

Bust Myths – A guide for how to use this video with young people

Name of video	Bust Myths
Date produced	June 2025
Video audience	This video is aimed at young people (approx. age 12-17 depending on their needs).
Lesson plan audience	It is designed to be used by adults supporting young people to build young people's knowledge and open up conversation about reproduction.
Brief description of the video	<p>This video covers:</p> <ul style="list-style-type: none"> • The menstrual cycle and sperm production • How pregnancy happens • Common myths about how pregnancy happens (e.g. pulling out before ejaculation) • Preventing pregnancy • What to do if someone has unprotected sex

What existing knowledge is useful for **young people to have before watching this video?**

- Prior kōrero or lessons on relationships and sexuality topics, including creating a safe space and getting more comfortable with talking about these topics if this video is used in a group or classrooms setting.
- Some knowledge of reproductive anatomy and physiology – e.g. the correct names for the different parts of the body including fallopian tube, uterus, and testicle.
- An understanding of what contraception is and what it's used for.

If a young person does not have prior knowledge, then watching this video with a trusted adult who can explain words, terms and concepts might be useful.

Visit our [Resources webpage](#) to explore other resources that can support this learning.

What existing knowledge is useful for **facilitators to have before using this video with young people?**

- The points above (existing knowledge for young people).
- Awareness of inclusive language when talking about reproduction
- Disclosure and/or safeguarding processes and policies if applicable
- Information about local services and support, including sexual health services.
- Where young people can go if they have follow-up questions
- Awareness that this video briefly mentions miscarriage and sexual assault.

Suggested reading and resources to support facilitators and to refer young people to for more information

- Visit our Useful links to [external organisations webpage](#) for a list of organisations, support services and information relating to sexual wellbeing.
- Visit our website to find out more about our range of [trainings, online courses](#) and [resources](#).
- Read our [Advice pages](#) or direct young people to them for trusted information about topics relating to sexual and reproductive health.
- Find [sexual and reproductive health services](#) across Aotearoa New Zealand.
- [Contact our Health Promotion team](#) to find out more about how we can help.

Suggested ways to use this video

This video should always be used as part of wider programme. For example:

- As part of school Relationships and Sexuality Education (RSE)
- Integrated into a series of sessions or activities that take place over a number of weeks/months
- As a resource to go alongside ongoing conversations about these topics
- As part of a session or lesson on reproduction or pregnancy
- As a tool to support conversations at home or in other settings
- It can be used by a range of adults supporting young people, including teachers, youth workers, community workers, health professionals, and parents and whānau

We strongly recommend that adults supporting young people take time to build trust and rapport with them, create safe and inclusive spaces to have open conversations, and to establish boundaries and/or a group agreement before using this video.

This video is more effective if young people are given the opportunity to have follow-up conversations, to ask questions anonymously, and to reflect on what they've learnt.

Our recommendation for how to use this video

We have put together some structured talking points and activities (page 3 of this guide) to go alongside this video to maximise learning. These talking points and activities are based on knowledge, attitudes and skills. Including knowledge, skill and exploring attitude mean that young people have all the information they need to make informed and healthy choices.

1. **Knowledge** includes facts, concepts and information about a topic.
2. **Attitude** includes beliefs, values, and feelings about a topic.
3. **Skills** involves being able to apply knowledge and attitudes through action.

TALKING POINTS AND ACTIVITIES

*Note: you can pick and choose from the activities, or you can use them all.
Always introduce the video before showing it.*

Introduce the video

- Explain that you are going to show them a 5-minute video about reproduction and how pregnancy happens.
- Acknowledge different levels of knowledge in the room.
- Reinforce that it's useful for everyone to know this information whether they are sexually active or not.
- Remind them of the group agreement and/or safe space etiquette if a group setting.
- Give a content warning: this video briefly mentions miscarriage and sexual assault, if you feel upset by this, you can [leave the room, disengage, talk to me afterwards].
- Explain that this video does not show images of private parts/genitals, it is of two presenters talking and some animated images showing how the sperm meets the egg.
- Ask if anyone has any questions before watching the video.
- Explain that there are some activities that you'll all do before/after the video.

List of activities

Learning focus	Name of activity	Page/s
Knowledge	Activity A: Pre-Quiz / Post-Quiz Appendix A: Worksheet Appendix A(2): Facilitator answers sheet	P4-5 P6-7 P8-9
Attitude	Activity B: Exploring values and attitudes Appendix B: Statements	P11-12 P13
Skills	Activity C: Skill-building scenarios Appendix C: Scenarios Appendix C(2): Facilitator answer sheet	P14-15 P16-17 P18-19

Knowledge Activity A: Pre-Quiz / Post-Quiz	<p>Description: This quiz can be used to assess <u>knowledge before showing the video</u>, and then repeated after watching the video, or at a later date to assess retention of knowledge.</p> <p>Resources: Appendix A: Pre-quiz / Post-quiz worksheet (page 6) and Appendix A(2) Facilitator answers sheet (page 8)</p>
Overview	Key points
Set up	<p>Here are some ideas for how to facilitate this pre-quiz / post-quiz:</p> <ul style="list-style-type: none"> • Option 1: Give each young person a copy of the quiz and ask them to complete it individually. • Option 2: Split the group into small teams and ask them to complete the quiz together. • Option 3: Give each young person different questions from the quiz to answer either individually or in pairs. <p>Use the same option before showing the video, and after showing the video for consistency.</p>
Introduction to activity	<p>Before showing the video (pre-quiz)</p> <ul style="list-style-type: none"> • Explain that you'd like to see where their knowledge is at through a quiz. • Emphasise that this is not a test or exam, it's just a way to see what knowledge they have and what they may need to learn more about. • Acknowledge that everyone will have different levels of knowledge and that some people may have incorrect knowledge, this is normal and depends on what they've been taught, rather than how clever or intelligent they are. <p>After showing the video (post-quiz)</p> <ul style="list-style-type: none"> • Explain that, now that they've watched the video, you'd like them to do the same quiz again. • Emphasise that this is not a test or exam, it's just a way to see what knowledge they have and what they may need to learn more about. • Acknowledge that everyone will have different levels of knowledge and that some people may have incorrect knowledge, this is normal and depends on what they've been taught, rather than how clever or intelligent they are.
Instructions	<ul style="list-style-type: none"> • Choose Option 1, 2 or 3 or come up with a more suitable way for the young people you support to engage with this activity.
Feedback	<p>Pre-Quiz</p> <p>The aim of this pre-quiz is to check knowledge prior to watching the video. You don't need to go through the answers at this stage, this will be covered after watching the video.</p> <p>Suggested reflection questions:</p> <ul style="list-style-type: none"> • How did you find that? Was it easy/difficult? Why?

	<ul style="list-style-type: none">• Where do you think young people get their knowledge about reproduction and pregnancy from?• [If in groups] did you all agree, or were there questions that you had different ideas about or answers to? <p>Post-Quiz The aim of the post-quiz is to see whether knowledge has increased, and to identify gaps in knowledge. Once the post-quiz has been completed, you can go through the answers.</p> <p>Suggested reflection questions:</p> <ul style="list-style-type: none">• What's one new thing you learnt from watching the video?• Is there anything you got wrong in the pre-quiz, but right in the post-quiz?• What's something you think a lot of young people don't know?• Do you have any questions after watching the video? <p>Closing: provide signposting options, including sexual health services, support services, and website links to credible sources and organisations.</p>
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Name _____

Date _____

Is this: **pre-quiz (before watching the video)**
 post-quiz (after watching the video)

Quiz questions

1. What two things are needed to make a pregnancy?

2. What part of the body is sperm made in?

3. What is the only job of the sperm?

4. What can someone use if they want to have sex, but don't want a pregnancy?

5. Write down the names of any methods of contraception that you know.

6. Why doesn't pulling out before ejaculation (cumming) stop pregnancy?

7. Can someone get pregnant from oral sex (mouth on genitals)? Why or why not?

8. Can someone get pregnant from anal sex? Why or why not?

9. Is penis-in-vagina sex the only way to create a pregnancy? If no, what are other ways to create a pregnancy?

10. How many days can sperm hang out in the body for?

11. Where in the body does fertilization usually happen?

12. Who can someone talk to about their contraception options?

13. If someone does get pregnant, what can they do or who can they talk to for support?

1. What two things are needed to make a pregnancy?

Answer: a sperm and an egg.

2. What part of the body is sperm made in?

Answer: the testicles.

3. What is the only job of the sperm?

Answer: To find an egg and fertilize it.

4. What can someone use if they want to have sex, but don't want a pregnancy?

Answer: contraception

5. Write down the names of any methods of contraception that you know.

Answer: The pill, Depo Provera (the jab), condoms (internal and external), the implant (the rods), IUD (intra-uterine device), the emergency contraceptive pill (ECP, sometimes called the "morning after pill" or "plan B"), vasectomy, tubal ligations (getting your tube tied).

Visit <https://sexualwellbeing.org.nz/adv/contraception/> for a list of contraceptive types.

6. Why doesn't pulling out before ejaculation (cumming) stop pregnancy?

Answer: Pre-cum can carry sperm, and if sperm gets into the vagina, there is a chance of pregnancy.

Pre-cum (or pre-ejaculate) is a small amount of fluid released from the penis before someone cums (or ejaculates). It is not something that a person can control, their body releases it by itself. Pre-cum can carry sperm, so even if someone pulls out of their partner before they cum, it's possible that pre-cum, which may carry sperm, gets inside the vagina and leads to pregnancy.

Pre-cum can also carry STIs, which is why using barrier types of contraception such as condoms, and getting regular STI checks is important.

7. Can someone get pregnant from oral sex (mouth on genitals)? Why or why not?

Answer: No. Someone can only get pregnant if sperm gets into the vagina.

Even though there is no risk of pregnancy from oral sex, there is a risk of passing on STIs, which is why using barrier types of contraception, such as condoms, and getting regular STIs check are important.

8. Can someone get pregnant from anal sex? Why or why not?

Answer: No. Someone cannot get pregnant if sperm goes into the anus. Someone can only get pregnant if sperm gets into the vagina.

However, the anus is near to the vagina, so if someone is having anal sex, sperm may be able to get into the vagina, especially if condoms aren't being used.

Even though pregnancy cannot happen if sperm goes through the anus, there is a risk of passing on STIs, which is why using barrier types of contraception, such as condoms, and getting regular STIs check are important.

Facilitator tip: It may be helpful to review the reproductive system (anatomy and physiology) if young people are struggling to understand why pregnancy can't happen through anal or oral sex. They may need more knowledge on how these parts of the

body work. [Visit our shop](#) for resources to support this learning, such as our [anatomy boards](#).

9. Is penis-in-vagina sex the only way to create a pregnancy? If no, what are other ways to create a pregnancy?

Answer: No.

If someone wants to get pregnant, but penis-in-vagina sex isn't right for them or getting or staying pregnant is tricky, they can talk to a doctor about their options. Examples of other options and treatments include:

- Medication to improve ovulation (release of eggs)
- Sperm and egg donation
- IVF (In Vitro Fertilization), where an egg is fertilized by sperm outside of the body by doctors, and then the fertilized egg is placed into the uterus.

Useful links and general information:

[Infertility | Healthify](#) for more information on fertility issues and treatment options

10. How many days can sperm hang out in the body for?

Answer: Up to 6 days.

This means that even if someone isn't ovulating (releasing an egg) at the time of sex, they can still get pregnant if they ovulate (release an egg) within the 6 days after sex.

11. Where in the body does fertilization usually happen?

Answer: In the fallopian tubes.

If the egg is fertilized in another part of the reproductive system, like the uterus, a pregnancy is unlikely to happen. Fertilization needs precise conditions for a pregnancy to be able to happen.

12. Who can someone talk to about contraception options?

Answer: there are many options, including sexual health clinics (such as Sexual Wellbeing Aotearoa), GP, school nurse, youth health services and pharmacies (for the emergency contraceptive pill).

Facilitator tip: Compile a list of trusted local services to share with young people, including information about fees and confidentiality. Support them further by helping them to build confidence to access services – for example, practicing how they might talk to a health professional, organising a clinic visit, or asking someone from the service to come and introduce themselves to the young people.

Useful Links:

[Our services: what to expect](#) for videos about Sexual Wellbeing Aotearoa clinics.

[Services](#) offered by Sexual Wellbeing Aotearoa and FAQs

[Sexual and reproductive health services in New Zealand](#)

13. If someone does get pregnant, what can they do or who can they talk to for support?

Answer: there are many options, including:

- Health services: sexual health clinics (such as Sexual Wellbeing Aotearoa), GP, school nurse, and youth health services.
- Support and services: parents and whānau, youth workers, cultural services, faith-based organisations and school counsellors.

- Pregnancy specific services: [DECIDE.org.nz](https://decide.org.nz) or 0800 DECIDE.

Facilitator tip: Compile a list of trusted local services to share with young people, including information about fees and confidentiality. Identify trusted and safe adults in your organisation or school and community and encourage young people to think about who in their lives they could talk to about this.

Attitude Activity B: Exploring values and attitudes	<p><i>Description: These questions promote discussion and encourage young people to share and explore their values and attitudes about reproduction and pregnancy.</i></p> <p><i>Resources: Appendix B – Exploring values and attitudes (pX)</i></p>
Overview	Key points
Set up	<p>This activity is designed to be used after watching the video.</p> <p>Here are some ideas for how to facilitate this activity:</p> <ul style="list-style-type: none"> • Option 1: Give one question between small groups or pairs and ask them to discuss. • Option 2: Read each question and discuss as a whole group or in pairs. • Option 3: Write each question on a large piece of paper and places them around the room. Ask the group to rotate around and write their thoughts about each question on the paper. <p>Consider:</p> <ul style="list-style-type: none"> • Think about the safety and wellbeing of the young people if splitting the group into pairs or small groups – who do they feel safe and comfortable talking to? • Can you adapt or add questions to better meet the needs of the group? (e.g. for culture, age, disability, specific issues within the group).
Introduction to activity	<ul style="list-style-type: none"> • Explain that there is lots to learn about reproduction and pregnancy, but understanding these topics is not just about the knowledge and facts. • In this activity, we are going to explore different beliefs, values and feelings about reproduction and pregnancy.
Instructions	<ul style="list-style-type: none"> • Choose Option 1, 2 or 3 or come up with a more suitable way for the young people you support to engage with this activity: <p><u>Option 1:</u> Give one question between small groups or pairs and ask them to discuss.</p> <p><u>Option 2:</u> Read each question and discuss as a whole group or in pairs.</p> <p><u>Option 3:</u> Write each question on a large piece of paper and places them around the room. Ask the group to rotate around and write their thoughts about each question on the paper.</p> <ul style="list-style-type: none"> • Remind them of the group agreement or established boundaries. • Emphasise that there is no right or wrong answer. <p>Optional: ask them to write down their answers or key points for feedback.</p>

Feedback	<p>Suggested reflection questions:</p> <ul style="list-style-type: none">• How did you find that? Was it easy/difficult? Why?• What are some examples of the different viewpoints that came up?• Where do you think people’s views, values, beliefs and opinions come from? What influences us to see things in a certain way?• Can people’s feelings and beliefs change? Why / why not? <p>Closing: provide signposting options, including sexual health services, support services, and website links to credible sources and organisations.</p>
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Appendix B: Exploring values and attitudes statements

Whose responsibility do you think it is to make sure contraception is used if having sex? Why?

When do you think young people should learn about pregnancy and reproduction? What age is it important to know about this, and where should they get this information from?

Where do young people get messages and information about pregnancy and reproduction from? What are some of these messages?

Do you think young people your age worry about getting pregnant? Why or why not? What do they worry about?

How do you think young people your age feel about talking to someone they are having sex with about pregnancy? Do you think many young people have these conversations before having sex with someone?

What are some different views or beliefs that you've heard about young people and pregnancy? What impact might this have on young people?

How could a young person's life, identity or background affect how they feel or what choices they make about pregnancy and having sex? For example, do things like culture, religion, family, gender or who they're attracted to make a difference?

Do you think young people your age think about pregnancy or contraception before having sex? Why or why not?

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Skills Activity C: Skill-building scenarios	<p>Description: This activity helps young people to build skills and confidence around communication, negotiation, and support-seeking when it comes to pregnancy and making informed decisions.</p> <p>Resources: Appendix C: Skill-building scenarios (PX) and answers (PX)</p>
Overview	Key points
Set up	<p>Here are some ideas for how to facilitate this activity:</p> <ul style="list-style-type: none"> • Option 1: Give one scenario between small groups or pairs and ask them to discuss. • Option 2: Read each scenario and discuss as a whole group or in pairs. <p>Consider:</p> <ul style="list-style-type: none"> • Think about the safety and wellbeing of the young people if splitting the group into pairs or small groups – who do they feel safe and comfortable talking to? • Can you adapt or add scenarios to better meet the needs of the group? (e.g. for culture, age, disability, specific issues within the group).
Introduction to activity	<ul style="list-style-type: none"> • Explain that often, young people understand the knowledge but aren't sure how to use it or to put it into practice. For example: someone might know that pulling out doesn't prevent pregnancy, but how do they talk to a partner about it? • In this activity, we are going to talk about some common scenarios about pregnancy and reproduction.
Instructions	<ul style="list-style-type: none"> • Choose Option 1 or 2 or come up with a more suitable way for the young people you support to engage with this activity. • Remind them of the group agreement or established boundaries. • Emphasise that there is no right or wrong answer. • Each advice scenario is written by a young person their age, and they need to give advice to the person thinking about the questions underneath their scenario. <p>Optional: ask them to write down their answers or key points for feedback.</p>
Feedback	<p>Ask groups or individuals to read the scenario and share their feedback to the questions on the scenario card, and/or choose some of the reflection questions from the list below.</p> <p>Suggested reflection questions:</p> <ul style="list-style-type: none"> • How did you find that? Was it easy/difficult? Why? • Do you think it's important for young people to know how to have these conversations? Why or why not? • How do you think young people feel about talking to partners, parents, or health professionals about pregnancy and reproduction?

	<ul style="list-style-type: none">• What would help young people to build their confidence and learn how to have these conversations? <p>Closing: provide signposting options, including sexual health services, support services, and website links to credible sources and organisations.</p>
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Scenario 1: Blake is worried because their period is late, and they had sex without protection two weeks ago. They haven't told anyone.

Questions to talk about:

- Is Blake pregnant?
- What advice would you give to Blake?
- If someone wants to tell a partner they are pregnant, how could they do this?

Scenario 2: Bailey's boyfriend says he doesn't like condoms, and he can just pull out before he cums. Bailey wants to use condoms.

Questions to talk about:

- Why isn't pulling out a reliable way to stop pregnancy?
- What advice would you give to Bailey?
- How can Bailey have this conversation with her boyfriend?
- What could Bailey do or say if her boyfriend refuses to use condoms?

Scenario 3: Ari is 15 and is worried something is wrong because they have never had a period. At home, Ari's parents don't talk about bodies and get embarrassed if Ari tries to bring it up.

Questions to talk about:

- Is there something wrong with Ari?
- What advice would you give to Ari?
- How can Ari have this conversation with her parents?
- Who else could Ari talk to?

Scenario 4: Ashley is thinking about using an app to track her periods and to tell her when she can have unprotected sex and not get pregnant. She's not sure if this is a good way to have sex safely or not.

Questions to talk about:

- Are tracking apps a reliable way to track if someone can get pregnant or not? Why or why not?
- What advice would you give to Ashley?
- Who could Ashley talk to about this or where could they find out more information?

Scenario 5: Jesse's friend is having a miscarriage. The pregnancy was not planned, and Jesse's friend wasn't sure they even wanted to be pregnant. They are struggling with their emotions.

Questions to talk about:

- What is a miscarriage?
- What advice would you give to Jesse's friend?
- How could Jesse support their friend? What could they say or do?
- Where can Jesse's friend go for help and support?

Scenario 6: Cameron is non-binary and has a partner, Jamie, who is trans. Both don't identify as female and don't think they need to use protection when having sex because in health class, their teacher only talked about pregnancy happening if a man and woman have sex.

Questions to talk about:

- Can someone who is non-binary or someone who is trans get pregnant? Why or why not?
- What advice would you give to Cameron and Jamie?
- Was the teacher correct when they said that "pregnancy can only happen if a man and woman have sex?" – Why or why not?
- How can Cameron and Jamie ask for help with contraception if they don't identify as female? What could they say or where could they go?

Appendix C(2): Facilitator Answers – Skill-building scenarios

*Below are facilitator answers for **knowledge-based questions** only. The skill-building and problem-solving questions are to prompt discussion and encourage critical-thinking. If you would like guidance or support on how to address these questions with young people, please [contact your local Community Health Promoter](#).*

Scenario 1: Blake is worried because their period is late, and they had sex without protection two weeks ago. They haven't told anyone.

Is Blake pregnant?

The only way to confirm a pregnancy is to take a pregnancy test. These are available from sexual health clinics, GPs, most school nurses, and can be bought at supermarkets and pharmacies.

Scenario 2: Bailey's boyfriend says he doesn't like condoms, and he can just pull out before he cums. Bailey wants to use condoms.

Why isn't pulling out a reliable way to stop pregnancy?

Pre-cum can carry sperm, and if sperm gets into the vagina, there is a chance of pregnancy. Pre-cum (or pre-ejaculate) is a small amount of fluid released from the penis before someone cums (or ejaculates). It is not something that a person can control, their body releases it by itself. Pre-cum can carry sperm, so even if someone pulls out of their partner before they cum, it's possible that pre-cum, which may carry sperm, gets inside the vagina and leads to pregnancy.

Scenario 3: Ari is 15 and is worried something is wrong because they have never had a period. At home, Ari's parents don't talk about bodies and get embarrassed if Ari tries to bring it up.

Is there something wrong with Ari?

Periods usually start during puberty between the ages of 9 and 14, but some people will get their first period earlier and others will get it later. It is common for periods to be irregular during puberty. As Ari is 15 and is worried about not having a period, it could be a good idea to check with a doctor or nurse.

Scenario 4: Ashley is thinking about using an app to track her periods and to tell her when she can have unprotected sex and not get pregnant. She's not sure if this is a good way to have sex safely or not.

Are tracking apps a reliable way to track if someone can get pregnant or not? Why or why not?

- Cycle tracking apps can be a helpful way to track periods, but they are not a reliable way to predict if you are fertile or not (i.e. if an egg has been released or not).
- Apps don't know what's happening in your body right now. They only know what's expected to happen based on the information you've entered. They can predict or guess, but they are not as reliable as using medically safe types of contraception, like the pill, condoms, or IUD.

- Fertility awareness (also known as the 'natural method' or 'natural family planning') can be a reliable form of contraception if used correctly. It involves more than tracking periods though, including taking your resting body temperature every day, and checking your cervical mucus daily.

Useful Links:

[Sexual Wellbeing Aotearoa: Fertility Awareness](#)

[Health explainer featuring Sexual Wellbeing Aotearoa Medical Director](#)

Scenario 5: Jesse's friend is having a miscarriage. The pregnancy was not planned, and Jesse's friend wasn't sure they even wanted to be pregnant. They are struggling to cope.

What is a miscarriage?

A miscarriage is when a pregnancy ends by itself. In New Zealand, 1 in 4 pregnancies end in miscarriage and most happen within the first 14 weeks of pregnancy. Miscarriage is a natural process and usually happens because something isn't right with the pregnancy (e.g. genetics or cell development). It's not usually dangerous, but if someone is worried, they should talk to a doctor or nurse.

Useful links:

<https://healthify.nz/health-a-z/m/miscarriage>

Scenario 6: Cameron is non-binary and has a partner, Jamie, who is trans. Both don't identify as female and don't think they need to use protection when having sex because in health class, their teacher only talked about pregnancy happening if a man and woman have sex.

Can someone who is non-binary or someone who is trans get pregnant? Why or why not?

Yes. As the video mentioned, sperm doesn't care about someone's gender, situation, who they are attracted to, and more, its only job is to find an egg and fertilize it. This means that if someone with a uterus and ovaries and someone with sperm have sex, and sperm gets into the vagina, a pregnancy is possible.