropriate and phased education on human rights, gender equality, relationships, reproduction, sexual behaviours risks and prevention of ill health, but also provides an opportunity to present sexuality with a positive approach, emphasizing values such as respect, inclusion, non-discrimination, equality, empathy, responsibility and reciprocity.

### **What does the evidence say about CSE?**

There is significant evidence on the impact of sexuality education. It emphasizes that:

- Sexuality education has positive effects, including increasing young people's knowledge and improving their attitudes related to sexual and reproductive health and behaviors.
- Sexuality education – in or out of schools – does not increase sexual activity, sexual risk-taking behaviour or STI/HIV infection rates.
- Programmes that promote abstinence as the only option have been found to be ineffective in delaying sexual initiation, reducing the frequency of sex or reducing the number of sexual partners. Programmes that combine a focus on delaying sexual activity with other content are effective.
- 'Gender-focused' programmes are substantially more effective than 'gender-blind' programmes at achieving health outcomes such as reducing rates of unintended pregnancy or STIs..
- Sexuality education has the most impact when school-based programmes are complemented with the involvement of parents and teachers, training institutes and youth-friendly services.

### **Why have technical Guidance on sexuality education?**

Countries are increasingly acknowledging the importance of equipping young people with knowledge and skills to make responsible choices for their lives. CSE supports young people's empowerment by improving their analytical, communication and other life skills for health and well-being in relation to sexuality, human rights, values, healthy and respectful relationships,

cultural and social norms, gender equality, non-discrimination, sexual behaviour, violence and gender-based violence, consent, sexual abuse and harmful practices.

### **What is new in the revised Guidance?**

The original international technical Guidance published in 2009 positioned sexuality education primarily as part of the HIV response. However, while HIV prevention remains important, evidence and practice demonstrate that sexuality education has a much broader relevance to other issues, not only for young people's sexual and reproductive health but also for their overall wellbeing and personal development.

The revised Guidance presents sexuality with a positive approach, recognizing that CSE goes beyond educating about reproduction, risks and disease. It reaffirms the position of sexuality education within a framework of human rights and gender equality. It and reflects the contribution of sexuality education to the realization of several internationally agreed commitments in relation to sexual and reproductive health, as well as the achievement of the goals in the 2030 Agenda in relation to health and well-being, quality and inclusive education, gender equality and women and girls empowerment.

- Download the International Technical Guidance on Sexuality Education.
- Learn more about UNESCO's work in education for health and well-being.



# WHO ARE I

## Overview

- This activity involves buzz groups, brainstorming, drawing and group discussion to explore issues of identity.

## Related rights

- Equality in dignity and rights
- Freedom from discrimination
- The right to life, liberty and personal security

## Objectives

- To increase understanding of the concept of identity and widen self awareness
- To develop communication skills
- To promote solidarity and respect

## Materials

- Coloured pens and markers, if possible a different colour for each participant
- Enough paper for one sheet per person
- Flipchart paper and markers

## Introduction

1. To warm up, ask people to get into pairs to form buzz groups. Ask them to pretend that they are strangers and to introduce themselves to each other.
2. Now ask people to reflect what is interesting or important to know about someone else when you first meet, and brainstorm the general categories of information. For example, name, age, sex, nationality, family role, religion, age, gender, ethnicity, job/study, taste in music, hobbies, sports, general likes and dislikes and more.
3. Now explain that participants are going to find out how much each of them has in common with others in the group. Hand out the paper and pens and explain that the first step is for each of them to draw a representation of their identity. They should think of themselves like stars; aspects of their identity radiate out into their society.

Ask people to consider the eight to ten most important aspects of their identity and to draw their personal star.

4. Tell people to go around and compare their stars. When they find someone else with whom they share a beam or ray, they should write that person's name near the beam. (For example, if Jan and Parvez both have a "rapper" beam, they should write each other's names along that beam). Allow 15 minutes for this.
5. Now come back into plenary and ask people to talk about how individual each of them was. You could ask:
  - Which aspects of identity do people have in common and which are unique?
  - How similar and how different are people in the group? Do people have more in common with each other than they have differences?
6. Finally, do a group brainstorm of the aspects of identity that people choose and those that they are born with. Write these up in two columns on the flip chart.

### **Debriefing and evaluation**

Now move on to discuss what people have discovered about themselves and about each other and the implications for human rights.

- What did people learn about themselves? Was it hard to decide which were the ten most significant aspects of their identity?
- Were people surprised at the results of comparing stars? Did they have more or less in common than they expected?
- How did people feel about the diversity in the group? Did they feel it made the group more interesting to be in or does it make it more difficult to be or work together?
- Were there any aspects of other people's identity that participants felt strongly inclined to react to and say, "I am not."? For example, I am not a football fan, not a fan of techno music, not a dog lover, not homosexual or not Christian.
- How does identity develop? Which aspects are social constructs and which are inherent and fixed?
- In relation to gender issues in particular, which aspects are social constructs and which are inherent and fixed?
- Did participants write "woman" or "man"? What do people associate with the words "woman" and "man"? Are the associations the same for both sexes and for all men and all women?

- How much are people judged by their individual identity and how much by the group that they belong to?
- To what extent are people free to choose their own identity? What are the implications for themselves and their society, and especially for the human rights of equality and respect?

### **Tips to facilitators**

The name of this activity is not wrong! It is intended to puzzle participants. If you want some background music while playing this game, you could use Frank Zappa's song, *"You are what you is, I is what you am..."*.

In the warm up you may want to give participants a tip to get them thinking on the right lines. You could give yourself as an example or use an imaginary person as in the example.

The purpose of giving each participant a different colour is to give people the idea that everyone is unique and that the group is composed of a rainbow of identities. If you have a large group and two or more people have to share the same colour pen, ask them to use different styles of writing.

If you wish, you can make the activity a little more sophisticated by suggesting that people draw their personal stars with longer or shorter beams or rays according to how public or private they feel a particular aspect of their identity is. Longer beams reach further out into society and are therefore more public.

### **Some of the following points could come up in the final brainstorm (at step 6):**

- Aspects of identity I can choose: name, friend, job, membership of a political party, favourite music, style of clothes, the football team you support, where you live,
- Aspects of identity I am born with: sex, age, height, eye colour,
- There will be some aspects of identity that may cause controversy, for example nationality, gender and sexuality, religion, being member of a minority.

The discussion about how identity develops and which aspects of identity are social constructs and which are inherent and fixed will also be controversial, especially those relating to religion and gender. It is worth asking participants to consider their own process of growing up and

how certain aspects of their identity have changed over the years, perhaps even those aspects of their identity that they think are fixed.

You may wish to draw some conclusions from the discussions, for example, that we are all human beings who have rights which cannot be gifted or taken away regardless of race, colour, property, birth or other status.



# LET'S TALK ABOUT SEX

## Overview

This activity uses the "fish-bowl" technique to explore attitudes to sexuality, including homophobia.

## Related rights

The right to equality

- Freedom from discrimination
- Freedoms of expression and association

## Objectives

- To expand understanding about issues and rights related to sexuality and sexual identity
- To develop self-confidence to express one's own opinion about diversity in sexual preferences
- To promote tolerance and empathy towards others who are different

## Materials

- 3 chairs
- 2 facilitators (preferable)
- Space for participants to move about
- Board or flipchart and markers
- Small slips of paper and pens
- A hat

## Preparation

- Be aware that for many people – especially young people! – sexuality is a very personal and sensitive issue. Be prepared to adapt either the methodology or the topic – or both!
- Identify a few well known people who have been out-spoken about their sexuality including heterosexual and homosexual, bisexual and transsexual men and women.

## Instructions

1. Set the scene. Explain that, although most people view sexuality as a private matter, the right not to be discriminated against because of sexual orientation is a fundamental human right and protected by legislation in most European countries. This activity is an opportunity to explore attitudes to sexuality and in particular to homosexuality and heterosexism. Then warm up with a brainstorm of famous people who have been out-spoken about their sexuality.
2. Hand out the slips of paper and pens and ask people to write down any questions they have about homosexuality or sexuality in general, and to put their papers in the hat. The questions should be anonymous.
3. Explain that this activity is about exploring attitudes to sexuality and in particular to homosexuality. Everyone is free to express opinions that may be conventional or unconventional, controversial or which challenge the norms of their society. People may present points of view with which they agree, or with which they disagree with without fear of ridicule or contempt.
4. Place the three chairs in a half-circle in front of the group. These are for the three conversationalists who are in the "fish-bowl". The rest of the group are observers.
5. Explain that you will begin by inviting two volunteers to join you in a conversation in the "fish bowl". If at any point someone else would like to join you then they may do so, but as there is only room for three fish in the bowl at any one time, someone will have to swap out. Someone who wishes to join the conversation should come forward and gently tap one of the "conversationalists" on the shoulder. These two people exchange seats and the original "conversationalist becomes an observer.
6. Everyone is welcome to come forward to express their opinions, but they may also express opinions which are not necessarily their own. In this way points of view that are controversial, "politically incorrect", or unthinkable can be aired and the topic thoroughly discussed from many different perspectives. Emphasise that offensive or hurtful comments, which are directed at individuals in the group, are not allowed.
7. Ask a volunteer to pick up a question from the hat and start discussing it. Let the discussion run until people have exhausted the topic and points are being repeated.
8. Then ask for another three volunteers to start a discussion about another question under the same rules as before.
9. Discuss as many questions as you have time for. Before you finally go on to the debriefing and evaluation, take a short break to allow time for people to come out of

the "fish-bowl". This is especially important if the discussion has been heated and controversial.

### **Debriefing & Evaluation**

- Start with a brief review of how people felt being both inside and outside the "fish-bowl" Then go on to talk about the different views that were expressed and finally discuss what people learnt from the activity:
- Was anyone shocked or surprised by some points of view expressed? Which ones? Why?
- In your community, how open-minded are people generally about sexuality?
- Are young men and young women expected to conform to specific sexual orientations and roles? Which?
- How are (young) people who do not fall within these expectations perceived and treated?
- Are some groups more open than others? Why?
- What forces shape how our sexuality develops?
- Where do people get their values about sexuality from?
- Do participants' attitudes about sexuality differ from those of their parents and grandparents? If so, in what ways do they differ? Why?
- Are there any laws in your country that prohibit sexual relations between consenting adults? If so, what do the laws prohibit? Why do they exist? Do you think that they are reasonable?
- Article 16 of the UDHR states: "Men and women of full age, without any limitation due to race, nationality or religion, have the right to marry and to found a family." Why is "sexual orientation" not included in the list together with "race, nationality or religion"? Should it be?
- In some countries, laws and social pressure appear to conflict with the human rights of the individual to respect and dignity, to fall in love with the person of his/her own choice, to marry freely etc. How can such conflicts be resolved?

## Tips

Be aware of the social context in which you are working and adapt the activity accordingly.

The aim of this activity is to allow participants to reflect on their own sexuality and the norms of their society and to encourage them to have the self-confidence to express their own point of view while being tolerant of people who hold different views. The aim is not to convince people of one point of view or another, nor to come to a consensus decision.

Before running the activity it is recommended that you prepare yourselves by reading the [background information on Gender](#). Think over what topics may come up. Some frequently asked questions and issues include:

- What is homosexuality?
- What are the differences between heterosexual, gay, lesbian, bisexual and transsexual people?
- Is homosexuality an illness?
- How do people become gay or lesbian?
- What about the risk of AIDS?
- In some countries homosexuality is accepted and gay people can get married in others it is punishable by death.

It is also important for you as facilitators to reflect on your own values and beliefs about what is right for yourselves, your families and for others and to remember that these values will be reflected in everything you do and say, and what you don't do or say. It is crucial that you acknowledge your own values and prejudice and understand the origins of those values in order that the participants may also develop insights into the origins of their own values.

The aim of the brainstorm of famous people who have been outspoken about their sexuality is to encourage the participants themselves to be open about discussing sexuality. It is also an opportunity to clarify terms such as gay and lesbian, homosexual, heterosexual, bisexual and transsexual. See the background information in Chapter 5.

Your role in the activity is crucial in setting the general tone. One way to start off could be by using two facilitators as conversationalists. One of you could start by saying, "Have you heard, Peter has come out about being gay?" The other might reply, "No, I would never have thought it, I mean he doesn't look gay". In this way you imply that the conversation is about a mutual friend and therefore at a "local" level and not a theoretical debate. It also helps open up a discussion about what people know about homosexuality and their attitudes to it.

Hopefully one of the observers will quickly replace you, thus enabling you to leave the discussion to the participants. However, you should continue to participate as an observer so that you maintain the possibility of taking another turn as a conversationalist. This leaves open the possibility for you to discretely manipulate the discussion either to open up different avenues of debate or to tactfully remove a participant who is not keeping to the rules.

If you wish to, you can introduce a rule that any particular point of view can only be raised once. This prevents the discussion focusing on only a few aspects of the topic and helps to discourage repetition of popular prejudices.

If you need to give the group some ideas for questions to discuss you could suggest the following:

- Should the age of consent (to marriage or to having sex) be different for homosexuals?
- Should gay and lesbian couples be allowed to marry and to adopt children? Why / Why not?
- Is it true that men who have sex with men are more likely to get AIDS than women who have sex with men?

If the group is large there will not be time to discuss all the questions. Be aware that some people may feel disappointed or frustrated because their question was not raised. To attempt to overcome this you can, at the end of the session, tape all the questions on the wall. This will motivate participants to continue the discussion in their own time.

### **Sexual diversity and human rights**

At first sight these two issues may appear not to be related. It might be argued that the one is related to private and individual choice, the other to the public domain of legal and political structures, which operate in relation to citizenship. Yet, recent historical, anthropological and sociological studies show how sexual identity and modes of expression of sexual desire are seen, both over time and across cultures, to be potentially disruptive to the maintenance of social order. In some contexts, same or ambiguous sex desire challenges or ruptures traditional or religious beliefs, in others it may be regarded as a psychological illness.

There is arguably a social and religious hegemony that consistently operates to marginalize equal access to human rights. The institutionalised assumption is that heterosexuality is "natural" and therefore the "normal" mode of expression of sexual desire and therefore also morally acceptable while other forms of sexual expression are "unnatural" and morally unacceptable.

# YOUTHPASS RECOGNITION

Youthpass is a tool for non-formal & informal learning in youth projects. It is available for projects funded by Erasmus+: Youth in Action (2014-2020) programme. It is a part of the European Commission's strategy to foster the recognition of non-formal learning, putting policy into practice and practice into policy. With Youthpass, participants of Erasmus+ projects can describe what they have done and show what they have learnt. This is a must in each youth exchange made; thus, we recommend to include it to your project too.

Read more about experiences made with Youthpass – <https://www.youthpass.eu>

## PROJECT'S SUCCESS

Project "You&Me" proved to be a success. This mobility promoted a new attitude towards sexuality education. The participants learned how a lack of sexuality education can have negative effects, for example, sexual abuse, low self-esteem and premature sex. Furthermore, they tried to break the myths and misassumptions about sexuality education while being simultaneously introduced to the facts and information, which gave them guidance.

Parallel to that, skills such as cultural awareness were acquired as people from diverse backgrounds were learning and mingling together. All the participants have learned how to discuss with others, express their opinion and views to a large audience, present credible arguments, as well as get more self-esteem. Of course, as participants have learned about the reasons behind youth unemployment and the skills that are required to reduce it – they became more socially aware themselves. Finally, they have also learned how to effectively use YouthPass, set objectives, assess personal knowledge and make reflections.