Year 11 PDC Booklet



Relationships and Sex Education I

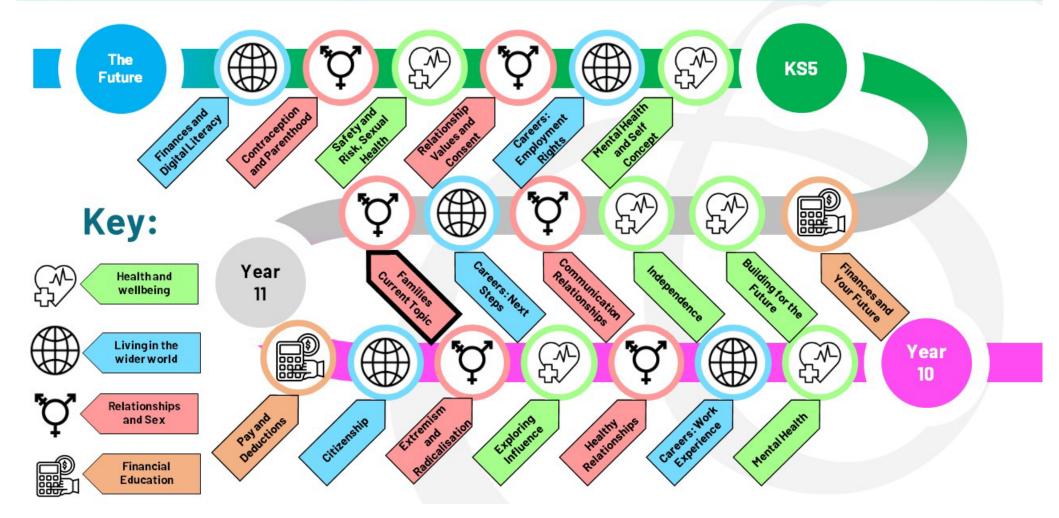


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Personal Development Curriculum KS4 Learning Journey









Year 11 — Block 1: Relationships and Sex Education Knowledge Organiser



	Key Words	
Non-Qualifying Ceremony	A religious-only ceremony that is conducted by does not give the family legal status. There must be a legal wedding too.	
Nikah	An Islamic marriage ceremony	1
Cohabiting	Live together and have a sexual relationship without being married.	
Civil Partnership	A legally recognized union with rights similar to those of marriage	
Fertility	The ability to conceive children or young	1
Abortion	The deliberate termination of a human pregnancy, most often performed during the first 28 weeks of pregnancy.	
PTSD	Post Traumatic Stress Disorder. Can lead to intense, disturbing thoughts and feelings related to their experience that last long after the traumatic event has ended.	
Grief	A multi-layered response to loss, particularly to the loss of someone or something that has died, to which a bond or affection was formed	
Bereavement	A period of mourning after a loss, especially after the death of a loved one	
Forced Marriage	Where one or both people do not or cannot consent to the marriage, and pressure or abuse is used to force them into marriage.	
Arranged Marriage	A marriage planned and agreed by the families or guardians of the couple concerned rather than by the couple themselves	

W	/here To Go For Support:	
Teachers and School Staff, Parents, Friends, Parents		
NPSCC	https://www.nspcc.org.uk	
NHS Advice for Parents	nhs.uk/mental-health/children-and-young-adults/ advice-for-parents/	
Freedom Charity	https://freedomcharity.org.uk/	

Responsibilities of a Parent

If you have parental responsibility, your most important roles are to:

- · Provide a home for the child
- · Protect and maintain the child
- · You're also responsible for:
- Disciplining the child
- Choosing and providing for the child's education
- · Agreeing to the child's medical treatment
- · Naming the child and agreeing to any change of name
- Looking after the child's property

Menopause

- Menopause is when your periods stop due to lower hormone levels. This usually happens between the ages of 45 and 55.
- It can sometimes happen earlier naturally.
 Or for reasons such as surgery to remove the ovaries (oophorectomy) or the uterus (hysterectomy), cancer treatments like chemotherapy, or a genetic reason.
 Sometimes the reason is unknown.
- Smoking and drinking can have a negative impact on symptoms of menopause.

Infertility Infertility can be caused by many different things. For 25% of couples, a cause can't be identified. Women: Main causes are issues with releasing an egg (ovulation). This can be caused by PCOD, thyroid problems, fibroids, PID, endometriosis or STIs Men: Most common cause is poor-quality semen. Lack of sperm of low sperm count, immobile sperm, or low testosterone Fertility treatment can be provided by the NHS, but it is highly selective. Fertility medication is usually provided to those in need, mostly women. There are significant side effects to this however.

IUI (artificial insemination) may be performed.
Sperm is collected and washed in a fluid.
IVF may also be performed, where the sperm and

egg are fertilised outside the body

Forced Marriage and Arranged Marriage			
Forced Marriage	Arranged Marriage		
No right to refuse Someone forces them to find a partner It does not consider what the couple want Can be done to protect family honour, keep land, reacting to social pressure, or to repay debt	Arranged Marriage Always consent Family takes the lead to find partner The couple's interests are at heart Is usually done for the happiness s of the person Arranged marriages can lead to forced marriages when		
	blackmail or ultimatums are given to people		



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Date:	LIONHEART EDUCATIONAL TRUST

Title: Learning To Learn: Metacognitive Talk

Retrieval Practice

IVC.	the variable to the control of the c
1.	Metacognition refers to thinking about your own
2.	Looking back and on what strategies worked or didn't work is part of the metacognitive process.
3.	There are a number of learning strategies that form part of metacognition
4.	An example of this is where you expand on an answer and say why
5.	is a metacognitive process where an expert tells you how their thought process works for you to copy

	Baseline Assessment	Endpoint Assessment
1. What is metacognitive talk?		
2. Why is metacognitive talk important?		

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Task 1: Practice Practice Practice

Example:

Your class is planning a field trip to a nearby city for a cultural exchange program. You need to organise transportation, accommodation, and meals within a limited budget provided by the school. How would you plan the trip to ensure everyone enjoys and stays within budget?

Verablise your thought process with your partner out loud.

Then use the space below to write your thought process

- "First, I'll research transportation options like bus rentals or public transport to find the most costeffective solution."
- "I need to survey classmates to determine dietary preferences and allergies for meal planning."
- "I'll create an itinerary with activities and cultural sites to visit, considering entry fees and scheduling ts optimize our time."
- "Throughout the planning, I'll keep track of expenses using a budget sheet to ensure we stay within the allocated funds."

Scenario 1:

Your school is organizing a fundraiser to support a local animal shelter. You need to plan fundraising activities, coordinate volunteers, and promote the event to maximize donations. How would you organise the fundraiser to achieve your goal?

Verablise your thought process with your partner out loud.

Then use the space below to write your thought process

2.	
4.	

Scenario 2:

Two classmates disagree on how to organise a group project. One prefers a creative approach, while the other prefers a structured plan. How would you help resolve the conflict to ensure the project is successful?

Verablise your thought process with your partner out loud.

Then use the space below to write your thought process



_	
1.	
2.	
3.	
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Sce	enario 3:
100	ur school is hosting an inter-school sports competition, and you are preparing to compete in the -meter sprint. How would you prepare yourself physically and mentally to perform well on npetition day?
Ver	ablise your thought process with your partner out loud.
The	en use the space below to write your thought process
1.	
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4.	



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Title: Fertility	11001

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Re	Retrieval Practice			
1.	Metacognitive talk involves the strategies out loud that you use to think and learn.			
2.	Asking questions like "What do I need to solve this problem?" encourages metacognitive talk.			
3.	and thinking back on why a particular approach was chosen is an example of metacognitive talk.			
4.	During group work, you can use metacognitive talk to your strategies and progress.			
5.	Metacognitive talk can help areas of difficulty that you might need support on.			

	Baseline Assessment	Endpoint Assessment
1. How might people's fertility		
be affected?		
2. What are the solutions to		
someone becoming infertile?		

Task 1: What Affects Fertility?	LIONHEART EDUCATIONAL TRUST

Task 2: Routes to Parenthood

Options:

- 1. Decide not to have a child
- 2. Natural conception a male and female achieving pregnancy through vaginal sex.
- **3.** Intrauterine insemination (IUI) also known as artificial insemination, this involves inserting sperm into the uterus via a thin plastic tube passed through the cervix. Sperm is collected and the fastest moving sperm are selected.
- **4.** In vitro fertilisation (IVF) fertility medication is taken to encourage the ovaries to produce more eggs than usual. Eggs are then removed from the ovaries and fertilised with sperm in a laboratory. A fertilised egg (embryo) is then returned to the uterus to grow and develop.
- **5. Co-parenting** when two or more people decide to conceive and parent children together. A coparent will not have sole custody of the child, and there are many details to be worked out, such as what role each parent will take, how financial costs will be split, and the degree of involvement each will have with raising the child.
- **6. Adoption** the legal process by which a child who cannot be brought up within their birth family becomes a full, permanent and legal member of their new family. Adopters become the child's legal parents with the same rights and responsibilities as if the child was born to them.
- 7. **Fostering** providing a child with a home while they are unable to live with their own family. Many children in foster care will return home or go to live with family members. A fostered child remains the legal responsibility of the council and/or their birth parents and foster carers receive support from a social worker.
- **8. Surrogacy** when a woman carries a pregnancy for a couple who cannot maintain a pregnancy themselves. In some cases, the eggs of the mother or a donor are used, while in other cases the surrogate's egg is fertilised with the sperm of the father. The baby does not legally become the couple's until a parental order has been issued after the child's birth. Until this order is issued the surrogate has the right to keep the baby.
- **9. Egg freezing** similar to the process of IVF, this involves collecting a female's eggs, freezing them and using them at a later date.
- *Whilst many of these routes to parenthood can be successful, they may come with additional challenges. For example, they can be emotionally/ physically demanding, and costly. They have variable success rates and are not always guaranteed to produce children. So, different routes should be fully researched and explored before a couple or an individual makes their decision.



	T
	Routes To Parenthood
Rachel and Steven	
Rachel and Steven have been together for	
many years. They spent their 30s focusing	
on their careers, spending time socialising	
with friends and family and travelling as	
much as possible. Now both 40 years old,	
they feel ready to start a family. However,	
they have been trying to conceive for over a	
year and have not fallen pregnant.	
Oliver and Zane	
Oliver and Zane spend a lot of time with their	
nieces, nephews and friends' children; they	
love kids of all ages and agree that now is	
the time to start a family of their own. They	
just aren't sure where to begin!	
Graham	
Graham has always wanted children of his	
own and is keen to start a family. He thought	
he would have a partner by now, but he has	
not found someone he would like to have a	
family with. He has decided to raise a child	
alone instead.	
Asha and Chidi	
27-year-old Asha and 25-year-old Chidi want	
a large family and recently bought a family-	
sized home together. Although their families	
keep asking when they are going to get	
pregnant, they are not sure whether they	
should wait a few years before they start, as	
they are both doing really well in their	
respective jobs.	
Lian	
Most of Lian's friends have children and she	
feels like she might be missing out. She	
knows she won't be fertile forever so thinks	
she should act now. However, she is not in a	
relationship and isn't sure children are really	
for her.	
Mariam and Zara	
Mariam and Zara would like to have children.	
Zara has always wanted to carry a child	
herself and Mariam is very supportive of	
this, but they are not sure if that's a	
possibility or what their other options might	
be.	



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Date:	EDUCATIONAL TRUST
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Title: Ready for Parenthood

Re	Retrieval Practice		
1.	is the natural ability to conceive children.		
2.	refers to the inability to conceive after a year of regular, unprotected intercourse.		
3.	One common medical treatment for infertility is fertilisation (IVF).		
4.	A is a person who agrees to carry and give birth to a baby for another person or couple		
5.	donation involves using eggs from a donor when a woman's own eggs are not viable.		
Ra	Racalina and Endnoint Assassment:		

	Baseline Assessment	Endpoint Assessment
1. What are the		
responsibilities important responsibility of a parent?		
2. How do parents get		
support?		

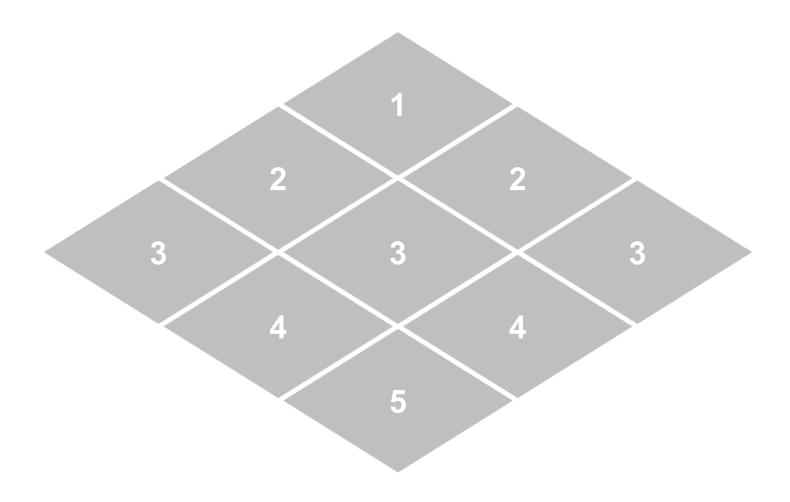


Task 1: Diamond Nine

Order the following into a diamond nine:

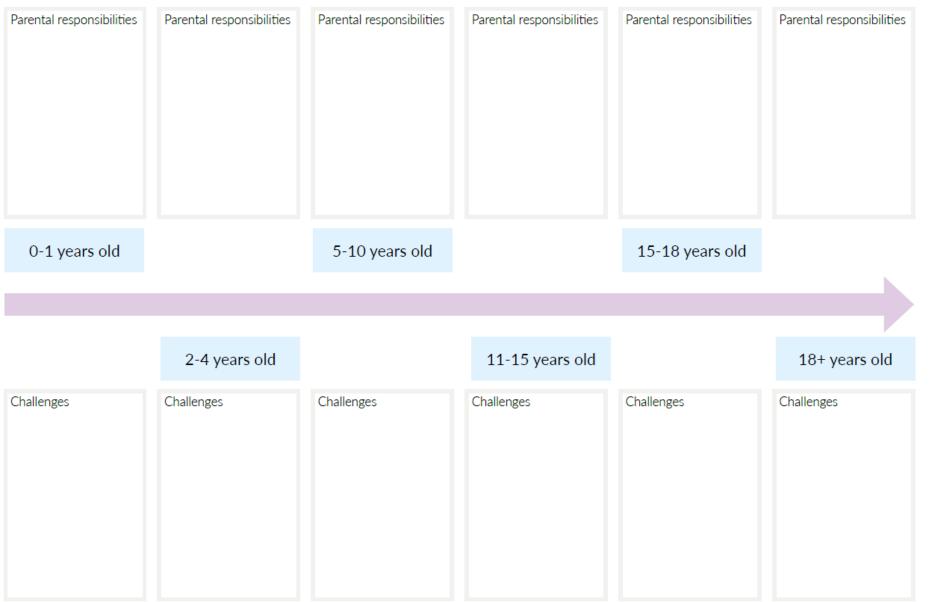
- Encourage their child to participate in new hobbies/develop new skills
- Have high expectations of their child
- Talk to their child regularly
- Support their child in developing positive family relationships with family and friends

- Take an interest in their child's school life
- Have meals together
- Take their child on day trips
- Get their child to do chores
- Have strict rules at home



Task 2: Timeline





Da	ate:	LIONHEART
Τi	tle: Unplanned Pregnancy	TRUST
Re	trieval Practice	
١.	A primary of a parent is to ensure the safety of their child.	
2.	Parents must provide their children with necessities including to eat clothing t and shelter to live.	o wear,
3.	It is important for parents to support their child's development, including social growth.	I
′ 4.	Parents need to ensure their child receives an adequate academic to prepare the future.	hem for
5.	Encouraging a child to and physical activity is essential for their health.	
Ва	seline and Endpoint Assessment:	

	Baseline Assessment	Endpoint Assessment
What are the options for someone who has an		
unplanned pregnancy?		
2. How can someone decide		
which option to choose?		

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Task 1: Scenario

Dan and Amalie are both 16 years old. Amalie missed her last period, so asked Dan to buy a pregnancy test and bring it round when her parents were out.

She has just taken a pregnancy test and the result is positive.

۱.	How might Amalie be feeling?
2.	How might Dan be feeling?
3.	What options do they have?
<u>4</u> .	What might their next steps be?

Task 2: Scenarios

- 1. Zarah is 18 years old. She has been working really hard to get good A-level results and has a place at a great university in another city for next year. She has been with her boyfriend since Year 11 and they have a strong relationship, although he now works full-time so they don't see each other as regularly.
- 2. Louie's girlfriend wants to keep the baby, but he doesn't feel ready to be a father and isn't sure how he will afford to financially support a family either. He knows his parents are going to be really angry his Dad even gave him a lecture about safe sex when he first started dating! He's going to be so disappointed.
- 3. Klaudia is 15 years old and doesn't know who to contact about her options she's never even had to make her own GP appointment before! Her family are very religious and she wasn't supposed to have sex before marriage. She thinks they will ask her to leave home if she tells them that she's pregnant.
- 4. Jana's mum had her when she was young and raised her alone. She never wanted Jana to do the same thing. Jana and her ex-boyfriend Darren were dating for a year, but broke up 3 months ago after lots of arguments. Jana is hoping the pregnancy might bring them back together.



- 5. Dalia is in a new relationship and doesn't know how her partner will react to the news.

 Both of them work full time and have been saving money up, but they want to use this to go on holidays and buy a flat together. Dalia thinks that the wrong decision might end the relationship, but she doesn't know what the right decision is.
- 6. Frankie finally feels like their life is coming together; they have found a group of really good, supportive friends at college, they are studying subjects they care about and getting on really well with their parents. Frankie thinks this all might go away if they reveal they are pregnant.

Sc	Scenario Number			
	What might your character's initial reaction to the pregnancy be?			
2.	What might influence the character's decision going forward?			
3.	Which influence might your character prioritise above all others?			



Task 3: Facts About Abortion

Which facts are the most beneficial for young people to know? Circle the numbers.

- 1. There are three main ways to get an abortion on the NHS: someone can self-refer by contacting an abortion provider directly, or they can speak to a GP and ask for a referral to an abortion service, or they can contact a sexual health clinic and ask for a referral to an abortion service¹. If a doctor has a 'conscientious objection' to abortion, they must refer the woman to further care and inform them of their right to see another doctor.
- 2. The vast majority of abortions take place early in pregnancy. The pregnancy should not have exceeded its 24th week (although abortions may be performed after 24 weeks in certain circumstances, for example, if the pregnant woman (or trans man)'s life is at risk or the child would be born with severe disabilities).
- 3. Although some may choose to pay for private treatment, in England, Scotland and Wales, abortions are available free of charge on the NHS.
- 4. A woman (or trans man) can have an abortion or termination of pregnancy if two doctors decide that one or more of the grounds specified in the Abortion Act are met.
- 5. While many couples will want to discuss their options together, "women do not need their partner's agreement to have an abortion, although some will want to discuss the pregnancy with their partner and come to a joint decision. Partners who have taken legal action to try to prevent an abortion have been unsuccessful.
- 6. Although someone under 16 may be encouraged to speak to their parents, they have the right to confidentiality and can give their consent to an abortion themselves, as long as they are considered competent (i.e. able to understand a health professional's advice and the risks and benefits of the treatment options). At any age, it is only in exceptional circumstances, where the woman (or trans man), or another person is at risk of serious harm, that information may be disclosed to someone else without the patient's agreement.
- 7. Abortion is extremely safe in the UK, where it is carried out in a medical facility and by medical professionals. Abortions are safest when carried out as early as possible in pregnancy.
- 8. It is not compulsory for someone to have counselling before having an abortion. However, all women (or trans men) requesting an abortion can discuss their options with, and receive support from, a trained pregnancy counsellor if they wish.
- 9. Fertility returns immediately after an abortion and having an abortion does not increase the risk of miscarriage, ectopic pregnancy or a low placenta in future pregnancies.
- 10. Having an abortion is not the same as taking emergency contraception. Pregnancy only starts when a fertilised egg implants in the lining of the uterus. The emergency contraceptive/morning after pill works by delaying the release of an egg so no fertilisation happens¹¹. The two main methods of abortion are taking medication to end the pregnancy, and surgical abortion a minor procedure to remove the embryo/foetus.

Da	Date:	
Ti	tle: Forced Marriage	EDUCATIONAL TRUST
Re	etrieval Practice	
1.	One option for someone facing an unplanned pregnancy is to consider the pregand raising the child.	jnancy
2.	Another option is to place the child for, allowing another family to raise the child	d.
3.	Seeking from a healthcare professional is important for understanding all avail options.	able
4.	It is essential to consider both the emotional and aspects of each option.	
5.	is a medical procedure that can terminate an unplanned pregnancy.	

	Baseline Assessment	Endpoint Assessment
1. What is the difference		
between forced and arranged marriage?		
2. How can you recognise	How can you recognise	
forced marriage?		



Task 1: Mind Map	LIONHEART EDUCATIONAL TRUST
Make a mind map in the space below as to why som	eone might choose marriage/civil partnership
	eone might NOT choose marriage/civil partnership
Task 2: Forced or Arranged?	
Forced Marriage	Arranged Marriage

Give advice about what Jas and her brother could do.

	LIONHEART EDUCATIONAL TRUST
What might you do if Jas or her brother felt unable to follow this advice?	

Task 3: Advice

Write three pieces of advice to Fatima and Abby.

Consider:

- How could Fatima and Abby overcome any barriers to reporting?
- What steps might they take to report their concerns?

	Who could they talk to for emotional support?
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Date:	LIONHEART EDUCATIONAL TRUST
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Title: Menopause

Re	trieval Practice
1.	An arranged involves families playing a significant role in choosing the partner, but both individuals consent to the marriage.
2.	A marriage is when one or both individuals do not freely consent and are coerced into the marriage.
3.	In many cultures, arranged marriages are seen as a way to maintain traditions.
4.	It is important to differentiate between arranged and marriages to understand the role of consent.
5.	Forced marriage is considered a violation of rights.

	Baseline Assessment	Endpoint Assessment
1 What is manner 20		
1. What is menopause?		
2. How can people deal with		
menopause effectively?		



Task 1: Reading

Do you think talking about menopause in the workplace helps or hinders equality?

Henpicked menopause in the workplace and equality

It's a big question. Going back nearly 4 years, when we started working with organisations to open up the topic, it divided opinion. It was unheard of then – what's menopause got to do with work anyway?

We had feedback from women who'd been through menopause and didn't see the need. Others said that after years of fighting hard for their place in senior roles, highlighting something that could make them look like the 'weaker' sex makes it harder to progress or even be taken seriously. We were even asked to shut up about it.

But no, we won't. We believe enabling menopause to be talked about openly, empowering people to understand what it is and what they can do will help equality.

The bigger risk is doing nothing. Pretending it doesn't happen, letting people struggle unnecessarily and letting myths dominate facts.

From years of experience and thorough research, we know that menopause was already getting in the way of equality. Symptoms can be a problem for many women progressing, no longer feeling able to put themselves forward for the promotion they'd have given their right arm for before menopause. On top of that, there are those who consider or actually leave work as a result of their menopause experience.

It's a silent problem that will continue to grow unless we do something about it. We have the solution now but need to accelerate. Granted, it needs a balanced approach, not over sensationalising.

Menopause has always been around, as long as there have been women and they've lived long enough.

A different time, a new generation

The fact is, we're living and working in a different time. Menopausal women have been the fastest growing demographic at work for decades in the UK and, for that matter, the global north. One in three workers are over 50, and nearly half of these women.

We're the first generation with this workforce gender and age mix. We do have different needs and it pays employers to help those who hit a bump in the road during the menopause transition.

It can be done, and more easily than many realise. Through all the programmes we've implemented, so many truly thank their employers for taking menopause seriously. Employers have experienced the benefits with no 'side effects'. We've never seen queues of women asking for help or reasonable adjustments employers can't easily meet. For many women, knowing their employer understands and cares is enough. For those who do need support, small changes can make a massive difference.

It's biology, not weakness

Menopause, equality, menopause at work, menopause in the workplace. Some still consider menopause a sensitive, private, maybe even taboo subject, particularly in the workplace, yet we don't leave our biology by the door at work.

We all experience hormonal changes in our lives. From the day we're born to the day we die, our hormones affect us. Whether it's pregnancy, fertility treatment, andropause, transgender, hormonal treatment for medical conditions – knowing the signs and symptoms of hormonal change and what can be done is genuinely helpful, both at work and home.

Women's biology includes menopause, we'll all experience it and in different ways. Some will sail through it, barely noticing, others will not. Support, if needed, is usually only for a short period of time. On average women will work for 10, 20 or even 30 years afterwards, and will be grateful for their employer's understanding and support.

Men are affected by menopause, too

Menopause affects men, partners and families, too. A train driver told me that some shifts he can't sleep with his wife because her insomnia and hot flushes kept him awake. Lack of sleep would be a health and safety issue at work for him and his passengers. Opening up the conversation has a broader reach than you might think.

Regardless of age or gender, menopause is something we all need to know about.

Benefits for generations to come

If we do this now – just as those of my generation did for pregnancy and maternity cover at work – menopause will not be an issue for women and men in the future. The conversation will be normalised, it won't be something we're embarrassed about or hide. We'll all know what to look out for and what to do if we experience symptoms.



So, what do you think - does talking about menopause at work help or hinder equality?

The most forward-thinking organisations are getting everyone talking about it, providing support and normalising the conversation because it's the right thing to do.

1.	Why is the equality conversation considered important in reference to menopause?
2.	In what ways might the symptoms of menopause impact women or their partners when they are
	at work?
3.	What steps can you think of for employers to take that would allow women to continue to work
	whilst dealing with symptoms of menopause?

Task 2: Menopause Quiz

- 1. At about what age does menopause typically begin?
- A. 40 B. 45 C. 51 D. 55
- 2. A woman is considered to be in menopause after she has missed how many menstrual cycles?
- A. 3 B. 6 C. 9 D. 12
- 3. What factors can cause premature menopause?
- A. Smoking B. Autoimmune disorders C. A woman's mother had early menopause D. All of the above
- 4. Hot flashes are symptoms of the perimenopausal stage. How many perimenopausal women have them?
- A. 100% B. 75% C. 50% D. 30%
- 5. A blood test can help confirm if a woman is beginning menopause. The test measures the level of which of these?
- A. Follicle-stimulating hormone B. Ostrogen C. Progesterone D. Cholesterol
- 6. What is the most serious adverse effect of menopause?
- A. Hot flashes B. Osteoporosis C. Heart disease D. B and C



- 7. How much bone loss does a woman have in the first 5 years of menopause?
- A. 10% over the 5-year period B. 5% over the 5-year period C. About 20% over 5 to 7 years D. 1% to 2% a year
- 8. Hormone therapy eases some of the negative effects of menopause. Which of these hormones is used?
- A. Oestrogen B. Oestrogen and progesterone C. Testosterone D. Prostaglandin
- 9. If a woman experiences menopause after age 50, how long should she continue using some form of birth control?
- A. She doesn't have to use birth control B. 3 months C. 6 months D. 12 months