

# PSHRE - Sex Ed – Years 10-13

<https://www.brook.org.uk> ; <https://www.healthforteens.co.uk>

- **Biological purpose of sexual intercourse = reproduction. Never forget this!**
- Why do people have sex? Many reasons, incl reproduction, but also pleasure, express love...
- **Love & Sex** – not necessarily the same; “love” → different meanings depending on context.
- **Faith & moral/ ethical perspectives on sex? – Important to think about this.**
- **Sexual anatomy – Puberty:** time of rapid physical growth and transition from child to adult, esp the development of “**secondary sexual characteristics**” & the **ability to reproduce**.
- Height increases, pubic hair & genitals grow, boys’ voices “break” & muscle mass increases.
- Girls start to **menstruate** (“**periods**” – **menstrual cycle**), breasts grow, voices mellow, muscle mass & body fat increase.
- **Typically, girls start puberty at least a year earlier than boys, and consequently aged 10-12 they are often stronger than boys.**
- **What is “normal”?** → if it works & feels okay (no pain/ discomfort) then it’s probably “normal”.
- **“Growth spurts” often result in physical clumsiness & “growing pains”;** “raging hormones” may cause mood swings & skin problems → normal. [**Severe acne** → **seek medical help.**]
- **Awkward feelings; confusing/ contradictory thoughts, impulses;** erotic dreams (for boys – “nocturnal emissions”, a.k.a. “wet dreams”) → normal.
- **Feeling “odd” / anxious/ questioning “identity”:** mostly **transitory** → usually of *no great long-term significance*. **Perfectly normal to experience such feelings.**
- **Girls’ breasts & vulvas; boys’ penises; texture/ colour of pubic hair** → **all vary considerably** in appearance → normal.
- **Fleshy & “neat” vulvas; long, short, or no foreskins** → **normal**. One testicle usually hangs lower than the other. **Female breasts are never perfectly symmetrical & nipples vary in size/ appearance.** **Body hair, marks** (moles/ birthmarks) → **normal**.
- **Flaccid penis size varies**, although 90%+ of adult erect penises are within the 5-6” range.
- **Typical length of vaginal passage** – 2-3 inches, rarely longer. **Clitoris** – usually not visible (clitoral hood), but when erect, **external clitoris (most of the clitoris is internal)** may look like a little penis. Normal.
- **Biology textbooks present representative averages - do not reflect the huge range of variations in appearances between real people.**
- **Models and porn actors** are **atypical** (physically & psychologically) - **appearances are “enhanced”** (extreme diets, “body sculpting”, make-up/ “personal grooming”, “digital retouching” of images, clever use of lighting). **Fashion, Porn – not ‘real’/‘normal’**: *fantasy* → “selling” stuff, or promoting an idea (often **very warped**) of sex.
- **NB “Pornhub”- not a good source of “sex education”.**
- **“Social Media”** → people constantly “finessing” their “image” are behaving oddly. **There is no “perfect appearance”.**
- **Humans are individually unique:** either made by God, or the product of exquisitely complex biological processes, or both.
- **NB “Sexting”** → **possibly illegal (certainly for children) and definitely dodgy.**
- **NB - it is a criminal offence to record/ send electronically/ digitally sexual images of a minor – even if it’s an image of yourself ...**

# PSHRE - Sex Ed – Years 10-13

- *So, if you take an intimate picture of yourself and send it to a mate or post it on social media (for a “laugh” or a “dare”, or whatever) **you have committed a sexual offence.***

## 1. Sex – the “right time”? <https://www.natsal.ac.uk>

**Legal age of sexual consent** in the UK is **16** - *may differ elsewhere* (Eg. 18 in most states of the USA). **Ignorance of the Law is no excuse.**

- **For individuals the “right time” to have sex is when it’s legal, & right for them as determined by their personal beliefs, values and circumstances.**
- **UK average age for first experience of sexual intercourse is nearly 20.** Some will be younger, but many will be older. (Statistical “Bell Curve” distribution.)
- **NB – JUST BECAUSE YOU ARE OLD ENOUGH DOES NOT MEAN YOU HAVE TO OR SHOULD.**
- **There is nothing wrong or weird in believing sex should only occur in marriage** → perfectly normal view held by many, for religious or other reasons.
- **What is right for an individual should be respected. No-one else’s business.**
- **It’s normal for young people to discuss sex with their peers,** but if someone with no legitimate interest starts asking intrusive personal questions about such matters (Eg. on-line) that **is not normal. It’s creepy-> alarm bells! Disengage → tell someone.**
- **All sex must be consensual** – penetrative sex without consent is **rape** (*Sexual Offences Act*).
- **“No” means NO – no ifs/ buts** – remember, **people may change their minds**, even when they have already engaged in physical intimacy - **must be respected**. (see YouTube “Tea and Consent”.)  
**Remember: ACK ACK**

### **“ACK ACK”:**

- **Ask**
- **Consent**
- **Know the Law**
- **Assume nothing**
- **Consideration**
- **Kindness**

## 2. Sexuality and related matters:

- **Most** people are **heterosexual** (“straight”); **some** (2-10%+ - *opinions vary*) are **homosexual** (“gay”).
- Female homosexuals are often called **lesbians**: origin - Ancient Greece, Island of Lesbos – home of Sappho, famous woman poet widely believed to have been gay.
- Some people are **bisexual**, or have other identities – Eg. **“polyamorous”, “non-binary”, “grey-sexual/ demi-sexual”.** **It can be very complicated.**
- **A degree of uncertainty about sexuality is not unusual,** esp during puberty and young adulthood – Eg. most gay people have had at least one significant heterosexual experience; many “straight” people have had homosexual thoughts or experiences, but most don’t admit it/ talk about it.
- **LGBT+** – Lesbian, Gay, Bisexual, Transgender.

## PSHRE - Sex Ed – Years 10-13

- Some people may self-describe as “**non-binary**”, “**pan-sexual**” or other terms.
- NB **Sexual orientation** (“straight”, “gay” etc) not the same as **gender identity**.
- A few may self-describe as **trans-sexual** (not the same as **transvestite**). Some are **gender dysphoric** (**transgender**) & may have medical treatment [hormones & **major surgery**] (“gender re-assignment” or “gender correction”) to “transition” (*Gender Recognition Act*).
- **Most people are either “straight” or “gay”**; a few may be **asexual** (uninterested in sex) or identify as “ace”, “grey-sexual”, “demi-sexual” etc.
- **Human sexuality/ gender identity - complex. Awareness/sensitivity.** (*Equality Act*).
- **Sexual preferences/ practices vary – never assume that all are the same.**
- **Masturbation**: some disapprove – religious or cultural reasons. Others think that (in private) it’s a safe way to explore sexuality; may be beneficial (stress buster; prostate gland health). [BTW, most girls do it too.] **Nocturnal Erections (male & female)** – normal, esp during REM sleep phase. Common for males to have erections when they awake (typically due to full bladder pressing certain nerves)- normal/ good sign because it means everything is working as it should.

### 3. Sex – what happens? (realities & myths)

- People can, and do, have sex in many places/ ways. Majority, however, have sex in private / comfortable places, usually in bed.
- **For most people, having sex with another is one of the most deeply personal, intimate things they will ever do.**
- **It’s perfectly natural to feel anxious about sex (esp when inexperienced)- another reason why good communication, consideration and kindness are so important in close interpersonal relations.**
- Typically, the couple will undress – for most, skin contact is important to sexual intimacy. **Foreplay** – intimate physical contact during which a high level of sexual arousal occurs (erection of penis, nipples, clitoris; labial lips/ vulva swell, as do lips; facial flush, esp women; heart rate, blood pressure, breathing increase; lubrication of vaginal passage, penis by sexual secretions – for males, often called “pre-cum”).
- Foreplay may be brief, but couples often extend it because it can be intensely pleasurable - kissing, hugging, mutual massage/ other forms of often very erotic stimulation –Eg. oral sex.
- For most, the culmination of this is penetrative **intercourse** – often very vigorous – leading to **orgasm** and **ejaculation** [“coming”]. (NB male “**refractory**” period after ejaculation - generally quite brief in younger males; longer in older men.)
- **Generally, the sexual practices of gay people are not that different from those of straight people. It is a myth that all gay men are highly sexually active and “into” casual sex.**
- Some are like this – just as some straight people are, but the majority are just like everybody else - because they’re just people like everybody else.
- NB Many gay men do not have anal intercourse (for the same reasons others don’t) – a myth that gay sex always centres on this. Many *straight* couples (20%+) do have anal sex.
- **Other common myths about gay people:** (a) Lesbians are “butch” & “into rough sex” -> NO – most lesbians want mutually satisfying 1:1 sexual intimacy, just like others. (b) Gay men

## PSHRE - Sex Ed – Years 10-13

are paedophiles -> NO – most paedophiles are heterosexual. Some paedophiles are gay, but proportionately no more than those of other sexualities.

- NB **Paedophiles** are people who have a **perverted sexual interest in children**. They are **extremely devious and manipulative**. **Internet/ Social Media** - arenas which paedophiles exploit to “groom” potential victims because it is easy to create **fake profiles (“catfishing”)** -> **important** to take **great care** when interacting on-line/ social media.
  - NB **Most women (60%+) report never, or rarely, orgasming during intercourse**, which is why many find extended foreplay more sexually gratifying than intercourse itself.
  - When a man ejaculates (“comes”) inside a woman, his semen (containing millions of sperm cells) enters her uterus -> consistency changes with body warmth -> less viscous -> spreads sperm in “target area” -> ovum *may* be fertilised/ implant in wall of uterus/ cell division -> embryo forms – pregnancy – 9-month gestation -> baby born.
  - NB **If a healthy young heterosexual couple has sexual intercourse without contraception, it is possible (approx. 3-5% chance each time they have sex) that pregnancy will occur - can happen 1st time they have sex**. NB **Spontaneous abortion (“miscarriage”)** – more frequent than commonly realised – **sensitivity!**
  - NB **Casual or multiple sexual encounters are high risk for catching/ spreading STIs, esp if condoms are not used – “unprotected sex”. It only takes one act of intercourse – bacteria/ viruses don’t care.**
  - NB **Certain sexual practices (Eg. anal sex) are very high risk for spread of STIs, so great care is needed if engaging in such activities – condoms & lubricant.**
4. **Contraceptive methods widely used:** “Barrier” (condom, femdom) – often combined with spermicidal gels/ foams. “Hormonal” (pill, implants, ring); Other (IUCD – “coil”, surgical, NFP). NB *No contraception is 100% reliable.*
  5. **Sexually Transmitted Infections:** infections spread by sexual contact. In *theory*, such infections can occur without sex - reality, the degree of physical intimacy required only usually occurs during sex. **If in doubt, get checked out!**  
<https://www.wiltshiresexualhealth.co.uk>
  6. **Other common problems:** (a) **erectile dysfunction (“impotence”)** – happens to most now & then. In young men, almost always temporary & due to anxiety/ stress, tiredness, alcohol or other drug use. If problem persists, it should be checked out by a doc because it *might* be a sign of other problems. (b) **vaginal dryness, irritation, shrinkage/ loss of elasticity** – may make sex uncomfortable. Many possible causes: often such problems arise at menopause. In *young women* they may indicate medical conditions, but can be linked to menstrual cycle. **Pain/ bleeding during sex must be checked by doc.** (c) **anorgasmia** - inability to experience orgasm despite adequate stimulation. *May* indicate a physical problem (Eg. nerve damage), but *often* due to anxiety/ stress. (d) **infertility** – many possible causes. Requires medical investigation. (e) **endometriosis; polycystic ovary syndrome (PCOS)** – some women suffer from these conditions – may be painful/ debilitating; can cause infertility & more general health problems.
  7. **Remember:** keys to safe, happy & mutually satisfying intimate relations - informed consent, good interpersonal communication, consideration and kindness. Good personal hygiene matters! There is no such thing as “bad in bed” – only selfish in bed. **Non-consensual sex is rape. Unwanted sexual advances/ comments are assaults. No ifs/ buts. SEXUAL HARASSMENT; COERCIVE/ CONTROLLING RELATIONSHIPS – UNACCEPTABLE.** (CRH, 2022)