

# RMA PSHE GROUND RULES



RUSHEY MEAD  
ACADEMY

- **Respect everyone** Don't laugh at others, mock others or be insensitive
- **Don't judge others** Remember you do not know about other people's situations
- **Listen to each other** Listen to each other and your teacher to get the most out of it
- **Keep the conversation** Do not gossip or share personal information with anyone
- **Get further support** Speak to someone at school if you need any help or support

*PSHE @ RMA– Helping you to develop the skills you need to be safe, healthy, make the right choices and make a positive difference to the world.*

# Key Words

Consent

permission for something to happen or agreement to do something

Sexually Transmitted  
Infection

an infection that is spread by sexual activity, especially vaginal intercourse, anal sex, oral sex,

Condoms

Condoms are made of very thin latex (rubber) and are designed to cover the penis in order to stop fluids being transferred between partners

Contraception

the act of preventing pregnancy. This can be a device, a medication, a procedure or a behavior.

# Types of Contraception

Today, we will:

- Learn about the different types of contraception
- Evaluate which type of contraception would be best for different scenarios
- Know where to get further support with contraception

# Do Now - Recall Activity

**In your PSHE books, answer the following questions:**

- 1. What are the three different types of STI?**
- 2. True or false: If you get tested at an STI clinic they will speak to your family.**
- 3. Contraception is used to prevent some consequences of sex. Name two consequences of sex.**

# Do Now - Recall Activity

In your PSHE books, answer the following questions:

1. What are the three different types of STI? **Bacterial, viral, parastic**
2. True or false: If you get tested at an STI clinic they will speak to your family. **False**
3. Contraception is used to prevent some consequences of sex. Name two consequences of sex. **Pregnancy , STIs, emotional distress**

# Contraception

Last term, you learnt about the consequences of sex, in particular unprotected sex. Most of these consequences can be **negative** such as **STIs, pregnancy and emotional distress**. However, it's important to remember that these consequences can also be **positive** such as **pregnancy, pleasure and connectivity**.

This week you are going to learn about **contraception**, the range available and the efficacy of these. This is important as contraception will help to protect you from the consequences learnt previously.

# Contraception

**Contraception**, also known as **birth control** is a **method or device used to prevent pregnancy (and in few cases STIs)**. Birth control has been used since ancient times, but effective and safe methods of birth control only became available in the 20th century.

A woman can get pregnant if a man's sperm reaches an egg. Contraception tries to stop this happening by:

- Keeping the egg and sperm apart
- Stopping egg production
- Stopping the fertilised egg from attaching to the lining of the womb.

There are 15 methods of contraception widely available in the UK and not each method will work for each individual. This week we are going to focus on some of the most common methods used.

# Contraception

You are going to be learning about different types of contraception today.

You will be filling out a worksheet as you learn about some of the different types of contraception.

Not all of the contraception types are on the worksheet – the ones listed are the most common types used in the UK.

The worksheet is titled "Contraception" and features a table with the following columns: "What is it called?", "Description & effectiveness", "Advantages", and "Disadvantages". The rows are labeled with different contraceptive methods: "Combined Pill", "External Condom", "Contraceptive Implant", "Contraceptive Injection", and "Contraceptive Patch".

Below the table is a "Help Page" section with two speech bubbles. The first bubble contains the text: "I am 15 years old and well organised. I have painful periods in which I experience heavy bleeding. Which contraceptive should I choose?". The second bubble contains the text: "I am 14 years old really forgetful. I hate taking tablets and just don't want the hassle of worrying about contraception." There are also two empty rounded rectangular boxes for additional notes or responses.

## Contraception Types

<b>What is it called?</b>	<b>Description &amp; effectiveness</b>	<b>Advantages</b>	<b>Disadvantages</b>
<b>Combined Pill</b>			
<b>Male Condom</b>			
<b>Contraceptive Implant</b>			
<b>Contraceptive Injection</b>			
<b>IUD (intrauterine device)</b>			
<b>IUS (intrauterine system)</b>			

# Male Condoms

Male condoms (also known as external condoms) are made of latex which is a very thin rubber and they fit the penis. They act as a barrier preventing sperm and other sexual fluids from entering the vagina, the mouth, the penis or the anus. This barrier method will protect against pregnancy and STIs.

Watch this video and fill in the information on your worksheet.

[Brook Contraception - Condom Animation](#)

## Efficacy

85% normal  
use

98% perfect  
use

# Male Condoms

## Main Advantages

- Only contraceptive method that protects against pregnancy and STIs
- You only need to use them when you have sex
- There are no serious side effects (some people are allergic to latex but there are alternatives)
- Readily available in a variety of brands, textures and sizes
- You can use condoms in addition to other methods of contraception

## Main Disadvantages

- Can interrupt sex
- Can sometimes split or come off
- Must be handled carefully following ejaculation
- Some people find talking about condoms or buying them awkward

# Female Condoms

Female, or internal condoms are like other condoms except they fit inside the vagina instead of covering the penis. They are made of polyurethane and line the vagina.

They stop pregnancy by acting as a barrier to the sperm and they also stop the transfer of sexual fluids between partners which will provide protection against STIs.



Efficacy  
95% perfect  
use

# Female Condoms

## Main Advantages

- Only contraceptive method that protects against pregnancy and STIs
- You only need to use them when you have sex, but they can be in for up to 8 hours before you have sex
- There are no serious side effects
- You can use condoms in addition to other methods of contraception

## Main Disadvantages

- They can slip or get pushed up into the vagina if not used properly
- You need to make sure the penis goes into the condom and not between the condom and the vagina
- They are not as easily available as male condoms and can be more expensive to buy

# The Pill

There are around 70 different types of oral contraceptive pill available containing various doses and mixes of hormones.

They work by preventing the female body from releasing an egg each month. They also thicken the mucus of the entrance to the womb, making it difficult for sperm to get through. They also thin the lining of the womb making it more difficult for a fertilised egg to be implanted into the womb.

Watch this video and add to your worksheet [Brook Learn - Combined Pill](#)



# The Pill - Advantages



## Main Advantages

- Easy to take and completely reversible
- Do not interrupt sex
- Most females do not experience serious side effects
- May provide some protection against ovarian cancer, cancer of the womb and benign cysts of the breast
- May reduce menstrual cramps, result in more regular, lighter and shorter periods
- Can improve acne on the skin

# The Pill - Disadvantages



## Main Disadvantages

- Not suitable for women who are pregnant or breastfeeding or with risk factors for blood clotting
- Can produce rare but serious and potentially fatal complication e.g. linked to blood clots
- Do not protect against STIs
- Can result in irregular periods or spotting
- Must be taken correctly on a daily basis (less effective if a pill is missed or in cases of severe vomiting or diarrhoea)
- May cause side effects such as mood changes, headaches and bloating

# The Implant

The contraceptive implant is a small, flexible plastic rod that is placed just under the skin in the upper arm. It releases the hormone progestogen. It is inserted into your arm by a trained healthcare professional and it can be in place for three years.

The implant stops ovulation and thickens the mucus around the cervix, which makes it harder for sperm to get through. It also makes the lining of the womb thinner so that a fertilised egg is less likely to implant.

Watch this video and complete the correct section of your worksheet [Brook Contraception - Contraceptive Implant Animation](#)



# The Implant

## Main Advantages

- Does not interfere with sex
- Are useful for those who cannot take oestrogen

## Main Disadvantages

- May cause irregular bleeding for the first few months
- Can cause side effects such as headaches, tender breasts, changes in mood and sex drive and bloating,
- Does not protect against STIs

# The Injection

The injection usually contains progestogen and it is administered by a doctor or a nurse once every 12 weeks.

The injection works to stop ovulation, thicken the mucus around the cervix (making it harder for sperm to get through) and thin the lining around the womb (so that a fertilised egg cannot implant).

Watch this video for more information and fill in your worksheet [Brook Contraception - Contraceptive Injection Animation](#)



# What's the Difference?



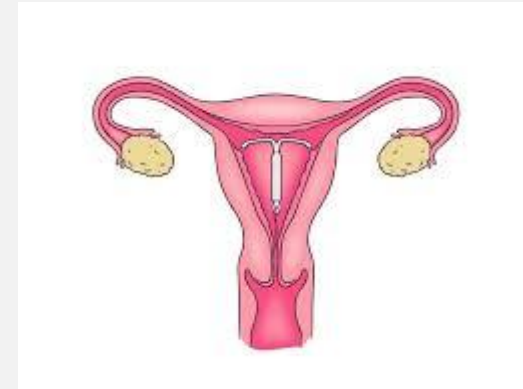
Task: What are the differences and similarities between the injection and the implant? Using your worksheets to help you, discuss this with the person next to you

<b>Similarities</b>	<b>Differences</b>
<ul style="list-style-type: none"><li>•Both stop ovulation, thicken the mucus around the cervix and thin the lining of the womb</li><li>•Neither interfere with sex</li><li>•Neither the implant or injection protect against STIs</li><li>•Both contain the hormone progesterone</li></ul>	<ul style="list-style-type: none"><li>•The implant can be in place for up to 3 years – you need to the injection every 12 weeks</li><li>•The implant is more effective</li><li>•The injection can affect periods and fertility for up to a year after injections stop</li></ul>

# IUD (Copper Coil)

**The intrauterine device (IUD)** also known as the coil or copper IUD is a small, soft, T-shaped plastic device which contains copper (which is toxic to sperm). It is put into the uterus (womb) through the vagina by a specially trained doctor or nurse.

They prevent sperm from surviving in the womb and from reaching an egg and they make it difficult for a fertilised egg to travel along the tubes and implant in the womb.



# IUS (Hormone Coil)

**The intrauterine system (IUS)** is a small, soft, T-shaped plastic device which contains the hormone progestogen. It is put into the uterus (womb) through the vagina by a specially trained doctor or nurse.

How do they work?

They release a continuous supply of progestogen to the womb

They thicken the mucus in the neck of the womb, making it difficult for the sperm to enter

They thin the inner lining of the womb

Watch these videos and fill in your worksheet [Brook Contraception - IUD and IUS Animation - YouTube](#)

[Brook IUD & IUS Real Life Experiences](#)



# Advice Time

Using the information you have recorded on your worksheet, complete the 'help page' task at the bottom of the page.

Be ready to explain your responses to the class.

The worksheet is titled "Contraception" and contains a table with three columns: "Description & effectiveness", "Advantages", and "Disadvantages". The rows are labeled with different contraceptive methods: "Combined Pill", "External Condom", "Contraceptive Implant", "Contraceptive Injection", and "Contraceptive Patch".

Below the table is a section titled "Help Page" with two speech bubbles and two empty boxes for responses. The first speech bubble contains the text: "I am 15 years old and well organised. I have painful periods in which I experience heavy bleeding. Which contraceptive should I choose?". The second speech bubble contains the text: "I am 14 years old really forgetful. I hate taking tablets and just don't want the hassle of worrying about contraception." A large blue arrow points from the text on the left towards the "Help Page" section.

	Description & effectiveness	Advantages	Disadvantages
Combined Pill			
External Condom			
Contraceptive Implant			
Contraceptive Injection			
Contraceptive Patch			

**Help Page**

I am 15 years old and well organised. I have painful periods in which I experience heavy bleeding. Which contraceptive should I choose?

I am 14 years old really forgetful. I hate taking tablets and just don't want the hassle of worrying about contraception.

# Other Methods of Contraception

**Patches, diaphragms, caps and vaginal rings** are also methods of contraception.

**Sexual abstinence** is the practice of **avoiding sexual activity**. A person might decide to avoid penetrative sex or any form of sexual activity. This is the most effective way to avoid pregnancy or the spread of STIs.

**Fertility awareness** is a method used to track a female's menstrual cycle. This will calculate when a woman is more or less fertile. This is 75% effective on normal use. Women can check their fertility by recording their body temperature, using mobile apps or counting the days since their last period.

**The withdrawal method** involves removing the penis from the vagina prior to ejaculation, with normal use this is only 63% effective. **Remember that pre-ejaculate can also contain millions of sperm.**

# Permanent Contraception

Some forms of contraception are more **permanent**. These are for people who do want children now or in the future.

**Male sterilisation** or a **vasectomy** involves cut and blocking the tubes which carry sperm. This means that ejaculation can take place but no sperm is present. This is 99.9% effective.

**Female sterilisation** involves the cutting or blocking of fallopian tubes so that the egg is not released into the uterus and cannot meet the sperm. This is 99.5% effective.

Watch this video for more information [Brook Contraception - Sterilisation Animation](#)

# What is Emergency Contraception?

Emergency contraception can prevent pregnancy after unprotected sex or if the contraception you have used has failed. This could be a condom splitting or missing a pill.

There are 2 types of emergency contraception:

**The emergency contraceptive pill**

**The intrauterine device (IUD or coil)**

Emergency contraception  
doesn't cause an abortion.  
The emergency contraceptive  
pill prevents a pregnancy  
from happening.

These methods can be up to 93% effective if treated within 24 hours and this decreases to 53% days later.

The emergency contraceptive pill is free to under 16s. Anyone over the age of 16 will pay between £25 and £35 for the pill.

Watch this video for more information [Brook - Emergency Contraception Animation](#)

# What is Emergency Contraception?

Contraception services are free and confidential, including for people under 16 years old. This means the doctor or nurse won't tell your parents or anyone else, as long as they believe you're mature enough to understand the information and decisions involved.

There are strict guidelines for healthcare professionals who work with people under 16. If they believe there's a risk to your safety and welfare, they may decide to tell your parents. The risk would need to be serious, and they'd usually discuss this with you first.

You can get free contraception and condoms from: most GP surgeries, community contraceptive clinics, some genitourinary medicine (GUM) clinics and sexual health clinics. Don't be put off if the first method you use isn't quite right for you: you can try another.

# C-Card Scheme

The **C-Card** is a card which offers **free and easy access to condoms** in a range of venues, including some **clinics, schools, colleges and pharmacies**. In Leicester, Leicestershire and Rutland, the C-Card is available to those aged 13+.

It doesn't matter whether you're having sex, thinking about having sex or if you're just curious, the C-Card service is confidential and trained workers can offer friendly **advice on sexual health and relationships**.

Registration is quick and easy and takes about 10 minutes. You will only be asked for a few simple details like your **name, postcode and date of birth**.

All the **information you provide is confidential** and will not be passed on to anyone else, (unless we were concerned about your safety, but we would always try and talk to you about this first)

Rushey Mead Academy has recently joined the C-Card Scheme. If you would like further information please speak to Miss Harriman.



theccard

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# Who is Responsible for Contraception?

“Jane and Omar are really keen on each other and have both told their best friends that they are thinking about having sex.

Jane tells you she thinks it’s always the boy’s responsibility to carry condoms as she is worried people might think she is easy if she carries them with her.

Omar tells you he thinks it is a girl’s responsibility to take the pill or other method of contraception as she is the one who can get pregnant.”

**Who do you think is responsible for contraception? What would you advise Jane and Omar?**



# Advice Time

**Using your knowledge from the lesson – read the scenarios and decide what advice you would give.**

Jasmin and David have just started going out and are planning to have sex. Neither has had sex before. Jasmin is very bad at remembering to take any medication.

Sonia used to be in a long-term relationship with a man who was unfaithful to her but is now going out with Daisy.

Nico is single and regularly goes out clubbing where he gets drunk and often has sex with people he just met that night.

Rosie and Keith are in their late 30's and faithful to each other. Rosie cannot take the pill, or have a coil fitted for medical reasons. Neither of them like using condoms and they definitely do not want any more children.

# Sexual Health Clinic in Leicester



Leicester Sexual Health is located Haymarket Health, 1st Floor, Haymarket Shopping Centre, Leicester, LE1 3YT in the Haymarket Shopping Centre.

## Leicester Sexual Health - Leicester Sexual Health

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# Where Else Can I Get Help?

If you need more guidance or advice on sexual health these websites can help:

<https://www.brook.org.uk/>



[Clinic finder - Leicester Sexual Health](#)



[Health For Teens | Everything you wanted to know about health](#)



You can also talk to your year team or tutor if you have any further questions



**Meet your Safeguarding Team**  
please share your concerns

 Victoria Barwell Principal	 Faisal Lohar Vice Principal	 Andrew Curran Safeguarding Officer		
 Shireen Takolia SENCO	 Marion Bullivant Family Support Worker	 Maria Jones Family Support Worker	 Alex Furniss Deputy DSL	 Rebecca Lowth Behaviour Mentor Year 7
 Pamela Raj Assistant Head of Year 7	 Charanjit Kaur Assistant Head of Year 8	 David Harilal Assistant Head of Year 9	 Meera Pithwa Assistant Head of Year 10	 Joseph Talby Assistant Head of Year 11

**STUDENTS**  
If you are worried about your safety and need support, please email us on [safe@rushey-tmet.uk](mailto:safe@rushey-tmet.uk)

**STAFF**  
Report via the desktop app or if you do not have access to this, email us on [safeguarding@rushey-tmet.uk](mailto:safeguarding@rushey-tmet.uk)

RMA Safeguarding Concern Form