

# Change is Good

**TARGET GRADE:** Grade 6, Lesson 1

**TIME:** 50 minutes

**FLORIDA STANDARDS ALIGNMENT:**

- HE.6.PHC.1.2 – Identify personal health problems and concerns common to adolescents including reproductive development.

**LEARNING OBJECTIVE:**

1. Name at least one physical, social, cognitive, and emotional change young people go through during adolescence.

**LESSON MATERIALS:**

- Prepared “Change is Good” cards, enough complete sets for one third of the students in class
- Letter-sized envelopes in which to place the sets of change cards.
- Scotch-tape – one roll per small group of three students
- Pencils
- Teacher resource “Change is Good Answer Key” – one copy for teacher
- Strips of scrap paper
- Question box

**LESSON STEPS:**

**GROUND RULES**

*Note to teacher: This curriculum works best in classrooms where there’s a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student’s age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what’s expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

***Make your ground rules list with your class. The first six 6 in bold may work with your grade level.***

*Ground rules work better when students are involved in creating the list. The list doesn’t have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***

- *respect each other*
- *questions are welcome using the question box*
- *listen when others are speaking*
- *speak for yourself*
- *respect personal boundaries*
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students.

Step 2: Introduce the class by saying, "You are all at a time in your lives where your body is going through some amazing changes. For some of you, this may have started already; for others, these changes may not start for a few years yet. Some of these changes will make you feel really good about yourselves; it's exciting to see yourself growing up! Other changes may feel weird, like you're body's a bit out of control at times. As we go through the lesson, and as you experience these changes, try to always remember that all of these changes are normal. They are all important parts of growing up that everyone goes through. This time of growth is called 'puberty' and that it's started by the natural chemicals in our bodies, called 'hormones.'"

Step 3: On the board, write the words, "physical, social, cognitive, emotional" in a vertical line, one beneath the next. Say, "Although a great deal of emphasis tends to be placed on the physical changes of puberty, the changes we go through during this time are not simply physical, they are also social, cognitive and emotional. Social changes have to do with how we interact with others. Cognitive changes have to do with how we think, process information and learn. Emotional changes have to do with feelings, and our awareness of what may or may not cause us to feel certain things."

Give an example of a physical change of puberty, use one of the examples from the activity. Write that on the board next to the word "physical." Ask what they think might change socially when you start adolescence/going through puberty. If they cannot think of one, say, "You may end up spending – or wanting to spend – more time with your friends than with your family."

Next, ask what they think might change cognitively when they start adolescence/going through puberty. If they cannot think of an example, tell the class that an example of a cognitive change might be some temporary foggy in how they think – followed by a clearing of that foggy as they get older. Explain that an example of this foggy might

include forgetting to bring things with them when they go to or from school. Finally, ask for an example of an emotional change. If they cannot think of one, tell them that they may end up feeling very strong emotions out of nowhere, both positive and negative. Say, "While there's a stereotype that only girls feel these strong emotions, students of all genders usually experience this at different times during adolescence."

**Step 4:** Tell the class that you will now be doing an activity in which they will be given a number of changes people go through during adolescence and puberty and they will work in small groups to decide which category of change they are. Divide the group into groups of three, and provide each small group with an envelope containing a complete set of "Change is Good" cards, as well as one roll of tape. In each set will be four header sheets: physical, social, cognitive and emotional. Ask the students to spread the header sheets on the desk space (or floor) in front of them. They should then take out the remaining cards, read through them together and decide which kind of change each is. Tell them that once they all agree, they should tape each card on the corresponding header sheet. Remind them to look up at the board if they forget the definitions of any of the header terms. Tell them they will have about 10 minutes in which to do this work.

*Note to the Teacher: The physical change header will have the most responses attached to it; feel free to add a second header sheet, or to instruct students to tape some to the front, and some to the back.*

**Step 5:** After about 10 minutes, stop the students and ask for a group to volunteer to report back what was on the "physical" changes sheets. Make corrections as necessary using the teacher resource "Change is Good Answer Key" Have a second group read their responses to what was on their "cognitive" changes sheets, making corrections as necessary. Ask a third group to go through their responses on their "emotional" changes sheets, making corrections as needed. Ask a fourth group to go through their responses on the "social" changes sheet, also making corrections as necessary.

**Step 6: QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**ASSESSMENT:** Teachers will assess understanding through the large group activity which achieves the first learning objective. For a more individualized assessment, students can put their names on the envelope they received, place their sheets/cards in the envelope, and hand them in at the end of class.

## Change is Good Cards

Grow taller (growth spurt)	Grow hair under arms, on legs, and around genitals
Feel hungrier/Eat more	Get acne
Grow breasts	Hair texture may change
Voice deepens	Hormone surges can make your moods go up and down
Menstruation	Hips widen
Voice cracks	Peer pressure increases
Muscle growth	More interested in being with friends
Start to become interested in others more than friends/finding a boyfriend or girlfriend	Sweat starts to smell
May want to try different, sometimes risky things	May have more conflict with parents/caregiver
Anxiety and stress can increase	May feel self-conscious about how your body looks

Might have a hard time making up your mind/feel unsure	Experience more intense feelings – happy one minute, upset the next
Feel paranoid – “Everyone is looking at me!”	Might have a hard time understanding instruction the first time they’re told to you
Feel like you forget things people told you just a few minutes before	Might starting thinking, “Who am I?” – try to start defining yourself as a person
Feel kind of clumsy/trip over your own feet sometimes	May feel really strong/powerful because of how your body looks

## Change is Good Answer Key

Physical	Emotional	Cognitive	Social
<ul style="list-style-type: none"> <li>• Grow taller (growth spurt)</li> <li>• Grow hair under arms, on legs, around genitals</li> <li>• Feel hungrier/eat more</li> <li>• Get acne</li> <li>• Hair texture may change</li> <li>• Hormone surges can make your moods go up and down</li> <li>• Hips widen</li> <li>• Grow breasts</li> <li>• Weight gain</li> <li>• Voice deepens</li> <li>• Menstruation</li> <li>• Voice cracks</li> <li>• Muscle growth</li> <li>• Sweat starts to smell</li> <li>• Feel kind of clumsy/ trip over your own feet sometimes</li> </ul>	<ul style="list-style-type: none"> <li>• Anxiety and stress can increase</li> <li>• Feel self-conscious about how your body looks</li> <li>• Experience more intense feelings – happy one minute, upset the next</li> <li>• Feel “paranoid” – “Everyone’s looking at/ talking about me!”</li> <li>• May feel really strong/ powerful because of how your body looks</li> </ul>	<ul style="list-style-type: none"> <li>• May want to try different, sometimes risky things</li> <li>• Might have a hard time making up your mind/feel unsure</li> <li>• Might have a hard time understanding instructions the first time they’re told to you</li> <li>• Feel like you forget things people told you just a few minutes before</li> </ul>	<ul style="list-style-type: none"> <li>• Peer pressure increases</li> <li>• More interested in being with friends</li> <li>• Start to become interested in others as more than</li> <li>• friends/ finding a boyfriend or girlfriend</li> <li>• May have more conflict with parents</li> <li>• Might start thinking, “Who Am I?” – try to start defining yourself as a person</li> </ul>

**PHYSICAL**

**SOCIAL**

**EMOTIONAL**

**COGNITIVE**

# Gender Roles and Expectations

**TARGET GRADE:** Grade 6, Lesson 2

**TIME:** 50 minutes

**FLORIDA STANDARDS ALIGNMENT:**

- HE.6.PHC.2.6 – Determine how social norms may impact healthy and unhealthy behavior.

**LEARNING OBJECTIVE:**

1. Name at least two characteristics that are stereotypically attached to boys, and two that are stereotypically attached to girls.
2. Describe their own feelings about behaviors being ascribed to a particular gender.

**LESSON MATERIALS:**

- White board or chart paper
- Markers
- Pencils
- Homework – “Gender in the World Around Us” – one per student
- Strips of scrap paper
- Question box

**LESSON STEPS:**

**GROUND RULES**

*Note to teacher: This curriculum works best in classrooms where there’s a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student’s age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what’s expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

***Make your ground rules list with your class. The first six 6 in bold may work with your grade level.***

*Ground rules work better when students are involved in creating the list. The list doesn’t have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***

- *listen when others are speaking*
- *speak for yourself*
- *respect personal boundaries*
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students. Answer question(s) from the previous lesson.

*Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

Step 2: Ask the students, “When a baby is born, what is the first question we tend to ask?” Probe for, “Is it a boy or a girl?” Once you have heard this response, ask, “And to answer this question, where do we look – at the baby’s nose?” If students don’t feel comfortable responding (they may giggle because they know the answer but may not feel like they can say it), feel free to say, “We look at their genitals. If we see a penis, people will say ‘it’s a boy!’ and if we see a vulva, people will say, ‘it’s a girl!’ That moment will probably determine how the people in that baby’s life will interact with that child.”

Step 3: Say to the class, “Imagine for a moment that an alien landed from outer space who’s doing some research on different creatures on our planet. One of these creatures the alien is researching is called (write the word “Boys” on the board or on a sheet of flipchart paper) a ‘boy’.

How would we describe to someone who’s never encountered a boy before what boys are like?”

Ask the class to shout out answers to your prompt, “Boys are...,” telling them they shouldn’t worry about how any of them sound. Write all of the responses on the board or flipchart sheet. As you write, repeat the phrase, “boys are...” to continue to prompt the students. Continue to write until you have filled the flipchart sheet or board.

Thank the students for creating the list. Then say, “The alien appreciates all of the data you have shared. It just needs a bit more data before it heads back home. The alien would also like to be able to describe what (write the word “Girls” on the board or on a sheet of flipchart paper) a ‘girl’ is like. How would we describe to someone who’s never encountered a girl before what girls are like?” As before, ask the class to shout out answers to your prompt, “Girls are...,” telling them they shouldn’t worry about how any of them sound. Write all of the responses on the board or flipchart sheet. As you write, repeat the phrase, “girls

are...” to continue to prompt the students. Continue to write until you have either filled the sheet of newsprint or have two columns filled with words that are as close to equal in length to what was generated by the class for the “boys are” list.

Thank them for their work and let them know that the alien has left happy with all its data.

Step 4: Ask the students to look at both lists. Ask, “What do you notice about the two lists?”

*Note to the Teacher: Since these lists are generated by the students, what is shared can be different each time you do the activity. In some cases, there will be all positive things about one of the genders, and all negative things about the other. In other cases, it will be a mix.*

Possible responses depend on what is recorded on the sheets. For example, “There are a lot of negative things about girls and more positive things about boys,” or “The stuff about boys seems to focus on \_\_\_\_\_, while the stuff about girls seems to focus on \_\_\_\_\_.”

As the students identify themes they have noticed, ask, “Are there things on these lists that are stereotypes? That apply to some, but not all, boys or girls?” The students will acknowledge that, yes, this is the case.

Go to the boys list. Ask, “Are there things on this list that can apply to girls?” An example of this might be, “be athletic.” Ask, “Is it okay if a girl is [athletic; funny; strong]?” The class is likely to say it is.

Then go to the girls list. Ask, “Are there things on this list that can apply to boys?” An example of this might be, “Be sensitive.” Ask, “Is it okay if a boy is [sensitive; sweet; dramatic]?” The response to this will be mixed; girls will be more likely to say it is okay for guys to express themselves in different ways, while boys will be more likely to say certain things are not okay for boys to be or do. Lastly ask, “How does this impact students who are transgender or gender non-conforming?”

*Note to the Teacher: The most important question you can ask as you process these lists is, “Why do you think this is?” In asking them to reflect on what they generated on the lists, you help them to challenge the gender norms that have been taught to them from their earliest ages.*

*In addition, learned homophobia is likely to come up – where boys in particular will say that doing something on the “girl” list means that a boy is “gay.” Again, challenge this idea by asking, “Why?” and pointing out that they didn’t say the same about girls doing something that was on the boy list.*

Step 5: Ask the students to take out a sheet of paper. On the front board, write the phrase, “If I were a \_\_\_\_, one thing I’d do that I can’t do now is...” Say, “We’ve talked a bit about how we act – or are supposed to act or be – based on our gender. This is only the beginning of what’s a really complex topic. What I’d like you to do now is think about what you perceive would be different if you were a different gender.”

Ask them to copy down this phrase, fill in the name of a gender they are not and think about how they’d finish that sentence. Once they have come up with some ideas, ask them to complete the sentence stem with three things they perceive they’d be able to do if they were a different gender.

Ask whether any of the students would volunteer to read one of the ideas. After a few students have gone, ask them to write their names at the top and hand in their sheets.

Step 6: Explain the homework assignment: that they are to go home and do a mini scavenger hunt to find at least one thing that fulfills a stereotype for a particular gender, and one that breaks a stereotype for a particular gender. Let them know they can use technology as they wish; for example, taking a photograph using a smart phone or tablet. Explain that if they only have one gender represented in their homes, they can provide an example from a favorite tv show, book or something they've seen online. Distribute the homework sheets and close the class.

Step 7: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**ASSESSMENT:** The students' participation in the all-class brainstorm and discussion that follows will help the teacher fulfill the first learning objective. The homework assignment will measure the second learning objective.

**HOMEWORK:** "Gender in the World Around Us," a worksheet they are to complete at home in which they provide examples of gender role stereotypes where they live.

Name: \_\_\_\_\_

### Homework: Gender in the World Around Us

**Instructions:** Go around your home and find examples of things or people that fulfill gender role stereotypes – for example, girls or women doing the kinds of things the class identified as being “for girls” or boys or men doing the kinds of things the class identified as being “for boys.” You can take pictures of these and attach them to your homework sheet, or provide examples from tv shows, books, the internet or just people who live at home or visit you.

Example 1: \_\_\_\_\_

Example 2: \_\_\_\_\_

Now, find two examples of girls or women doing things that would more likely be listed on the “boy” list. Again, you can take pictures of these and attach them to this sheet, or provide examples in the space provided.

Example 1: \_\_\_\_\_

Example 2: \_\_\_\_\_

Now, find two examples where boys or men are doing things that would more likely be listed on the “girl” list. Again, you can take pictures of these and attach them to this sheet, or provide examples in the space provided.

Example 1: \_\_\_\_\_

Example 2: \_\_\_\_\_

Who do you think has more flexibility around gender, boys or girls? \_\_\_\_\_

Why do you think that is? How do you feel about it?

\_\_\_\_\_

# Understanding Boundaries

**NOTE TO THE TEACHER:** The topic of this class can sometimes lead to a student discussing abuse or assault they have experienced, or that someone else in the class or school has experienced. If a student were to share an example during class, you will have to take action in accordance with our District's Child Abuse policy. Please refer to your annual required training course for Child Abuse for additional assistance, if needed.

**TARGET GRADE:** Grade 6, Lesson 3

**TIME:** 50 minutes

## FLORIDA STANDARDS ALIGNMENT:

- HE.6.PHC.2.3 – Examine how friends and peers influence the health of adolescents.
- HE.6.PHC.2.6 - Determine how social norms may impact healthy and unhealthy behavior.
- HE.6.PHC.4.1 - Use valid and reliable information to request access to health products, services, or environments.

## LEARNING OBJECTIVE:

1. Define what a boundary is, with an emphasis on personal boundaries.
2. Demonstrate how to be clear about one's own and show respect for others' boundaries.
3. Demonstrate an understanding that no one has the right to violate someone else's boundaries, and that doing so may be against the law.
4. Name at least one resource to whom they can report sexual assault or rape.

## LESSON MATERIALS:

- White board or chart paper
- Markers
- Tape
- One letter-sized envelope
- Pencils
- Worksheet – “Setting and respecting boundaries” – one copy for every three students
- Homework – “What's Your Advice” – one per student
- Strips of scrap paper
- Question box

## LESSON STEPS:

### GROUND RULES

*Note to teacher: This curriculum works best in classrooms where there's a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student's age and developmental stage*
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- *well explained so that students are very clear about what's expected*
- *posted clearly in your classroom*
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**Make your ground rules list with your class. The first six 6 in bold may work with your grade level.**

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***
- ***listen when others are speaking***
- ***speak for yourself***
- ***respect personal boundaries***
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students. Answer question(s) from the previous lesson.

*Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

Step 2: Ask the class what they recall about the term "boundary." After they have responded, explain that a boundary is a limit placed on something. It can be an actual physical boundary – like if one were to come upon a sign that read, "Do Not Enter" – or a rule about how society works – like the law that says people can't drive cars or vote until they're a particular age.

Explain that today's lesson is going to focus on personal boundaries. These are the boundaries we set for ourselves relating to what we are and aren't comfortable with. Ask whether any students can provide examples of personal boundaries? Probe for: physical contact (hugging, kissing); keeping your personal space around you/not being crowded; language (when people use language that others find offensive, that also violates a boundary); when someone uses or borrows your stuff without asking, etc.

Ask the students to provide an example of a physical boundary they have. Then ask whether anyone has ever had someone not respect their physical boundaries, and how that felt. Finally, ask whether anyone is willing to share a time when they didn't respect someone else's boundary. If they give an example, ask them to describe why, if they can recall, they did that, how they knew they'd gone over that boundary and what the other person did in response. If no one has or is willing to provide an example, talk about when an adult family member expects a hug or a kiss and you don't feel like hugging or kissing that person yet are expected to. Another example is a younger person being told they need to share their stuff with a younger sibling when they don't want to.

Step 3: Explain, from the examples given, that clearly people don't like it when they have a boundary and someone else doesn't respect that boundary. Tell the students that as they get older and end up having a boyfriend or girlfriend, the issue of boundaries is going to have to do with sexuality, which can make them more sensitive to discuss.

Break the class into groups of 3. Tell them you are going to give them a worksheet with some scenarios on them. Ask them to complete the sheets in their groups. Distribute one sheet per triad, telling them they will have about 10 minutes in which to complete them.

Step 4: After about ten minutes of working, ask for the class' attention and ask a volunteer to read the first example. Ask different groups to share what they thought about how each person in the scenario responded, as well as what they could have done differently. As students respond, write key words on the board or flipchart paper to reinforce effective communication about boundaries. Examples of these might include: "be clear," "stop when someone says no," "be direct but try not to be mean about it," etc.

Have a different student read the second example aloud and again ask for volunteers from different groups to share their responses to the two questions. If they refer to something already written on the board, write a check mark next to that term/ phrase; if they contribute something new, add it to the list.

*Note to the Teacher: Depending on the type of class you have, you may wish to have students actually role play these scenarios at the front of the class so they can see these suggestions in action to determine what was most useful or helpful and why.*

Step 5: Ask the students to look at what's on the board and describe what themes or lessons they notice in what's written, probing for the importance of knowing and being clear about what your boundaries are, and of finding out what someone else's boundaries are and respecting them, including if they were to change.

Say, "These are pretty low-key behaviors and boundaries we're discussing – but it can get far more serious than this." Ask the students whether they have ever heard the terms "rape" or "sexual assault" before, and if so, what they understand it to be. Probe for, "it is when someone forces another person to do something sexual that they don't want to do." Explain that rape usually involves some kind of forced sex – vaginal, oral or anal – but that if a person does other sexual things to another person who didn't want to do those things, it's considered sexual assault or abuse, and is just as wrong as rape is.

Explain, "Rape and sexual assault are extremely serious because they can hurt someone physically and emotionally. They are not just wrong, they are crimes. So, if you aren't sure what another person's boundaries are – or, like Max, push it a bit to see if the other person will change their mind – you may end up committing a crime. This is another reason why clear communication is so important – if you're not sure how someone else is feeling or what they want to do sexually, just ask. If you don't like what you're doing sexually with another person, say you want to stop – and then stop."

Finally, tell the class, "The most important message I'd like you to walk away with is that the person who doesn't respect boundaries – the person who pushes it or assaults or rapes another person – is always responsible for what happens. If someone says 'no,' you need to stop what you're doing. If you don't like what someone is doing, you need to say 'no' really clearly. If someone does sexually assault or rape another person, it is never the fault of the person who has been assaulted or raped. The abuser or rapist is always in the wrong – it doesn't matter what the person who was raped was wearing, or whether they knew each other, were a couple or had done something sexual together before. No means no – every single time. Even if someone is silent, they have not given consent. Consent means a person has said 'yes' or agrees to mutually engage in a behavior."

Step 6: Take the envelope with the individual squares that contain the sexual assault hotline and website on them, and begin to walk around the room, giving one to each student. As you walk, say, "It's always best if you can talk with a parent/caregiver about something serious that's happened to you or someone you know. You can also always talk with another trusted adult, like someone here at school. But sometimes, people – both kids and adults – find it really hard to talk about sexual assault. That's why there's this hotline, which you can access by calling or going online. In the end, it doesn't matter who you talk with about this – what matters is that you tell someone so that it stops and so that person can't do it to anyone else."

Distribute the homework sheet, "What's Your Advice?" and ask them to complete it and bring it to the next class.

Step 7: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**ASSESSMENT:** The content messages of the learning objectives are provided in the teacher's lecturette; the small group activity will help the teacher assess learning objectives one and two; three will be assessed by observation during the last discussion. The homework will

provide an opportunity to assess individual understanding as they relate to objectives one and two.

**HOMEWORK:** Worksheet in which two different scenarios are given and the students have to respond directly to the situations described.

## Setting and Respecting Boundaries

Instructions: Please read each example and discuss in your groups how you think the characters should handle each situation. Elect one person to be the writer and have that person record your answers in the space provided.

1. Amy and Jesse are one of the first couples in 7th grade. Amy loves that everyone knows they're a couple, and always holds Jesse's hand in the hallway or puts her arm around Jesse. Jesse really likes Amy, but has never been a really physical person and doesn't like the public touching. The next time Amy sees Jesse at school, she wraps her arm around Jesse's waist, gives a gentle squeeze and says, "Hi!" Jesse, embarrassed, says, "You don't have to do that every time we see each other." Amy pulls back immediately, says "fine" and walks away.

How do you think Jesse handled this? What could/should Jesse have done differently?

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How do you think Amy handled this? What could/should Amy have done differently?

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2. Max and Julia spend a lot of time together now that they're a couple. When they find some private time alone, they like to kiss a lot. Max really wants to do something more, and so the next time they're alone together, he tries to pull Julia's shirt up and reach for one of her breasts. She pulls it back down and says, "No," but keeps kissing Max. He tries again, and she says, "Max, no." Max remembers seeing in a movie that if you keep trying, sometimes the other person gives in – so he tries again. Julia pushes him off, stops kissing him, and says, "I'm going home" and leaves.

How do you think Max handled this? What could/should Max have done differently?

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How do you think Julia handled this? What could/should Julia have done differently?

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# Communicating About A Sensitive Topic

**ADVANCED PREPARATION/NOTE TO THE TEACHER:** Prepare three sheets of paper, each of which should have one of the following terms and their definitions: “Passive -- when a person doesn’t stand up for themselves or say what they want in a situation,” “Aggressive – when someone says what they want in a way that doesn’t respect or even threatens the other person,” “Assertive -- when one person communicates about their wants and needs respectfully, considering the other person’s wants and needs.”

**TARGET GRADE:** Grade 6, Lesson 4

**TIME:** 50 minutes

## FLORIDA STANDARDS ALIGNMENT:

- HE.6.PHC.2.3 – Examine how friends and peers influence the health of adolescents.
- HE.6.PHC.2.6 – Determine how social norms may impact healthy and unhealthy behaviors.
- HE.6.CEH.4.1 – Determine how the community can influence and support others to make positive health choices.

## LEARNING OBJECTIVE:

1. Define three types of communication: passive, assertive and aggressive.
2. Demonstrate an understanding of assertive communication as the most effective way of telling someone they do not want to do something sexual with them.
3. Demonstrate an understanding of how to communicate assertively about one’s own decision to wait to engage in any shared sexual behaviors.

## LESSON MATERIALS:

- White board or chart paper
- Markers
- Tape
- Pencils
- Worksheet – “Be Assertive!” – one copy for every two students
- Answer Key – “Be Assertive!”
- Homework – “Be Assertive!” – one per student
- Strips of scrap paper
- Question box

## LESSON STEPS:

### GROUND RULES

*Note to teacher: This curriculum works best in classrooms where there’s a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student’s age and developmental stage*
- *agreed upon by everyone*

- *well explained so that students are very clear about what's expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

**Make your ground rules list with your class. The first six 6 in bold may work with your grade level.**

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***
- ***listen when others are speaking***
- ***speak for yourself***
- ***respect personal boundaries***
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students. Answer question(s) from the previous lesson.

*Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

Step 2: Ask the students, "Have you ever had a misunderstanding with a friend or family member about something you or the other person said?" If they respond yes, ask for some examples. Point out, as appropriate, when the examples given are examples where communication was the issue, not what was said. If there aren't any examples that reinforce that point, say, "You've given some good examples. One thing we're going to talk about today is how it's not always what we say to people, but how we say it that makes a difference in a situation."

Step 3: Reveal the first printed sheet with the word "passive" and the definition. Ask one of the students to read it aloud to the class. Say, "Let's have an example. Say someone asked you to go to a movie you really don't want to see. If you were passive, how might you respond?" Let a few students try, listening for passive responses. If they do not quite get it, provide the following examples:

“Well, I kind of don’t want to see that movie, but if you want to we can.”

“Um, maybe? I’ve kind of seen it, but I guess I could see it again.”

Point out the passive aspects of the responses. Emphasize that, in the end, what the passive person wants is not being equally considered along with the other person.

Reveal the second printed sheet with the word “aggressive” and the definition. Ask a different student to read it aloud. Say, “Let’s use the same example – someone asks you to go to a movie you really don’t want to see. How do you tell them you don’t want to see it in an aggressive manner?” After students have given a few responses, feel free to supplement with these examples:

“Um, NO – we’re not going to see that movie, we’re going to see THIS one.”

“You really want to see THAT movie? What are you, like 5 years old?”

Point out the aggressive aspects of the responses. Emphasize that, while an aggressive response may get that person what they want, they’ve hurt the other person unnecessarily. Explain that when someone responds aggressively to us, it can make us feel bad about ourselves – or, depending on how aggressive the person is being, even a bit scared. That’s not a very respectful way to treat other people.

Reveal the third printed sheet with the word “assertive” and the definition. Ask a different student to read it aloud. Say, “Let’s use the same example – someone asks you to go to a movie you really don’t want to see. How do you tell them you don’t want to see it in an assertive manner?” After students have given a few responses, feel free to supplement with these examples:

“I’m not really interested in that movie – are there any others you’ve been wanting to see? What about this one?”

“I’m not up for a movie – what else do you feel like doing?”

Point out the assertive aspects of the responses. Emphasize that it’s okay to disagree with someone or to propose something different from what they want – but how you do it is important.

**Step 4:** Ask the students whether they have ever heard the word “abstinence” before. Ask them what they have heard, or what they understand it to mean. Tell them that “abstinence” refers to deciding not to do something for a period of time. Explain that people can choose to abstain from all sorts of things throughout their lives. For example, when people go on a diet, they may abstain from eating sugar for a period of time. Then, they might start eating it again in small amounts. That lets them enjoy dessert without experiencing the negative consequences that can come from eating too much of them.

Tell the students that for this next activity you are going to focus on abstinence from sexual behaviors. That means waiting to have vaginal, oral or anal sex.

Say, “In my other example, I talked about choosing to abstain from sugar to minimize the negative ways it can affect the body. Can anyone think of reasons why someone might choose to abstain from the sexual behaviors I just mentioned?” Probe for:

- They don't want to get pregnant or get someone pregnant
- They don't want to get an STD or HIV
- They don't feel like they're old enough/ready

Note to the Teacher: Some students may say "because it's wrong" or "because it's a sin." Although these are valid reasons for some students, it is important to avoid shaming those who do have sex. Simply adding the word "some" – "some people have been taught that it's a sin, although not everyone is religious or belongs to the same religion" – can ensure that that student is heard while minimizing the judgment placed on those who may end up having a different experience.

After you have heard the reasons given, say, "These are all good reasons. Remember the example I gave about sugar? Some people who choose to abstain from eating sugar do it so that when they do start eating it again they are being careful about their health overall. That's because foods with sugar taste really good – and as long as we eat them in moderation and balance them with other healthy foods, eating sweet food, for some people, is a part of enjoying their lives.

Same thing here with sex. People who choose to abstain from sex usually end up having sex at some point in their lives. That's because sex between two people, when both people are ready physically and emotionally, have said they wanted to do it and are ready to protect themselves from unwanted pregnancy and/or disease, can feel good and bring a couple closer. But just like with other things in our lives that help us feel good, we need to think about how and when to do them.

For the purposes of this next activity, I'm going to ask you to imagine that you are in a future relationship with someone who wants to have some kind of sex with you. You know you are not ready to have sex, but you really like this person and would like them to be your girlfriend or boyfriend. We're going to practice how you can tell them you want to wait without hurting their feelings or feeling bad about your decision."

Step 5: Break the students into pairs. Ask them to pretend someone is asking them to have some kind of sex, and they don't want to. On the sheet are some sample ways of saying "no" to someone who wants to have sex when you don't. Tell them to read through each and talk about whether that response is passive, aggressive or assertive. Once they've decided, they should circle the answer on the sheet.

Then, if the statement is NOT assertive, they should work together to re-write the response to make it assertive. Tell them they will have about 10 minutes in which to do this.

Distribute the worksheets. As students work, walk around and listen to their discussions to be sure they understand the activity.

Step 6: After about 10 minutes, ask students to stop. Go through each of the answers, asking different students to share their responses.

Step 7: When there are 5 minutes left in the class, stop and tell them about the homework assignment. Explain that they are to go home and "teach" a parent/caregiver the difference between passive, assertive and aggressive communication. Then their parent/caregiver will answer a few questions on the homework sheet, which the students should bring back to

their next class session. Distribute the homework sheets and collect the completed “Be Assertive!” worksheets.

Step 8: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**ASSESSMENT:** The worksheet activity will ascertain whether students understand what passive, assertive and aggressive communication are and what the differences between them are which achieves the first two learning objectives. The homework will further reinforce and provide assessment of understanding based on how well they communicate the lessons to their parent/caregiver.

**OPTIONAL HOMEWORK:** Students are to go home and “teach” a parent/caregiver what they learned. The parent/caregiver is to complete the “Be Assertive!” homework sheet provided, which the student is to bring with them to the next class.

**Be Assertive!**

Instructions: Pretend that someone is pushing you to have sex with them, and you want to wait. The following statements are possible responses to that pressure. Circle whether each statement is PASSIVE, AGGRESSIVE, or ASSERTIVE. If it's not assertive, write a response that is.

1. I don't want to have sex with you, grow up!

PASSIVE      AGGRESSIVE      ASSERTIVE

ASSERTIVE: \_\_\_\_\_

2. Listen, having sex means taking risks – and I'm not willing to risk my health and my future like this.

PASSIVE      AGGRESSIVE      ASSERTIVE

ASSERTIVE: \_\_\_\_\_

3. If all you can think about is sex, there's something wrong with you.

PASSIVE      AGGRESSIVE      ASSERTIVE

ASSERTIVE: \_\_\_\_\_

4. I'm not ready to have sex right now. But I really like it when we kiss a lot.

PASSIVE      AGGRESSIVE      ASSERTIVE

ASSERTIVE: \_\_\_\_\_

5. I guess we could hang out at your place – I mean, I'm really uncomfortable about your parent(s) not being there, but if you really want to, I'll come with you.

PASSIVE      AGGRESSIVE      ASSERTIVE

ASSERTIVE: \_\_\_\_\_

## Be Assertive! – ANSWER KEY

**Instructions:** Pretend that someone is pushing you to have sex with them, and you want to wait. The following statements are possible responses to that pressure.

Circle whether each statement is PASSIVE, AGGRESSIVE, or ASSERTIVE. If it's not assertive, write a response that is.

1. I don't want to have sex with you, grow up!

PASSIVE, AGGRESSIVE, or ASSERTIVE?

ASSERTIVE: I don't want to have sex, but I really like you. Let's talk about what else we can do together that doesn't include sex.

2. Listen, having sex means taking risks – and I'm not willing to risk my health and my future like this.

PASSIVE, AGGRESSIVE, or ASSERTIVE?

3. If all you can think about is sex, there's something wrong with you.

PASSIVE, AGGRESSIVE, or ASSERTIVE?

ASSERTIVE: I'm curious about sex, too – but I feel like you talk about it a LOT and it makes me feel like there's something wrong with me.

4. I'm not ready to have sex right now. But I really like it when we kiss a lot.

PASSIVE, AGGRESSIVE, or ASSERTIVE?

5. I guess we could hang out at your place – I mean, I'm really uncomfortable about your parent(s) not being there, but if you really want to, I'll come with you.

PASSIVE, AGGRESSIVE, or ASSERTIVE?

ASSERTIVE: I love hanging out with you, but I'm not comfortable doing that when no one else is home. Want to come to my place instead?

Student Name: \_\_\_\_\_

Date: \_\_\_\_\_

Dear Parent/Caregiver: Today, your child learned the differences between passive, assertive and aggressive communication. Your child is going to teach this to you. Once you have learned this, please answer the following questions:

1. According to your child, what is the difference between passive, assertive and aggressive communication?

2. Of the three, which is the one that shows the most respect for both people involved?

PASSIVE      AGGRESSIVE      ASSERTIVE

3. Of the three, which one often ends up hurting the other person or making them feel bad?

PASSIVE      AGGRESSIVE      ASSERTIVE

4. Of the three, which one doesn't help you communicate what you want or need clearly?

PASSIVE      AGGRESSIVE      ASSERTIVE

Thank you for your time!

Parent/Caregiver signature: \_\_\_\_\_

# More Than Friends:

## Understanding Romantic Relationships

**TARGET GRADE:** Grade 6, Lesson 5

**TIME:** 50 minutes

**FLORIDA STANDARDS ALIGNMENT:**

- HE.6.PHC.2.3 – Examine how friends and peers influence the health of adolescents.
- HE.6.PHC.2.6 – Determine how social norms may impact healthy and unhealthy behaviors.
- HE.6.CEH.4.1 – Determine how the community can influence and support others to make positive health choices.

**LEARNING OBJECTIVE:**

1. Describe at least two characteristics of a friendship, and two characteristics of a romantic relationship.
2. Identify at least two similarities and two differences between friendships and romantic relationships.

**LESSON MATERIALS:**

- White board or chart paper
- Markers
- Pencils
- Olivia and Dylan Handout – one per every three students
- Aaron and Sophie Handout – one per every three students
- Homework: “Relationships on TV” – one per student
- Strips of scrap paper
- Question box

**LESSON STEPS:**

**GROUND RULES**

*Note to teacher: This curriculum works best in classrooms where there’s a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student’s age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what’s expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

***Make your ground rules list with your class. The first six 6 in bold may work with your grade level.***

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- *no put-downs*
- *respect each other*
- *questions are welcome using the question box*
- *listen when others are speaking*
- *speak for yourself*
- *respect personal boundaries*
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students. . Answer question(s) from the previous lesson.

*Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

Step 2: Tell the students that you are going to be talking about different kinds of relationships. Divide the class into groups of 3, and as they are getting into their trios, walk around and distribute one copy of the case study, "Aaron and Sophie," to each trio.

Step 3: Once everyone has gotten settled, ask for a volunteer to read the story aloud to the class. Tell them that they will have about 10 minutes to answer the questions on the worksheet as a group. Ask them to decide who in their group will be the recorder, and have that person put all three group member names on the top of the sheet.

Step 4: When students seem to be close to finishing, distribute the second case study, "Olivia and Dylan." Ask for a different student to read that story aloud. Ask the students to, once again, have their recorder write the group names on the top of the sheet, and then discuss and respond to the question. They will have 10 more minutes to work on that sheet.

Step 5: After 10 minutes have passed (or the students have finished working), say, "Let's start with Aaron and Sophie. What kind of relationship would you say this is?" Students will likely say, "friends" or "friendship" or "best friends;" write "friendship" on the board. Ask, "How do you know this is a friendship?" Probe for the actual characteristics. For example, someone might say, "Because they're really close?" Ask, "How do you know they are close? What about what you read here shows they are close?" Ask the students to read their responses from their

worksheets. Facilitate the discussion for these possible responses, proposing them if they are not mentioned:

- Talk about a lot of things
- Spend a lot of time together
- Are honest, even when it's hard to be
- Fight but make up
- Stick up for each other
- Support each other by going to each others' events
- Feel jealous

Once the list is created, go through each, asking the students which they'd consider to be positives, and which negatives. Put + signs and – signs next to the various characteristics accordingly. If there is disagreement, put both a plus and a minus sign, and talk about how/why each could be positive or negative. Discuss when something that seems to be a positive can turn into a negative, such as spending too much time together, or are honest in ways that end up being hurtful.

Step 6: Next, say, "Now let's look at Olivia and Dylan. What kind of relationship would you say this is?" Students will likely say, "a relationship" or "boyfriend/ girlfriend." Write the words, "Romantic Relationship" on the board. Ask the students to share the characteristics from their worksheet that describe this romantic relationship and write them beneath the words "Romantic Relationship." Facilitate the discussion for these possible responses, proposing them if they are not mentioned:

- Have their friends talk for them rather than speaking directly
- Spend a lot of time together
- Get jealous
- Feel they have the right to do/know certain things (e.g., checking the other person's phone)
- Make assumptions about what the other person is feeling
- Kiss and do other sexual things
- Find creative ways of getting noticed

Once the list is created, again go through each, asking the students which they'd consider to be positives, and which negatives. Put + signs and – signs next to the various characteristics accordingly. If there is disagreement, put both a plus and a minus sign, and talk about how/why each could be positive or negative. Discuss when something that seems to be a positive can turn into a negative, such as spending too much time together, or checking up on the other person nonstop.

Step 7: Ask the students to look at the two lists and tell you what they notice about them. Depending on what is generated, they may notice similarities or differences. For the characteristics on both the positive and the negative lists that are similar, circle them in the same-color whiteboard marker. Once they have this visual, ask the following questions:

- What do you think are the main differences between a friendship and romantic relationship?

- How do you know when you're in a friendship or romantic relationship? Does something sexual have to happen? Or can you have a boyfriend or girlfriend without doing any of that?
- Do you think it's easier having a friend or a boyfriend/girlfriend? Why? If there are these [indicate the list on the board] similarities, how is being in one kind of relationship different from the other?

Step 8: Say, "People tend to think of friendship and romantic relationships as really different – but as you just saw, there are some similarities, too. The question for everyone to think about is, would you expect a romantic partner to behave in ways – aside from sexually – that a friend wouldn't, or vice versa? Are there things you've learned from being in a friendship – such as being able to talk about what's going on – that you can use in your relationships?"

Explain the homework and distribute it to students, asking them to complete and return it next class.

Step 9: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**ASSESSMENT:** Having the students put all the group members' names on both case studies and collecting them will fulfill the first learning objective. The large group discussion after the small group work will help teachers assess the achievement of the second learning objective. The homework assignment will help to address both.

**OPTIONAL HOMEWORK:** "Relationships on TV" – instruct the students that they are to watch a tv show that has both friendships and romantic relationships depicted and complete the assignment about what they see.

## Case Study: Aaron and Sophie

Aaron and Sophie have lived down the hall from each other in the same apartment building since they were little kids. They have played together, stuck up for each other, fought with each other, played house and doctor and Xbox and American Girl dolls. Their parents gave them keys to each other's apartments, and they come and go from each place as if they had two places to live. If something bothers either of them – even if it's something the other one did – they talk about it right away. Sophie is probably the only person outside of his family who's seen Aaron cry, and Sophie has told Aaron more about her dreams for the future than she's told her own sister. They do homework together and go to each other's events at school (Aaron is in the jazz band and Sophie plays soccer). Now that they're in the 8th grade, they have started liking other people as more than friends, and both would like to have a boyfriend or girlfriend. They talk with each other about who they like or don't like, and about who they can't believe likes them. Sophie really likes someone who's in jazz band with Aaron and even though Aaron doesn't like Sophie as more than a friend, he feels a little jealous. When they hang out later in the day, Aaron tells her, even though it's really hard, about how he's feeling. Sophie tells him she's felt the same and reminds him that he's her best friend and that nothing will change that. They end up going out for pizza, where they see some other friends and they all have a really nice time together.

What kind of a relationship is this?

What five words would you use to describe their relationship, or how they are with each other?

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Looking at those words, which would you say are POSITIVE, and which are NEGATIVE? Please put a "+" next to the ones you think are positive, and a "-" next to the ones you think are negative.

## Case Study: Olivia and Dylan

Olivia is a newer eighth grade student, having just moved to the area over the summer. The first day of school, she notices Dylan, and thinks Dylan is kind of cute. Dylan sees Olivia and thinks she's cute, too. Olivia has already met a few students, so Dylan asks someone to ask those students what they know about Olivia – especially whether she likes anyone. Olivia hears that Dylan's been asking about her and decides to find excuses to walk past Dylan's locker. Dylan pretends not to see her, until one day, Olivia pretends to trip and drops her books. Dylan helps her pick them up, they start talking, and decide to hang out after school. This leads to hanging out a few more days that week, texting, and FaceTime every night, and finally, one afternoon when they're watching a movie, a kiss. Officially a couple, they spend as much time on their own as they can, kissing and touching each other. Everything's going great, although Olivia feels like other students are now interested in Dylan since they became a couple. She doesn't say anything because she doesn't want to seem jealous (even though she is). Dylan doesn't get why Olivia seems mad about something. She even asked to borrow Dylan's phone "to look something up," but then went through Dylan's texts. Dylan didn't like that but didn't say anything. Besides, Olivia kissed Dylan when she returned the phone and that always fixes things! One afternoon, Olivia says, "So... you want to?" Dylan doesn't know what she's talking about but doesn't want to show it so just nods and keeps kissing her. When Olivia starts taking off her clothes, Dylan realizes what's about to happen – but isn't sure it should. "Should I say something? Shouldn't we talk about it more first?" – all these thoughts start going through Dylan's head. Dylan's phone rings, and it's Dylan's mom saying she needs Dylan to come home. Dylan kisses Olivia and says, "You're so beautiful, I'll text you later," and runs out.

What kind of a relationship is this?

What five words would you use to describe their relationship, or how they are with each other?

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

Looking at those words, which would you say are POSITIVE, and which are NEGATIVE? Please put a "+" next to the ones you think are positive, and a "-" next to the ones you think are negative.

## Homework: Relationships on TV

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Instructions: For this assignment, you have to watch tv! Please watch a show you already know and like that has at least one friendship and one romantic relationship in it. Then complete the worksheet below.

Name of Show: \_\_\_\_\_

1. Describe one of the friendships depicted on the show. What characteristics that we discussed in class did you see shown? Were there any shown that we didn't mention in class? If so, list those below and then decide if you think those were positive or negative characteristics. What made them positive or negative?

2. Describe a romantic relationship you saw on the show. What characteristics that we discussed in class did you see shown? Were there any that we didn't mention in class? If so, do you think those were positive or negative characteristics? What made them positive or negative?

3. If you were to describe one lesson the people in the romantic relationship could learn from the ones in the friendship – or the other way around – what would it be?

# Liking and Loving – Now and When I’m Older

**TARGET GRADE:** Grade 6, Lesson 6

**TIME:** 50 minutes

## **FLORIDA STANDARDS ALIGNMENT:**

- HE.6.PHC.2.3 – Examine how friends and peers influence the health of adolescents.
- HE.6.PHC.2.6 – Determine how social norms may impact healthy and unhealthy behaviors.
- HE.6.CEH.4.1 – Determine how the community can influence and support others to make positive health choices.

## **LEARNING OBJECTIVE:**

1. List at least three non-sexual activities people can do to show others they like or love them.
2. Describe the three types of sexual intercourse, including whether/how they are related to human reproduction.
3. Define “abstinence” and its connection to pregnancy prevention.

## **LESSON MATERIALS:**

- White board or chart paper
- Markers
- Pencils
- Index cards or scrap of paper
- Exit slip – one half-sheet for each student
- Homework: “A Conversation about Sex”
- Strips of scrap paper
- Question box

## **LESSON STEPS:**

### **GROUND RULES**

*Note to teacher: This curriculum works best in classrooms where there’s a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student’s age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what’s expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

***Make your ground rules list with your class. The first six 6 in bold may work with your grade level.***

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- *no put-downs*
- *respect each other*
- *questions are welcome using the question box*
- *listen when others are speaking*
- *speak for yourself*
- *respect personal boundaries*
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students. Answer question(s) from the previous lesson.

*Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

Step 2: Start the class by writing the term “affection” on the board. Define the term as “our feelings of liking and love for others.” Ask, “Who are people we might feel affection for?” After a few examples have been given, ask the students to think about the ways they show affection for these people - how do we let people know we like or love them? What have they done to let us know they care about us?

Ask the students to think of family members, friends - or if they've started liking someone as more than a friend, that person. Tell them to write down 3 different ways they have shown affection for those people on their index card/paper. Ask them to please not show their cards to any other students.

Write an example on the board from your own life that does not disclose anything too personal. For example, “Growing up, we showed each other affection by taking the time to have meals together as a family.” Then write on the board “Share meals.”

Step 3: Split the class up into two groups and have them line up in two different lines that are perpendicular to the board in order of their birthdays. (Note: Dividing them in this way just makes for random teams. If you are worried about time, simply divide the class in half). Make sure they bring their index cards/paper with them and remind them not to share

them with others. Tell that when you say “go,” the first person from both lines is to come up to the board and write down one of the things on their list. The catch is that if someone in their own group has already written what they were going to write, they have to go to the second thing on their list; if that’s there as well, they have to use the third one on their list.

Note to the Teacher: If a student in your class is physically challenged, adjust the timing to ensure that student and the student on the other team begin at the same time. If the physical challenge completely impedes their participation, other options include having them tell another student their idea and that student will go twice. Or, the physically challenged student can serve as the time keeper.

Instruct the students that if all the examples on their card have been used, they should sit down. Then the remaining students will keep going until everything on all the cards have been represented without duplication.

Note to the Teacher: You will need to scan the individual lists on the board to ensure there is no repetition; the students will likely help you with that.

Step 4: Ask a volunteer from each team to read through their team’s list. Circle or place a check mark next to anything that appears on both lists. Process the activity with the students by asking the following questions:

“Why do we do these things for people?”

“How do these things show that we like/love other people?”

Summarize by saying, “In the end, liking and loving – as well as being liked/loved – feels good. Doing these things with or for people we care about feels good.”

Step 5: Explain to the students that when they get older, they may have a boyfriend or girlfriend. Tell them that when they are in those kinds of relationships there may be different ways they will want to express their affection or love – which may be doing something sexual together. Explain that some of these behaviors may be more appropriate for younger people (e.g., kissing, holding hands, etc.), while others are more appropriate when they are older.

Say, “One behavior that people your age should wait to do together until they are older is ‘sexual intercourse.’ How many people have heard this term before? What have you heard it means?” Have a few students respond, validating what is correct. Say, “Other behaviors include: oral sex, which is contact between one person’s mouth and another person’s genitals; anal sex, which is when a person’s penis goes inside a person’s anus; and vaginal sex, which is when a person’s penis goes inside a person’s vagina.”

Let’s think only about vaginal sex for a moment. What is something that can happen as a result of vaginal sex?” If they do not mention it, say that it can cause a pregnancy. Say, “When semen, which is the fluid that comes out of a penis that contains hundreds of millions of sperm, gets inside a vagina, there is a chance for pregnancy. In addition, vaginal or oral or anal sex can put one or both partners at risk for a sexually transmitted disease, or ‘STD.’ You’ll learn more about both pregnancy and STDs later. Just keep in mind that getting pregnant/causing a pregnancy and dealing with an STD are really big things. That’s why it is best to wait to do any of these behaviors.”

Explain that when a person waits to do something until they are older, or until some other time, it is called “abstinence.” Say, “Abstinence doesn’t mean you will never do that thing. When it comes to sexual behaviors, it’s the only 100% sure way for you to avoid getting pregnant, getting someone pregnant, or getting or giving someone an STD.” Refer back to the lists on the board. Say, “And remember, there are lots of ways you can show other people you like or love them that don’t involve doing something sexual with those people.”

Step 6: Distribute the exit slips, and ask each student to complete them and hand them in. Provide the homework, telling them that one sheet is to be completed by a parent/caregiver, and one by them, after which they should discuss their responses together with their parent/caregiver.

**QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**ASSESSMENT:** The interactive activity on the board gives every student a chance to share something they perceive shows caring/loving, while processing that activity ensures they receive additional ideas. The homework assignment will enable teachers to determine whether the second and third learning objectives were met.

**OPTIONAL HOMEWORK:** “A Conversation about Sex” worksheets. The parents’ version is to be completed by a parent/caregiver, while the students’ version is to be completed by the student. Then the two are to compare and have a conversation about their responses, after which they will, together, complete the “How’d We Do?” worksheet.

**Student Name:** \_\_\_\_\_

### **HOMEWORK: For Students: A Conversation about Sex**

Instructions: Please complete this sheet on your own without asking for your parent/caregiver's help. Make sure they have their version of the sheet, too, and that they complete theirs without asking you for help. When you are both done, compare your answers – then complete the attached, "How'd We Do?"

1. We talked today about some of the things that can happen as a result, of having some kind of sexual intercourse with another person. Keeping that in mind, how does a person know when they're ready to have sex?
  
2. We also talked today about abstinence – waiting until you're older or ready to have some kind of sexual intercourse. What do you think should happen if one person in a relationship wants to have sex, but the other person doesn't?
  
3. We also talked today about lots of different ways two people can show affection for each other that don't involve any kind of sexual intercourse. What are some things you think are okay for someone to do with their boyfriend/girlfriend in middle school?

Parent/Caregiver Name: \_\_\_\_\_

### **HOMEWORK: For Parents/Caregivers: A Conversation about Sex**

Instructions: Please complete this sheet on your own without asking your child what they intend to write. Make sure they have their version of the sheet, too, and that they complete theirs without asking you for help. When you are both done, compare your answers – then complete the attached, “How’d We Do?”

1. We talked today about the things that can happen as a result of having some kind of sexual intercourse with another person. Keeping that in mind, how does a person know when they’re ready to have sex?
  
2. We also talked today about abstinence – waiting until you’re older or ready to have some kind of sexual intercourse. What do you think should happen if one person in a relationship wants to have sex, but the other person doesn’t?
  
3. We also talked today about lots of different ways two people can show affection for each other that don’t involve any kind of sexual intercourse. What are some things you think are okay for someone to do with their boyfriend/girlfriend in middle school?

## HOMEWORK: How'd We Do?

Instructions: Please answer the following questions based on the conversation you just had. Please be sure to bring this sheet with you the next time we have class.

What did it feel like to have that conversation? Why?

Student:

Parent/Caregiver:

Did you mostly agree on your answers, disagree, or was it a mix of the two?

Mostly agree

Mostly disagreed

It was a mix

What did you do if you disagreed?

What's one thing you learned from your parent/caregiver or your child as a result of having this conversation?

Student – I learned that...

Parent/Caregiver – I learned that...

Signed: Student \_\_\_\_\_

Signed: Parent/Caregiver \_\_\_\_\_

**Exit Slip: On Your Way Out...**

Please complete the following sentence stems and hand them in before leaving class.

One new thing I learned today was: \_\_\_\_\_

---

---

Something I still have questions about is: \_\_\_\_\_

---

---



**Exit Slip: On Your Way Out...**

Please complete the following sentence stems and hand them in before leaving class.

One new thing I learned today was: \_\_\_\_\_

---

---

Something I still have questions about is: \_\_\_\_\_

---

---

# Everybody's Got Body Parts – Part One

**ADVANCED PREPARATION:** Please note that all students should receive puberty lesson for both boys and girls, even if the class is separated by sex.

Set up your computer and LCD projector to share a video at the appropriate time in the lesson. The link to the video is here and within the lesson plan:

<https://youtu.be/j9QgcCK6FKM?si=GAvZTBsHgaDSV882>

**TARGET GRADE:** Grade 7, Lesson 1

**TIME:** 50 minutes

## **FLORIDA STANDARDS ALIGNMENT:**

- HE.7.PHC.1.3 - Explain the importance of assuming responsibility for personal and reproductive health behaviors.

## **LEARNING OBJECTIVE:**

1. Name at least two parts of the female internal and external sexual and reproductive systems.
2. Describe the function of at least two part of the female internal and external sexual and reproductive systems.
3. Demonstrate a basic understanding of the menstrual cycle.

## **LESSON MATERIALS:**

- White board or chart paper
- Markers
- Pencils
- Index cards or scraps of paper
- Worksheet: “Female Reproductive and Sexual Systems”, enough for either 1/3 or 1/2 the class to have one, depending on whether you plan to have them complete it in triads or pairs
- Homework Assignment: “Female Sexual and Reproductive Systems Crossword Puzzle” – one per student
- Homework Answer Key – one copy for the teacher
- Strips of scrap paper
- Question box

## **LESSON STEPS:**

### **GROUND RULES**

*Note to teacher: This curriculum works best in classrooms where there's a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student's age and developmental stage*
- *agreed upon by everyone*

- *well explained so that students are very clear about what's expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

**Make your ground rules list with your class. The first six 6 in bold may work with your grade level.**

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***
- ***listen when others are speaking***
- ***speak for yourself***
- ***respect personal boundaries***
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students.

Step 2: Introduce the topic by explaining that students likely have learned a lot about their bodies over the years, but that now that they're older, we are going to focus a bit more on their sexual and reproductive body parts.

Step 3: Explain to the class that they are going to be put into small groups to complete a worksheet on the sexual and reproductive systems for people who were born with certain body parts and assigned "female" at birth. Tell them that the sheets have a word bank at the bottom, and that they need to make those words fit into the images provided. Have them get into their triads (you may also wish to do pairs), distribute one worksheet per triad/pair, and tell them that they have 10 minutes in which to complete it.

Step 4: Once the students have completed the activity, play the Amaze video, "Biological Female Anatomy," at <https://youtu.be/j9QgcCK6FKM?si=GAvZTBsHgaDSV882>. Tell the students to check their worksheets as they watch the video to make sure they have the answers correct.

Note to the Teacher: You might need to play the video more than once to allow students to absorb all of the information and correct their worksheets. Once they have gone through all the answers, ask whether there are any questions and answer them as time permits.

Step 5: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

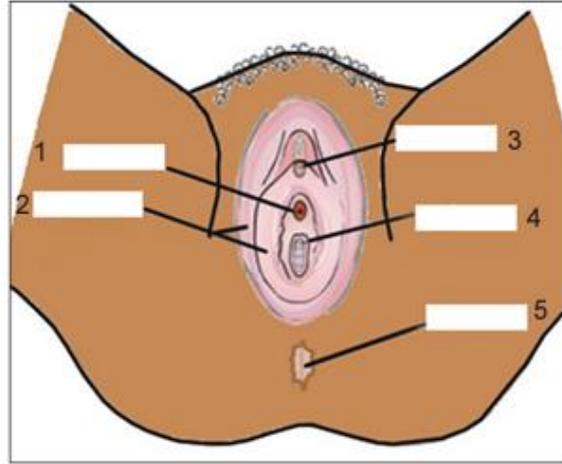
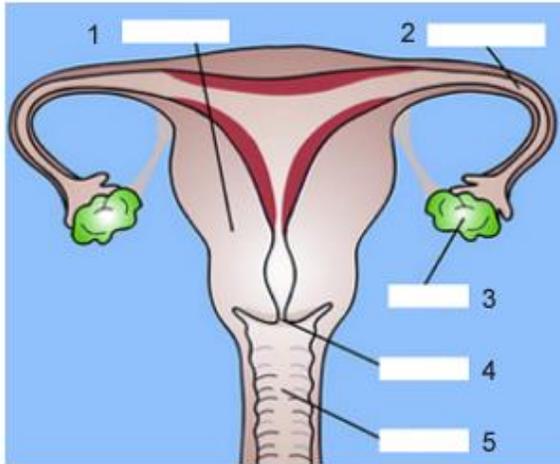
Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.

**ASSESSMENT:** The homework assignment is designed to help the teacher determine whether the learning in class was retained by the students, thus achieving the learning objectives.

**OPTIONAL HOMEWORK:** “Female Sexual and Reproductive Systems Crossword Puzzle” – to be completed by each student and handed in during the next class.

Students' Names: \_\_\_\_\_

## WORKSHEET: The Female Reproductive and Sexual Systems



(Images from [www.kidshealth.org](http://www.kidshealth.org))

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

### WORD BANK

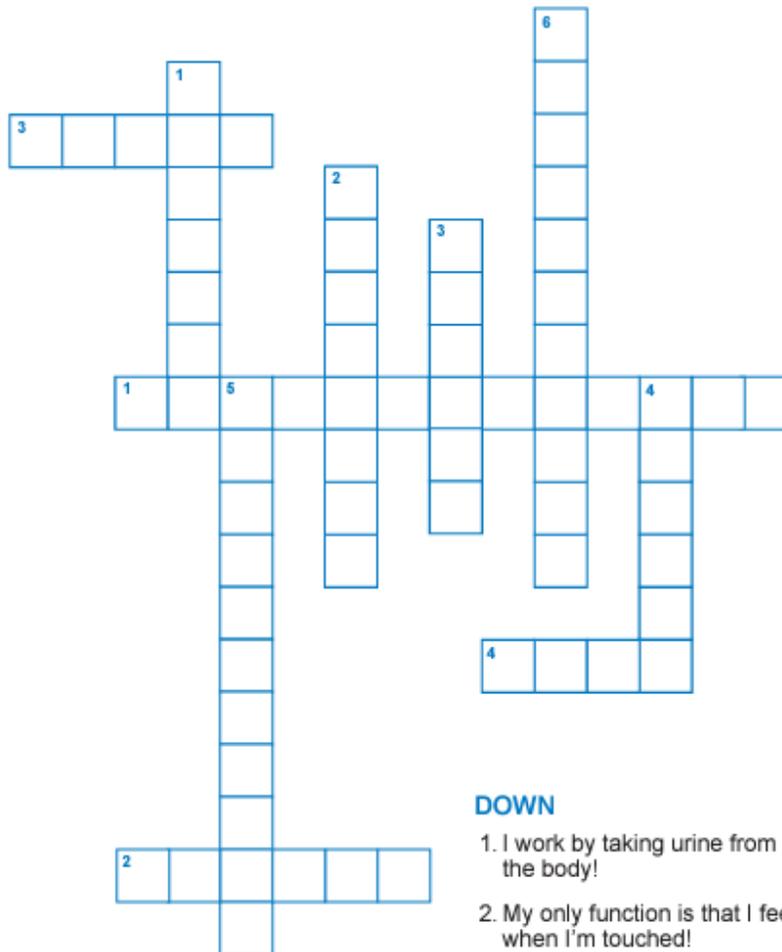
Uterus  
Ovary  
Fallopian Tube  
Cervix  
Vagina

### WORD BANK

Vagina  
Clitoris  
Labia  
Urethra  
Anus

Students' Names: \_\_\_\_\_

## HOMEWORK: The Female Reproductive and Sexual Systems Crossword Puzzle



### ACROSS

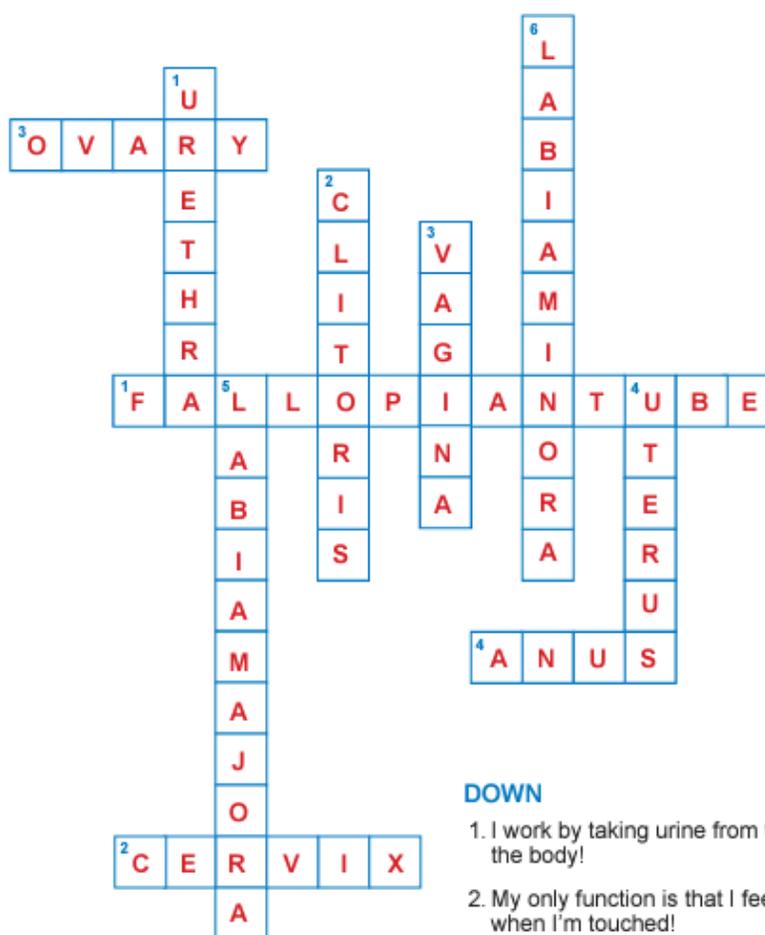
1. There are two of me - one on either side of the uterus, each connected to one of the ovaries. Eggs pass through me every month to get to the uterus!
2. I'm the opening to the uterus! When people with one of these get pap tests, the clinician takes cells from me to test them to make sure all is well!
3. I make eggs! (& no, I'm not a chicken!) There are two of me.
4. I'm the opening, just below the vaginal opening, through which poop leaves the body. I don't mind - I have an important job!

### DOWN

1. I work by taking urine from the bladder out of the body!
2. My only function is that I feel very sensitive when I'm touched!
3. Once a month, blood and tissue from the uterus pass through me; and if a person's pregnant, this is how the baby usually comes out!
4. I'm shaped like a pear and fill up with blood and other nutrients once a month. If a person gets pregnant, the fetus grows inside me!
5. I'm the skin that covers the outside of the vulva to protect everything that's underneath me - the clitoris, the opening to the urethra, and the vaginal opening!
6. I'm the two small flaps of skin on either side of the opening to the vagina; I can come in a variety of shapes and sizes!

## ANSWER KEY

### HOMEWORK: The Female Reproductive and Sexual Systems Crossword Puzzle



#### ACROSS

1. There are two of me - one on either side of the uterus, each connected to one of the ovaries. Eggs pass through me every month to get to the uterus!
2. I'm the opening to the uterus! When people with one of these get pap tests, the clinician takes cells from me to test them to make sure all is well!
3. I make eggs! (& no, I'm not a chicken!) There are two of me.
4. I'm the opening, just below the vaginal opening, through which poop leaves the body. I don't mind - I have an important job!

#### DOWN

1. I work by taking urine from the bladder out of the body!
2. My only function is that I feel very sensitive when I'm touched!
3. Once a month, blood and tissue from the uterus pass through me; and if a person's pregnant, this is how the baby usually comes out!
4. I'm shaped like a pear and fill up with blood and other nutrients once a month. If a person gets pregnant, the fetus grows inside me!
5. I'm the skin that covers the outside of the vulva to protect everything that's underneath me - the clitoris, the opening to the urethra, and the vaginal opening!
6. I'm the two small flaps of skin on either side of the opening to the vagina; I can come in a variety of shapes and sizes!

# Everybody's Got Body Parts – Part Two

**ADVANCED PREPARATION:** Please note that all students should receive puberty lesson for both boys and girls, even if the class is separated by sex.

Set up your computer and LCD projector to share a video at the appropriate time in the lesson. The link to the video is here and within the lesson plan:

<https://youtu.be/G2ciOhidKpg?si=kEoFPXJgvGBCLQiO>

**TARGET GRADE:** Grade 7, Lesson 2

**TIME:** 50 minutes

## **FLORIDA STANDARDS ALIGNMENT:**

- HE.7.PHC.1.3 - Explain the importance of assuming responsibility for personal and reproductive health behaviors.

## **LEARNING OBJECTIVE:**

1. Name at least two parts of the male internal and external sexual and reproductive systems.
2. Describe the function of at least two part of the male internal and external sexual and reproductive systems.
3. Demonstrate a basic understanding of where sperm is made and how it leaves the body.

## **LESSON MATERIALS:**

- White board or chart paper
- Markers
- Pencils
- Index cards or scraps of paper
- Worksheet: “Male Reproductive and Sexual Systems” – enough for either 1/3 or 1/2 the class to have one, depending on whether you plan to have them complete it in triads or pairs
- Homework Assignment: “Male Sexual and Reproductive Systems Crossword Puzzle” – one per student
- Homework Answer Key – one copy for the teacher
- Strips of scrap paper
- Question box

## **LESSON STEPS:**

### **GROUND RULES**

*Note to teacher: This curriculum works best in classrooms where there's a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student's age and developmental stage*
- *agreed upon by everyone*

- *well explained so that students are very clear about what's expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

**Make your ground rules list with your class. The first six 6 in bold may work with your grade level.**

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***
- ***listen when others are speaking***
- ***speak for yourself***
- ***respect personal boundaries***
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

**Step 1:** Review Ground Rules with students. Answer question(s) from the previous lesson.

*Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**Step 2:** Remind the students about the anonymous questions they contributed at the end of the last class. Take no more than a few minutes to answer as many as time permits.

*Note to the Teacher: You do not need to answer every single question; you can cluster them by category instead. Also, should you receive an overwhelming number of questions you may wish instead to make a reference sheet where you type up the questions and responses and simply distribute that to the class or answer them over a few days.*

**Step 3:** Explain to the class that just as they went through the female sexual and reproductive systems during the last class, today they are going to go through the male sexual and reproductive systems for people who were born with certain body parts and assigned "male" at birth. Put them into small groups as you did in the last class to complete a

worksheet on the male systems. Tell them that the sheets have a word bank at the bottom, and that they need to make those words fit into the images provided. Have them get into their triads (you may also wish to do pairs), distribute one worksheet per triad/pair, and tell them that they have 10 minutes in which to complete it.

Step 4: Once the students have completed the activity, click on the link to “The Male Reproductive System,” at <https://youtu.be/G2ciOhidKpg?si=kEoFPXJgvGBCLQjO>. Tell the students to check their worksheets as they watch the video to make sure they have the answers correct.

*Note to the Teacher: You might need to play the video more than once to allow students to absorb all of the information and correct their worksheets. Once they have gone through all the answers, ask whether there are any questions and answer them as time permits.*

Step 5: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

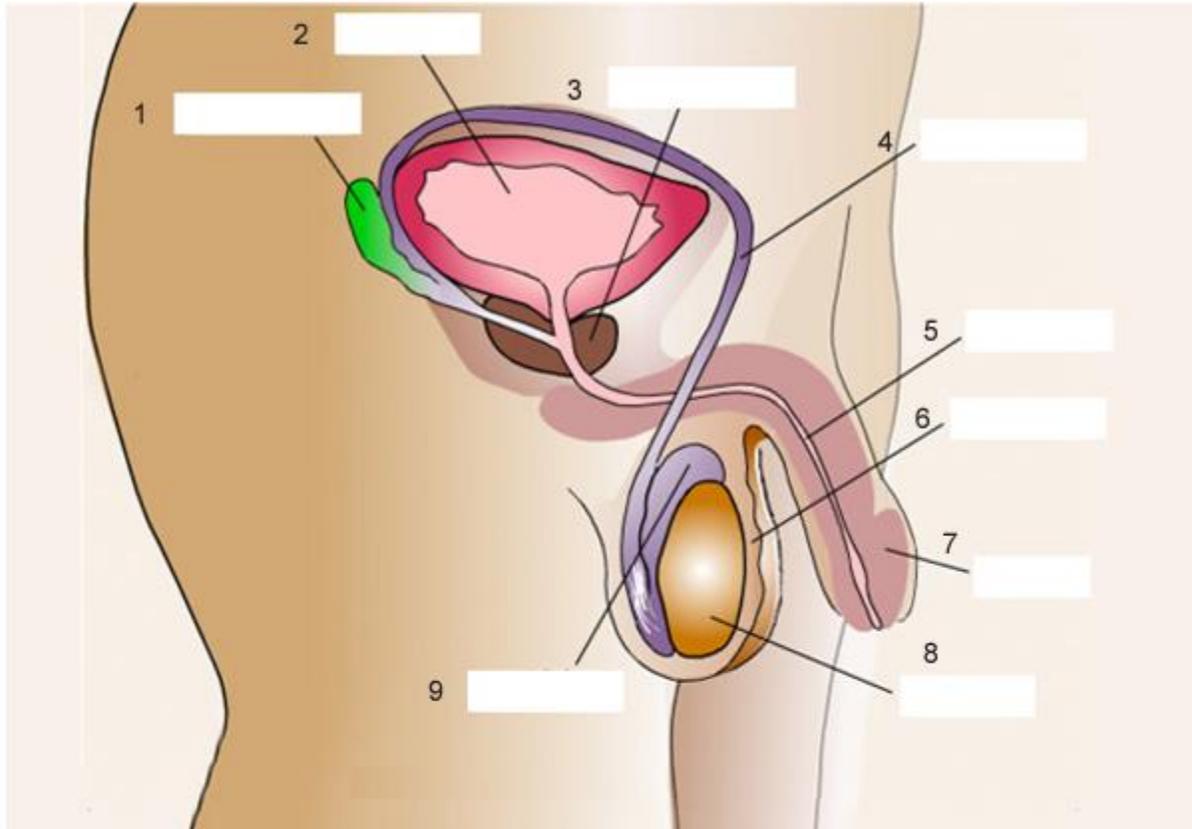
*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**ASSESSMENT:** The homework assignment is designed to help the teacher determine whether the learning in class was retained by the students, thus achieving the learning objectives.

**OPTIONAL HOMEWORK:** “Male Sexual and Reproductive Systems Crossword Puzzle” – to be completed by each student and handed in during the next class.

Students' Names: \_\_\_\_\_

## WORKSHEET: The Male Reproductive and Sexual Systems



(Image from [www.kidshealth.org](http://www.kidshealth.org))

- |          |          |          |
|----------|----------|----------|
| 1. _____ | 4. _____ | 7. _____ |
| 2. _____ | 5. _____ | 8. _____ |
| 3. _____ | 6. _____ | 9. _____ |

### WORD BANK

seminal vesicles

bladder

epididymis

testicle

penis

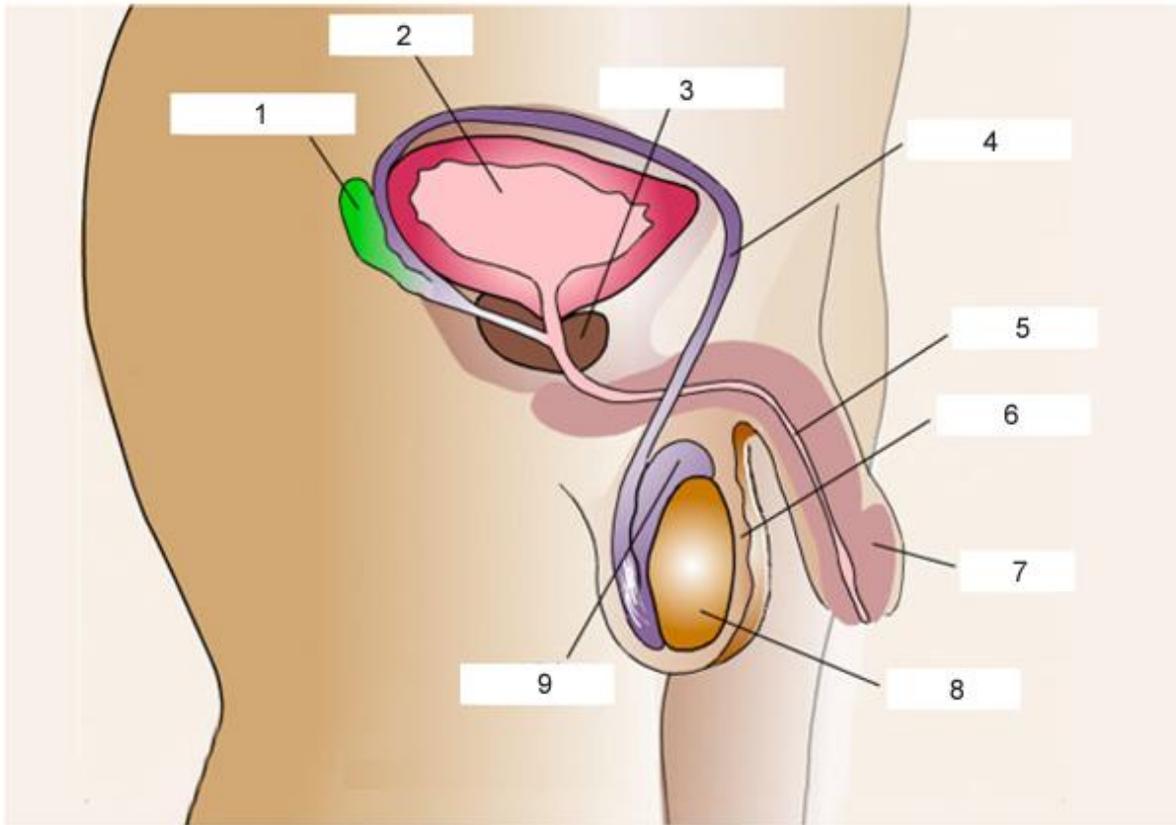
scrotum

urethra

vas deferens

prostate gland

## ANSWER KEY: The Male Reproductive and Sexual Systems



(Image from [www.kidshealth.org](http://www.kidshealth.org))

1. seminal vesicle

4. vas deferens

7. penis

2. bladder

5. urethra

8. testicle

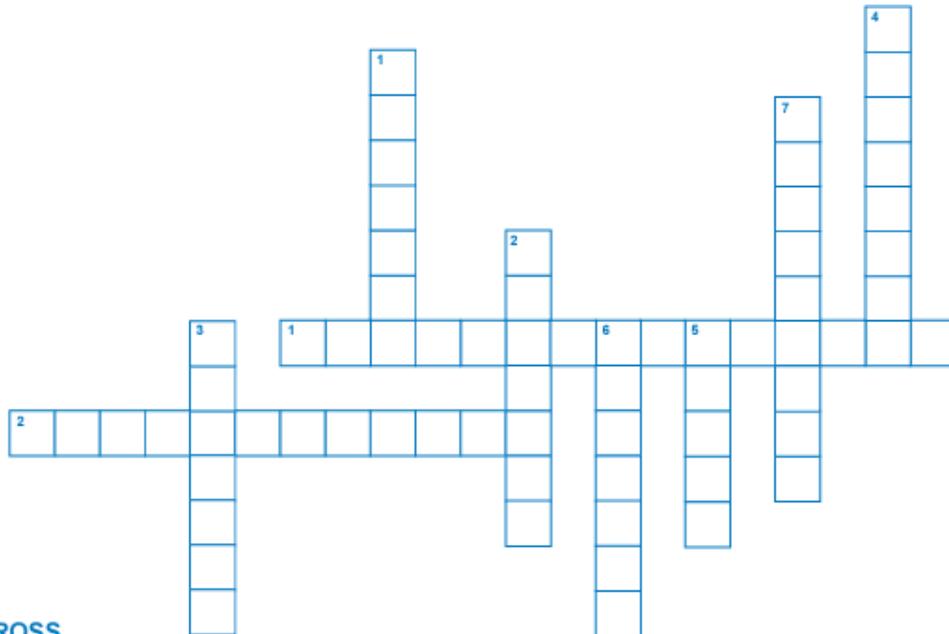
3. prostate gland

6. scrotum

9. epididymis

Student Name: \_\_\_\_\_

## HOMWORK: The Male Reproductive and Sexual Systems Crossword Puzzle



### ACROSS

1. Think of me as two bottles of energy drink; I produce fluid that gives energy to sperm to get their tails going so they can swim!
2. No semen and sperm can leave the body until I've produced a little bit of fluid that comes out of the tip of the penis, called "pre-ejaculate" or "pre-cum."
3. I'm the head of the penis! Careful, I can be pretty sensitive.

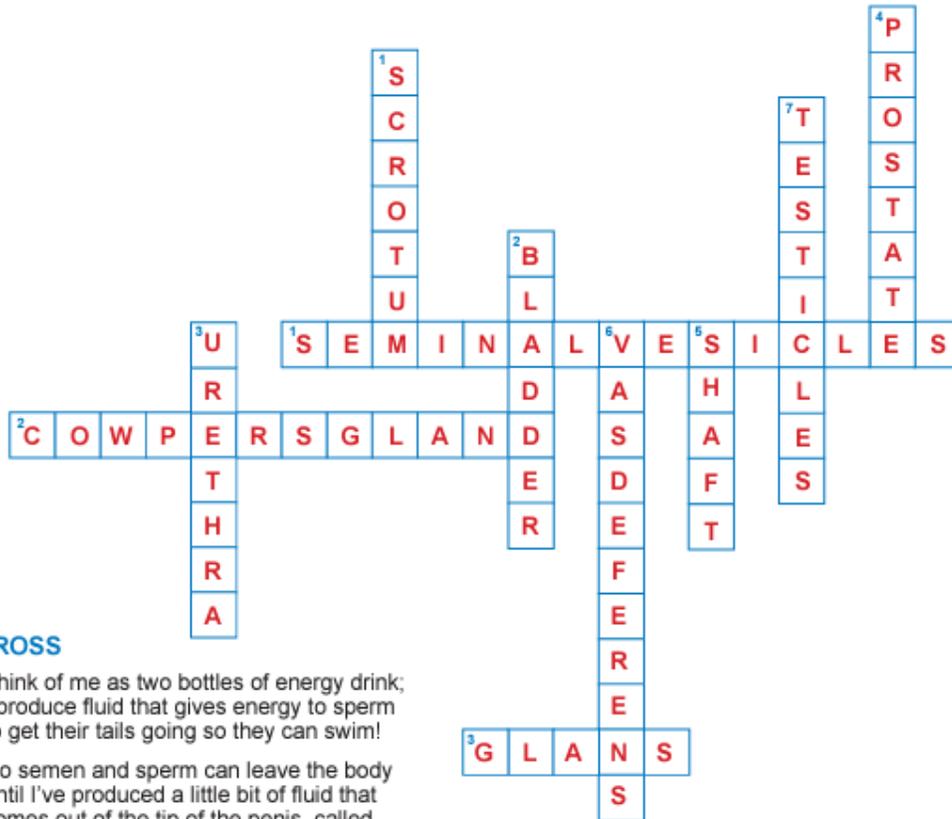


### DOWN

1. I look - and work - kind of like a sac! Inside, I have the testicles, which makes sperm. Since they have to be made at a temperature lower than 98.6 degrees, I hang outside the body behind the penis
2. When you gotta go to the bathroom, that's me letting you know! I collect urine until it's time for it to leave the body.
3. Urine leaves the body through me; sperm-filled semen leaves through me when someone ejaculates or has a wet dream. I'm busy!
4. Chestnuts roasting on an open fire... Well, I'm about the size of a chestnut, but please don't roast me! I've got to produce some of the fluid that makes up semen!
5. I'm the longest part of the penis, between the body and the head! Sometimes, I fill up with blood and get hard or erect.
6. I'm like a big water slide - I go from the testes up into the body so I can carry sperm to where it mixes with semen before it leaves the body!
7. I hang out in the scrotum - literally! There are two of me, and we're like little factories, making testosterone and sperm. When do I get a vacation??

## ANSWER KEY

### HOMEWORK: The Female Reproductive and Sexual Systems Crossword Puzzle



#### ACROSS

1. Think of me as two bottles of energy drink; I produce fluid that gives energy to sperm to get their tails going so they can swim!
2. No semen and sperm can leave the body until I've produced a little bit of fluid that comes out of the tip of the penis, called "pre-ejaculate" or "pre-cum."
3. I'm the head of the penis! Careful, I can be pretty sensitive.

#### DOWN

1. I look - and work - kind of like a sac! Inside, I have the testicles, which makes sperm. Since they have to be made at a temperature lower than 98.6 degrees, I hang outside the body behind the penis
2. When you gotta go to the bathroom, that's me letting you know! I collect urine until it's time for it to leave the body.
3. Urine leaves the body through me; sperm-filled semen leaves through me when someone ejaculates or has a wet dream. I'm busy!
4. Chestnuts roasting on an open fire... Well, I'm about the size of a chestnut, but please don't roast me! I've got to produce some of the fluid that makes up semen!
5. I'm the longest part of the penis, between the body and the head! Sometimes, I fill up with blood and get hard or erect.
6. I'm like a big water slide - I go from the testes up into the body so I can carry sperm to where it mixes with semen before it leaves the body!
7. I hang out in the scrotum - literally! There are two of me, and we're like little factories, making testosterone and sperm. When do I get a vacation??

# Reproduction Basics

## ADVANCED PREPARATION:

- Make five copies of the sperm page.
- Prepare chart paper with the following headers, one per sheet:
  1. Sexual intercourse is when . . .
  2. A pregnancy can start when . . .
  3. A pregnancy can't start when . . .
- Post the three pieces of chart paper in different places around the wall with enough room by each so that a small group of students can gather and write on them. Tape the bottom edge of each chart paper sheet up over its top, folding it in half, so that students cannot see what's written on them until you are ready to do the activity.
- Print one set of the 28-day cards, of which there are 14 pages, so you need to cut them in half to have a full set of 28.

**TARGET GRADE:** Grade 7, Lesson 3

**TIME:** 50 minutes

## FLORIDA STANDARDS ALIGNMENT:

- HE.7.PHC.1.3 - Explain the importance of assuming responsibility for personal and reproductive health behaviors.
- HE.7.PHC.3.4 - Predict the short and long-term consequences of engaging in health-risk behaviors.
- HE.7.PHC.3.9 – Practice behaviors that will maintain or improve personal health and reduce health risks, including reproductive health.

## LEARNING OBJECTIVE:

1. Describe the process of human reproduction by identifying the correct order of the steps involved with conception.
2. Define sexual intercourse.

## LESSON MATERIALS:

- Chart paper
- Markers
- Pencils
- PowerPoint: "Fertility and the Menstrual Cycle"
- Two medium-sized bouncy balls (red, rubber balls typically used in PE class are perfect if you can borrow them or most dollar stores sell them)
- 5 copies of the sperm page
- One copy of the birth control page
- Human Reproduction Answer Key – one copy for teacher
- Human Reproduction Sample Definitions – one copy for teacher
- Strips of scrap paper
- Question box

## LESSON STEPS:

### GROUND RULES

*Note to teacher: This curriculum works best in classrooms where there's a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student's age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what's expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

***Make your ground rules list with your class. The first six 6 in bold may work with your grade level.***

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***
- ***listen when others are speaking***
- ***speak for yourself***
- ***respect personal boundaries***
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students. Answer question(s) from the previous lesson.

*Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

Step 2: Say, "Today we are going to discuss human reproduction. This is a topic that some of you might know a lot about and some of you might be learning about for the first time. Let's start

by seeing what the class already knows about the topic of reproduction.” Point out the three pieces of chart paper you have hung around the room. Walk to the closest piece of newsprint and remove the tape revealing what is written on it. Explain to students that each piece of newsprint has a different sentence starter. They are to walk around and write down the first thing that comes to mind for each page. Explain that you are just looking to see what students have heard about these topics and that you expect all of their responses to be appropriate for school. Distribute the flipchart markers and tell them to be sure to write small enough to allow room for others to contribute as well. Invite students to stand up and move around to each newsprint, writing their responses. Tell students about five minutes to get to each newsprint. Once they are done, tell them to return to their seats. Ask three students to help by each bringing one piece of newsprint to post at the front of the room so the whole class can see it.

Step 3: Starting with the first chart paper, read the answers students have given, clarifying any misconceptions and confirming accurate information. If students have not written it, make sure to say, “Vaginal sex, sometimes called sexual intercourse, is when an erect penis is inserted into a lubricated vagina. If this results in ejaculation, semen is released from the penis into the vagina. Semen contains hundreds of millions of sperm, so if an egg is present, a sperm and that egg can unite. That’s called ‘fertilization.’ The fertilized egg then keeps going and, if it implants into the wall of the uterus, it becomes a pregnancy. If it doesn’t, it results in a menstrual period. We’ll talk more about this in a minute.” Continue in this manner with the other two pieces of chart paper making sure to provide the appropriate information and/or definitions as needed.

[Note to the Teacher: If you need some help providing age-appropriate definitions, please use the Human Reproduction Sample Definitions at the end of this lesson.](#)

Step 4: Next say, “Now that you have some general definitions for key terms related to human reproduction, I want to make sure you understand the steps involved from start to finish. Start the PowerPoint “Fertility and the Menstrual Cycle” and review each phase of the menstrual cycle by saying the following:

- Slide 1 – “This is a female’s uterus. You can see that it’s in the abdomen next to the stomach. The uterus is where menstruation occurs.”
- Slide 2 – “The average menstrual cycle is generally about 28 days but really varies from person to person, sometimes being much shorter or longer than 28 days. Someone can get their first period anywhere between nine and fifteen years old and generally it will take the body a couple of years to figure out what will be a typical cycle.”
- Slide 3 – “Each month an ovary releases an egg, also called an ovum, into the fallopian tube. The trip down the fallopian tube usually takes a couple days.”
- Slide 4 – “While the ovum is on this journey, if it unites with sperm, the egg becomes fertilized and may implant in the lining of the uterus. Once a fertilized egg implants inside the uterus, a pregnancy has begun. If the pregnancy continues, nine months later a baby will be born.”

- Slide 5 – “If there are no sperm in the fallopian tube while the ovum is there, then the ovum dissolves and is reabsorbed by the body. The ovum is only able to unite with a sperm for a couple of days before it dissolves.”
- Slide 6 – “In order to prepare for a potential pregnancy, the lining of the uterus grows each month to create a good environment for a potential fetus.”
- Slide 7 – “If the egg does not unite with a sperm, hormones tell the body to prepare for menstruation, also called having a period.”
- Slide 8 – “Menstruation is when the body rids itself of the extra lining inside of the uterus because there was no fertilized ovum. About two tablespoons of blood and some tissue slowly leave the vagina during a menstrual period.”

Step 5: Say, “Since the average menstrual cycle is 28 days, I have 28 cards and each one represents one day of the cycle. I am going to hand out a card to each of you. Once you have your card, please tape them to the board in the correct order. Then we will look at the menstrual cycle again, this time starting with menstruation as Day 1.” Distribute one card to each student and have them use the masking tape to post them on the chalk or white board.

*Note to the Teacher: If you have more than 28 students in your class, have students pair up to work on one card together. If you have less than 28 students, give a few students two cards to work on.*

Step 6: Say, “Now we can see an average 28 day menstrual cycle with Day 1 being the first day of her period. Next I’d like to show you when a person is most likely to become pregnant if sperm and an egg unite. Each of these two bouncy balls will represent one day when the egg is in the fallopian tube and able to unite with a sperm.” Ask for two volunteers and give each one a bouncy ball. Have one student stand under Day 14 and the other student stand under Day 15. Say, “Now whenever the egg is traveling through the fallopian tube pregnancy can happen if there are sperm present. Remember from the PowerPoint that the egg or ovum is only alive for about two days. So these two bouncy balls will represent when the egg is traveling and able to unite with a sperm.”

Step 7: Next, ask for five volunteers and give each one copy of the sperm page and say, “Sperm can live inside another person’s body for up to five days. So let’s see what happens if there is sperm in the uterus during different points of the menstrual cycle.” Have each student with a sperm page stand under Days 24- 28. Say, “You can see that sperm in the body during this time is not as likely to start a pregnancy because it’s less likely there is an egg around.”

Next, have the people holding the five sperm pages move to stand under Days 11 – 15. Say, “You can see how if there is sperm present either BEFORE or DURING the same time when the egg – the bouncy balls in our case – are present, that is the time when a pregnancy is most likely to happen.” Lastly, ask for one other volunteer and give them the birth control page. Ask them to stand between the students holding the bouncy balls and the students with the sperm card to physically block the two from meeting. Ask students, “What is the birth control doing?” Take some responses and make sure to tell students the following, “Birth control, if used correctly and consistently, prevents the sperm and egg from uniting by either blocking the sperm or preventing an egg from leaving the ovary in addition to other ways.”

Step 8: Have the volunteers return the bouncy balls, birth control and sperm pages to you and return to their seats. End by asking, "What does this tell you about when pregnancy is most likely to happen?" Take a few responses and clarify any lingering misconceptions. End the lesson by saying, "Since this is just a typical menstrual cycle and we know that everyone is unique, if someone chooses to have vaginal sex but does not want to become pregnant/get their partner pregnant, it is most effective to either postpone vaginal sex or to use an effective form of birth control consistently and correctly." Distribute and explain the homework.

Step 9: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**ASSESSMENT:** The card line up activity will meet the first learning objective while the stem sentence activity and discussion will meet the second learning objective.

## **Teacher Resource: Human Reproduction Sample Definitions**

The following are key terms for the explanation of human reproduction and a sample definition appropriate for use with seventh graders.

Please note this is for reference by the TEACHER ONLY and should NOT be distributed to your students.

### **Vaginal Sex (sometimes called sexual intercourse)**

Vaginal sex, sometimes called sexual intercourse, is when an erect penis is inserted into a lubricated vagina. If this results in ejaculation, semen is released from the penis. Semen contains hundreds of millions of sperm, one of which is needed to cause a pregnancy. If the couple is not using a contraceptive method, like condoms or the pill, the sperm in the semen can join with an egg, if one is present. If it implants in a uterus, it creates a pregnancy.

### **Conception**

The beginning of a pregnancy. A sperm and egg must first join and implant into the lining of the uterus to result in a pregnancy. A fertilized egg cannot survive without implantation.

### **Human Reproduction**

Human reproduction is a cycle in which a sperm and egg join and then implant into the lining of the uterus. After approximately nine months of growth, a baby is born.

### **Implantation**

The process by which a fertilized egg attaches itself to the lining of the uterus. Once an egg is fertilized it doesn't always implant, but may leave the body with menstrual blood and tissue.

### **Fetus**

The medically accurate name for the developing pregnancy prior to birth.

### **Pregnancy**

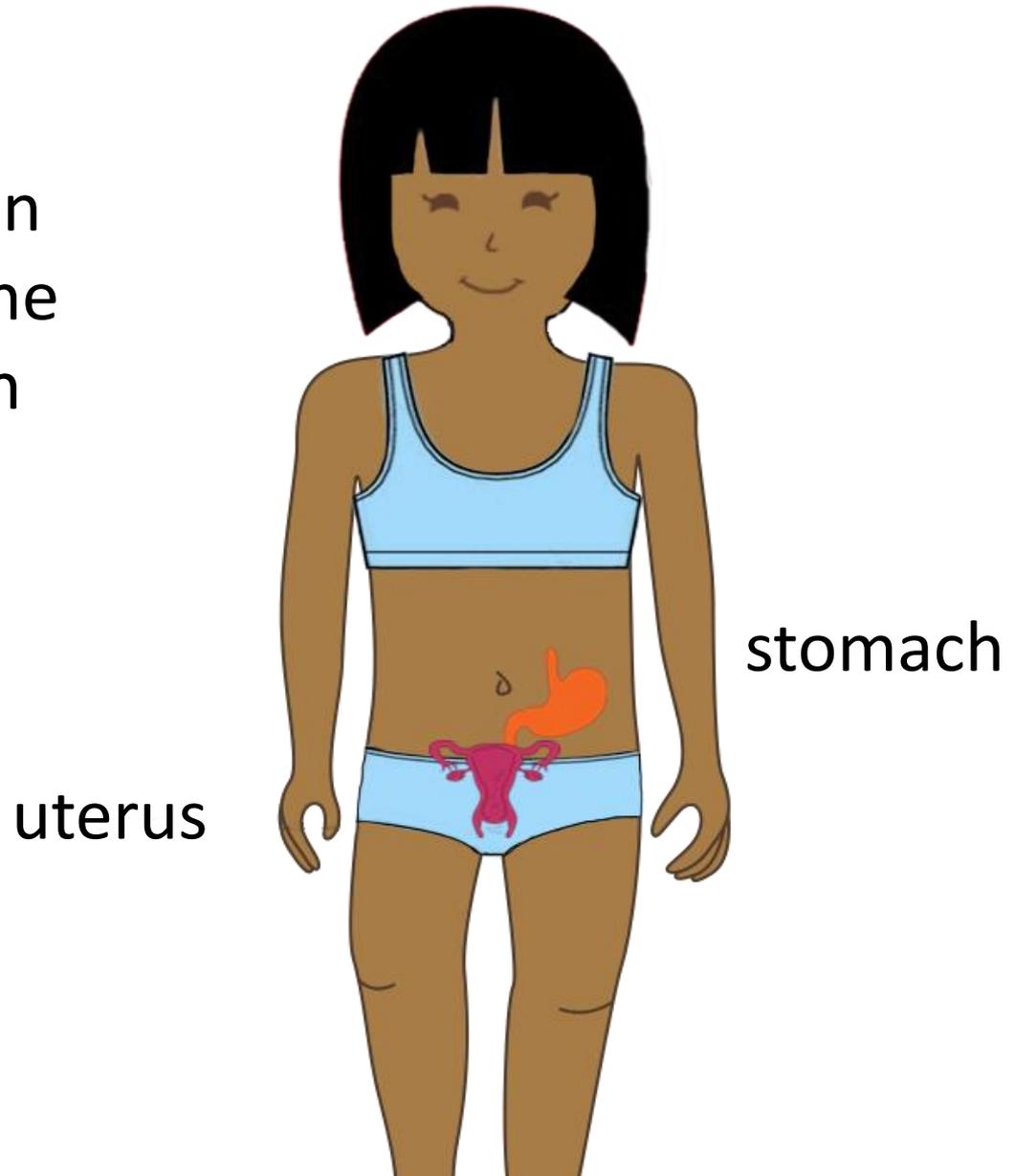
Once a fertilized egg successfully implants in the lining of the uterus, a pregnancy has begun. A typical pregnancy lasts for 40 weeks.

# Reproduction Basics

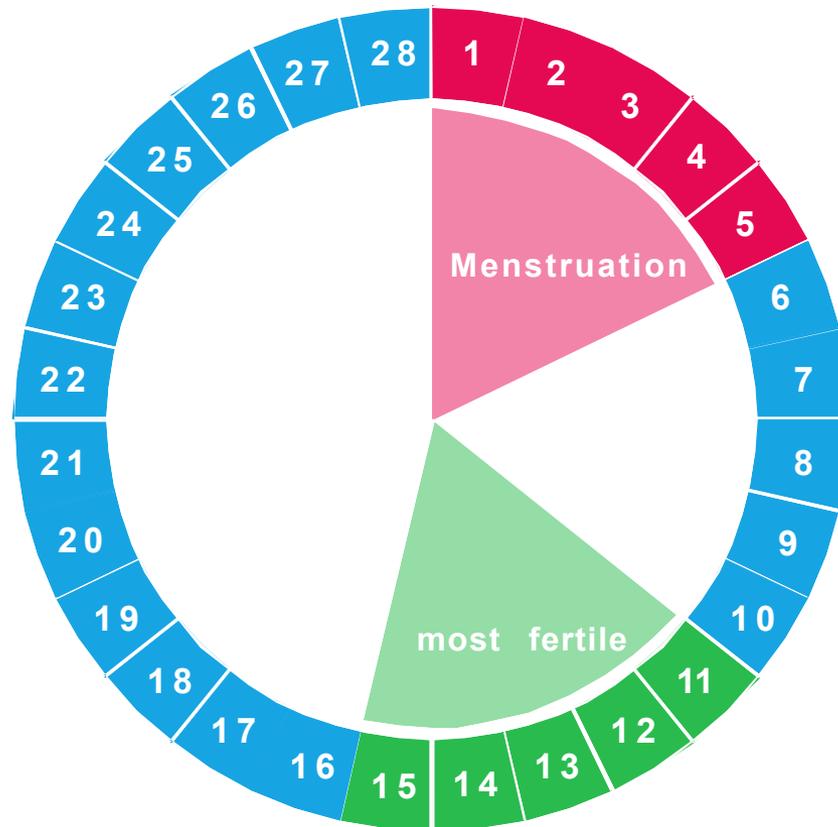
A 7th Grade Lesson

# Fertility and the Menstrual Cycle

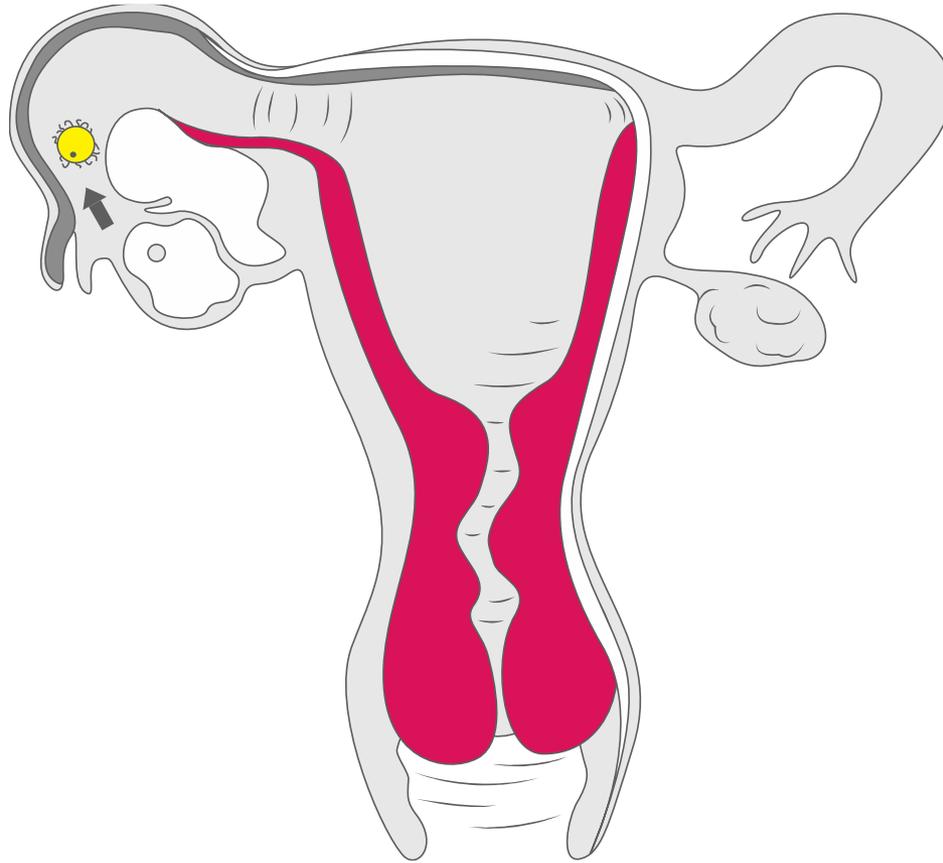
A female's uterus is located in the abdomen next to the stomach. The uterus is involved with menstruation.



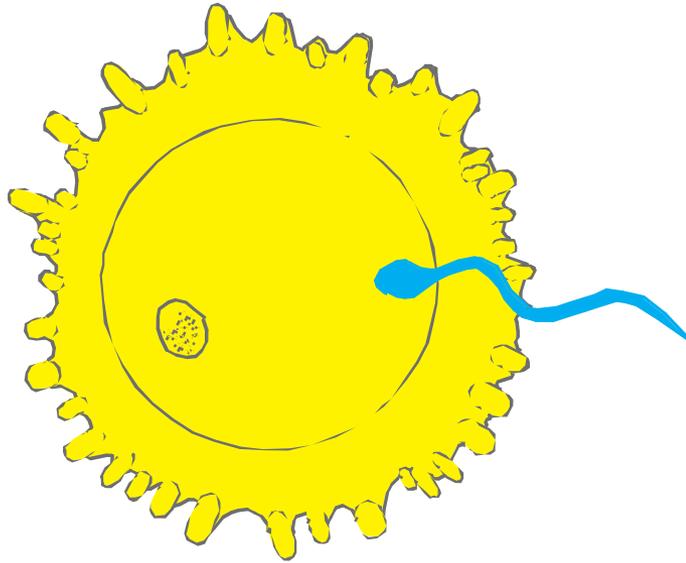
- Average menstrual cycle is about 28 days, but varies widely from person to person.
- Menstrual periods usually start between the ages of 9-15.



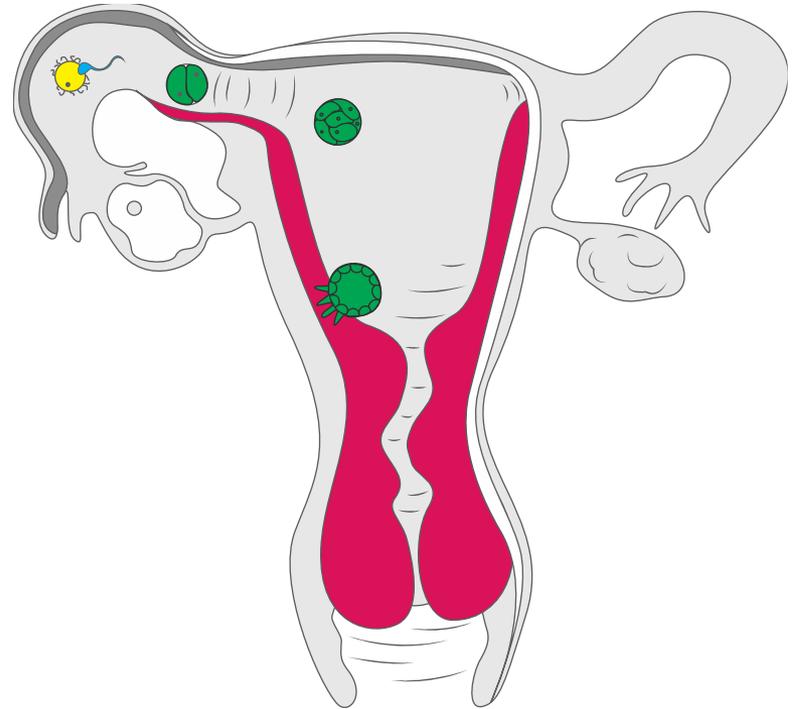
Each month, an ovary releases an ovum,  
or egg, into the fallopian tube.



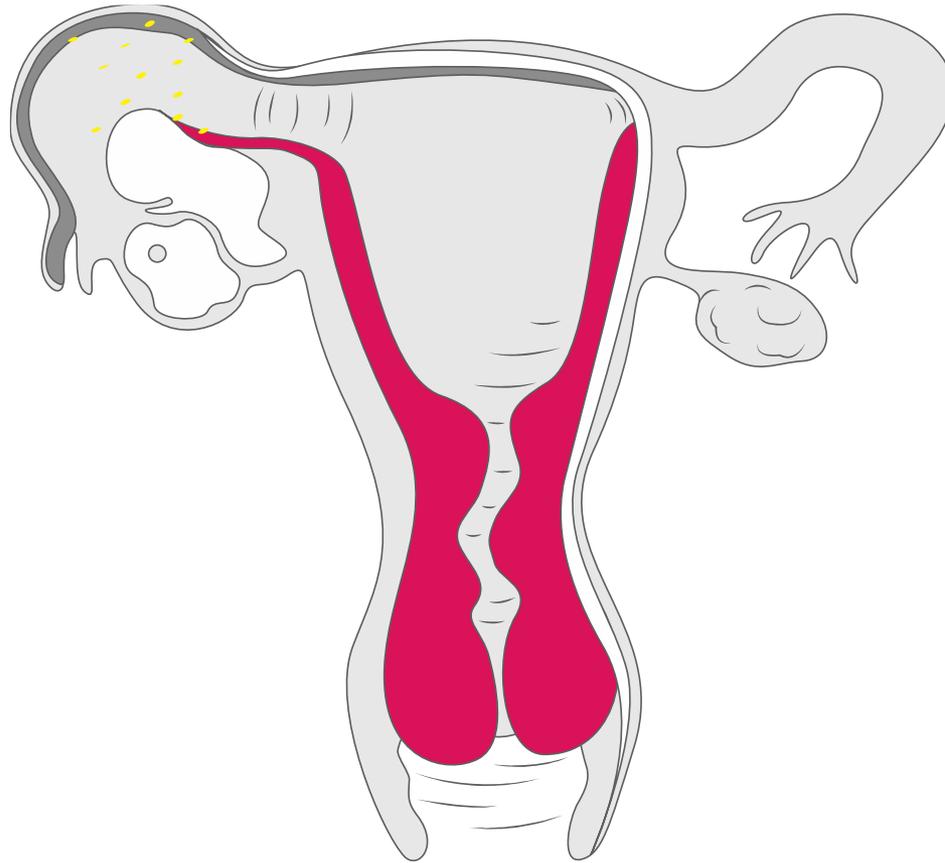
While it's traveling, if the ovum unites with a sperm and implants in the uterus a pregnancy can begin.



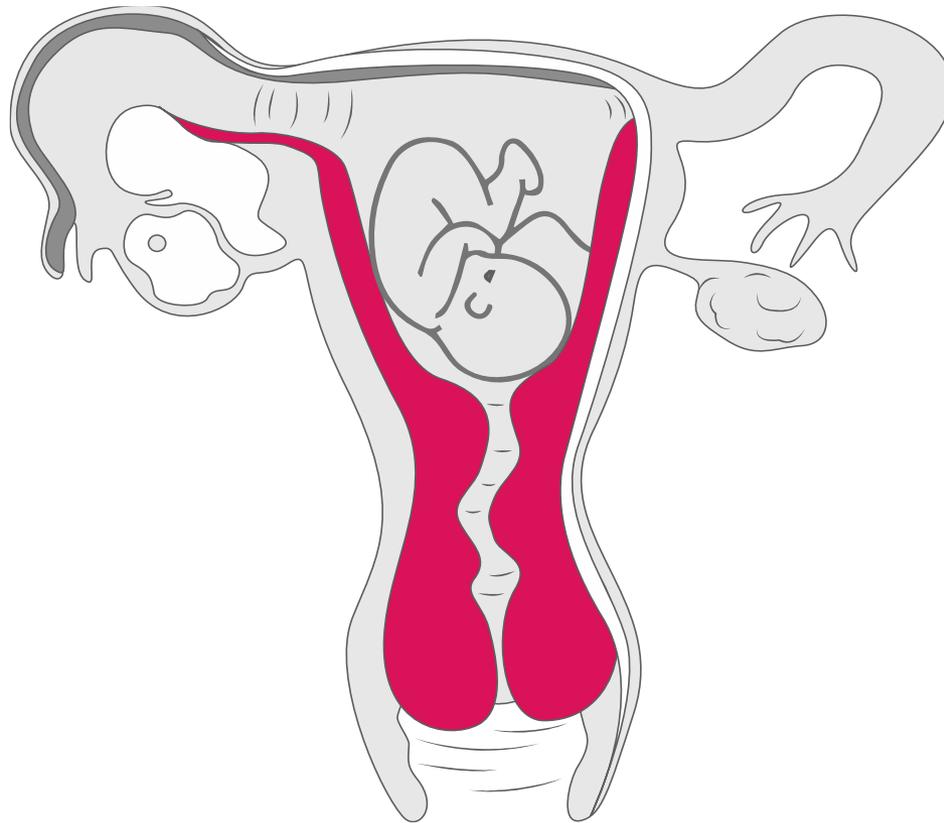
FERTILIZATION



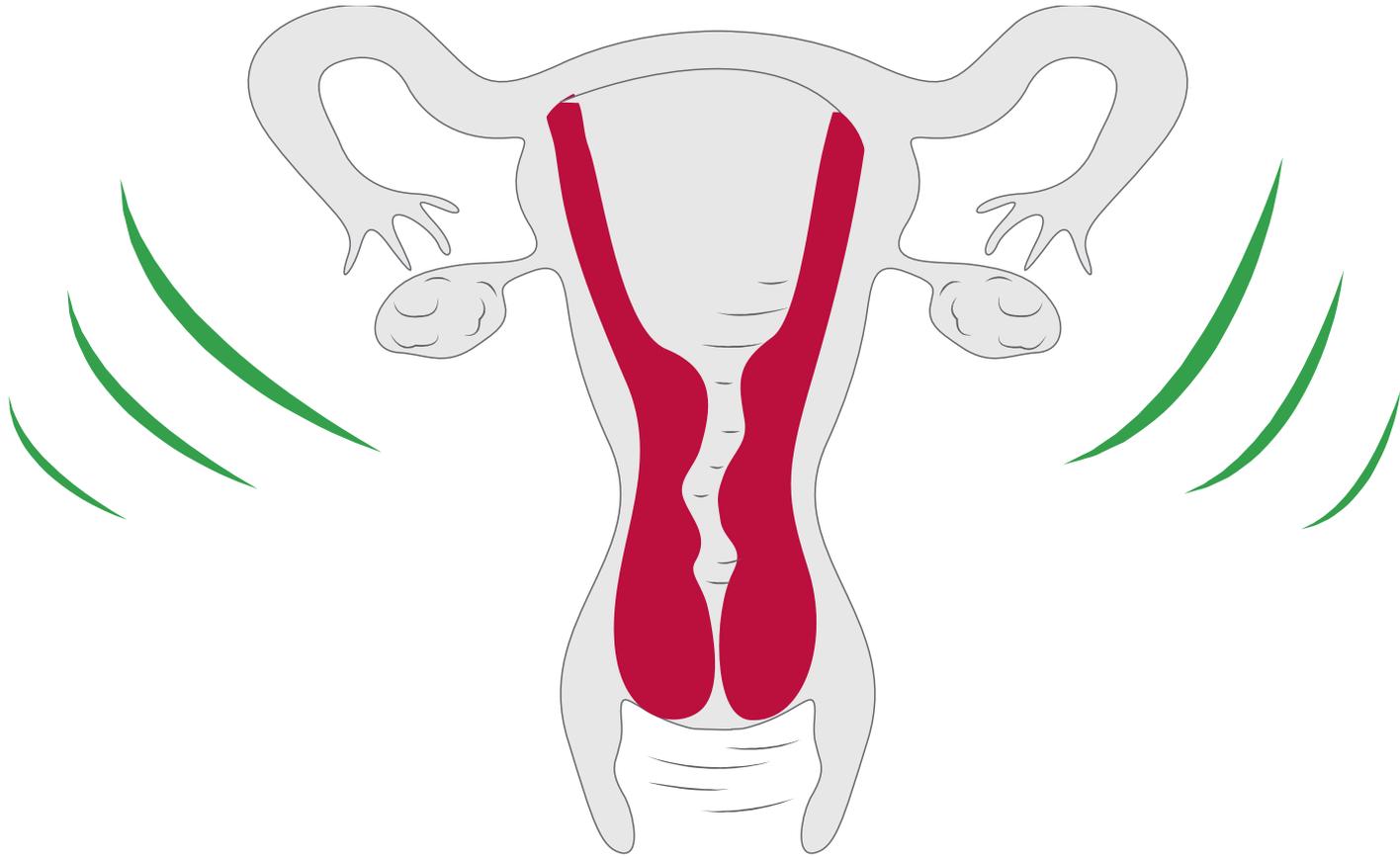
If the egg does not unite with a sperm within 24-48 hours, it will dissolve and be reabsorbed by the body.



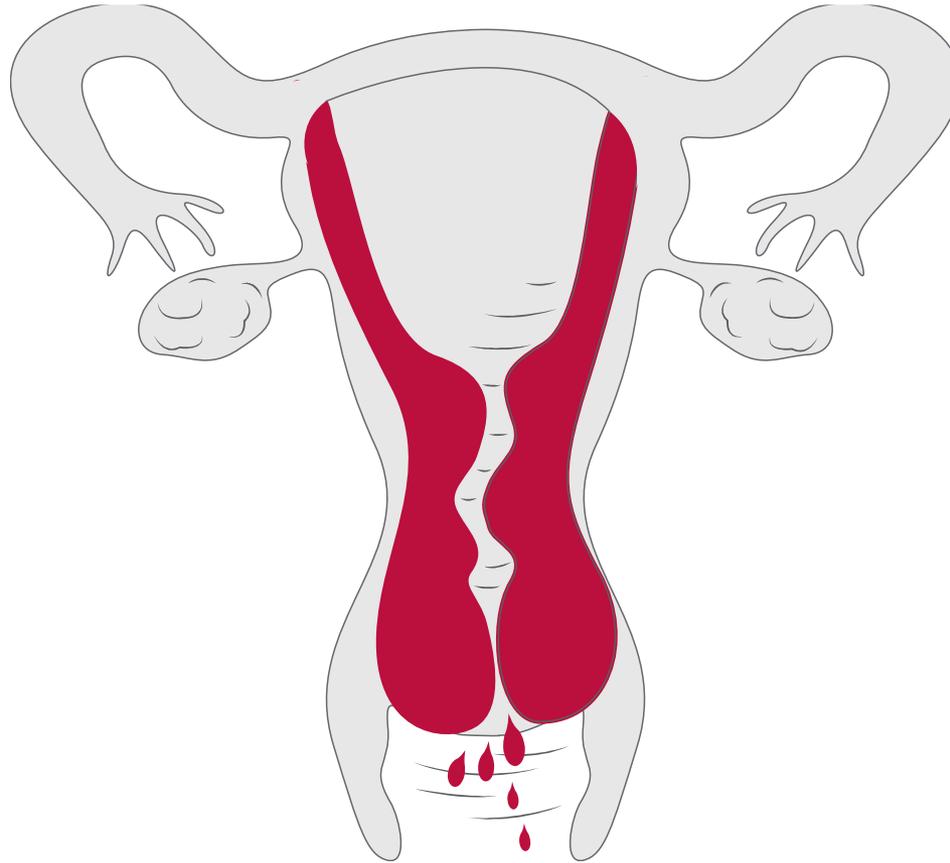
To prepare for a potential pregnancy, each month the uterus grows a thick lining to create a good environment for the potential fetus. That is what a baby is called before it's born.



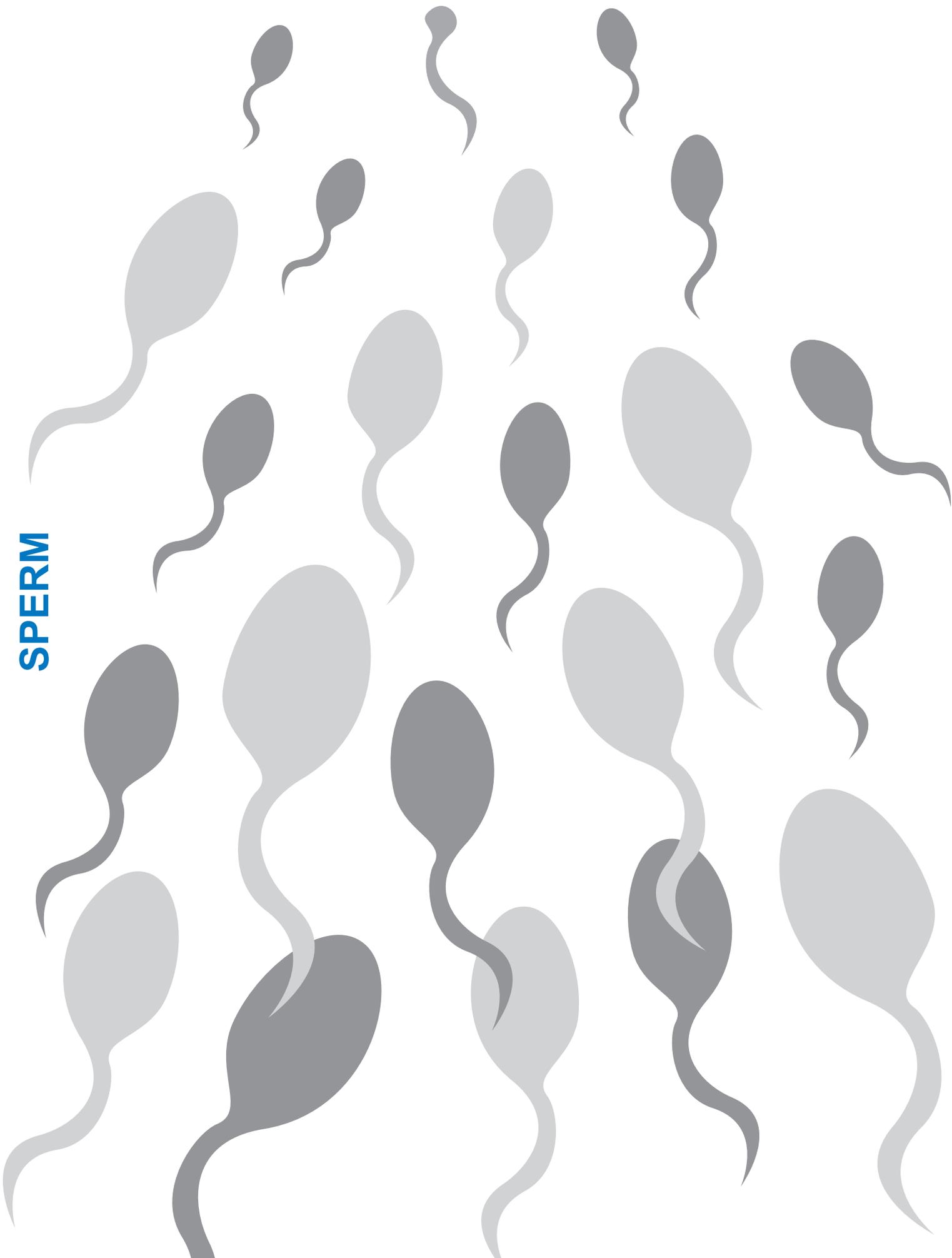
If the egg and sperm do not unite, hormones signal the uterus to prepare to shed the lining causing someone to menstruate or have “a period”.



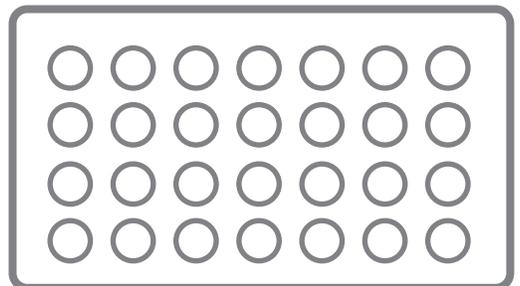
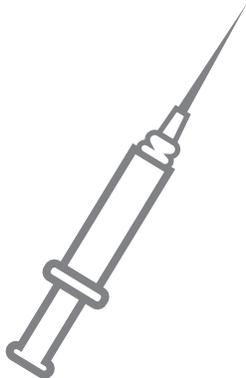
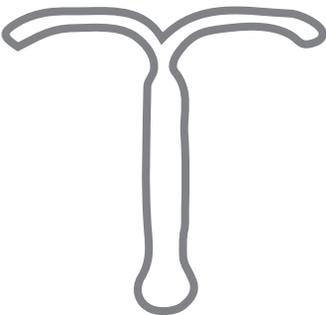
Menstruation, or having “a period” is when the uterus rids itself of the lining because there was no fertilized egg.



**SPERM**

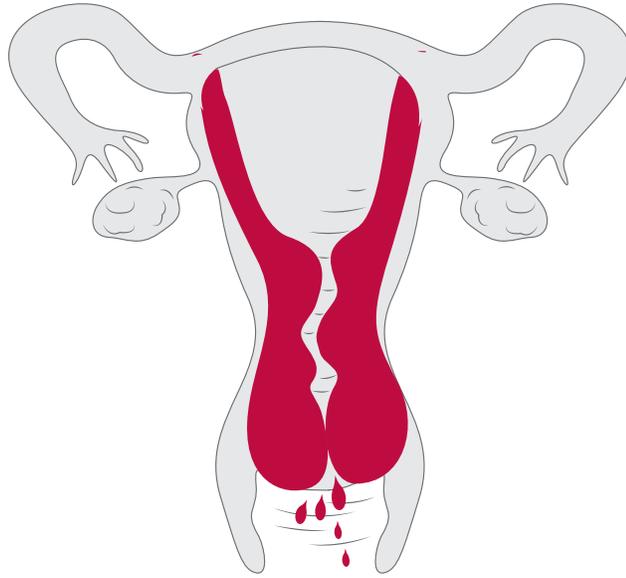


# BIRTH CONTROL



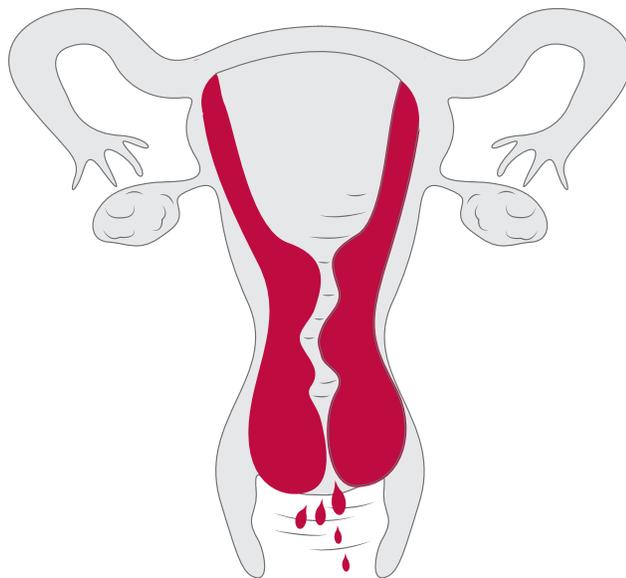
1

Menstrual period begins



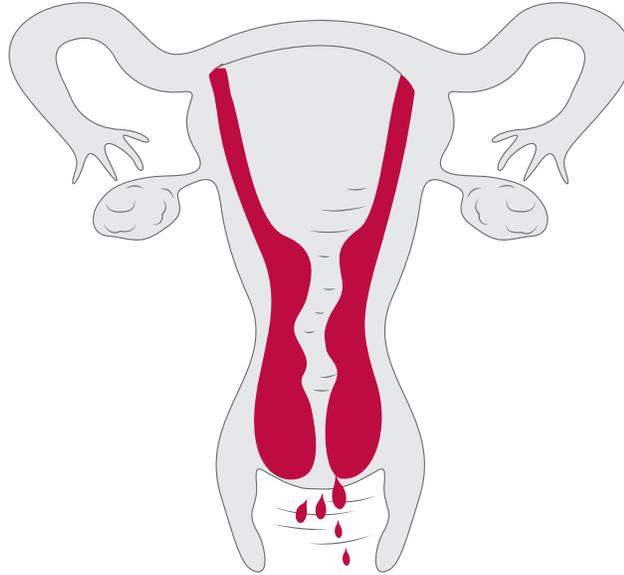
2

Menstrual period continues



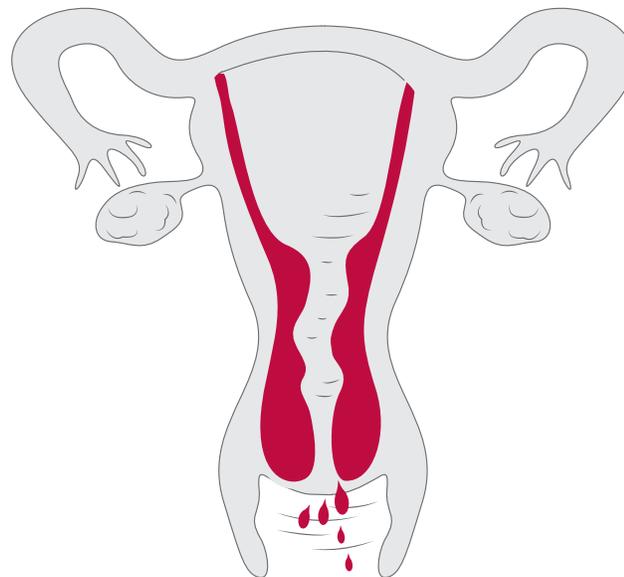
3

Menstrual period continues



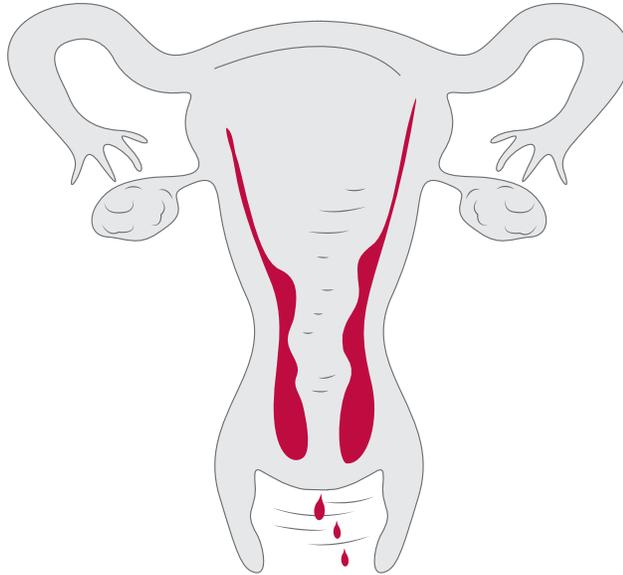
4

Menstrual period likely continues



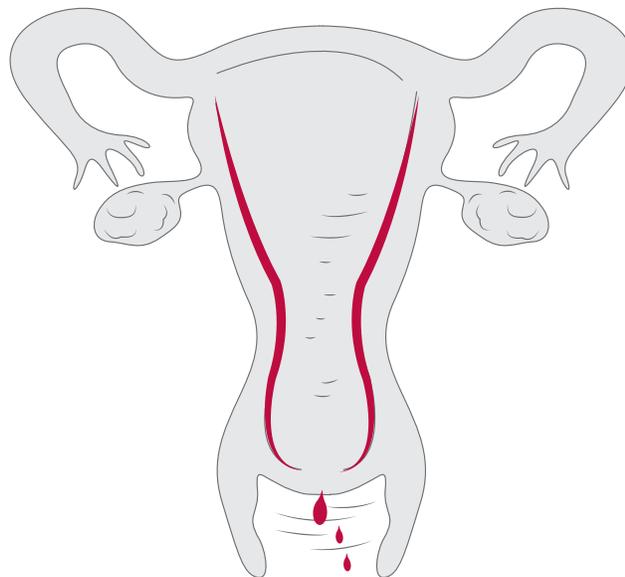
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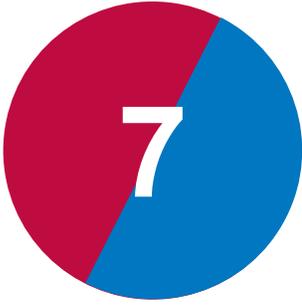
Menstrual period may continue/may be finishing



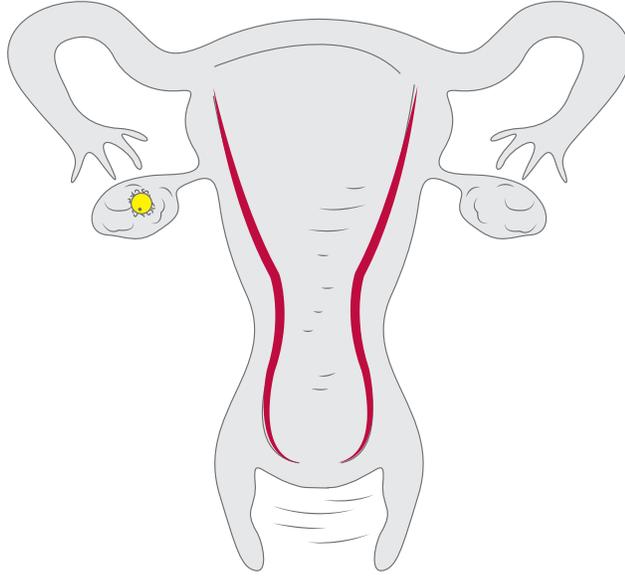
6

Menstrual period ending/ended and lining of uterus starting to grow again

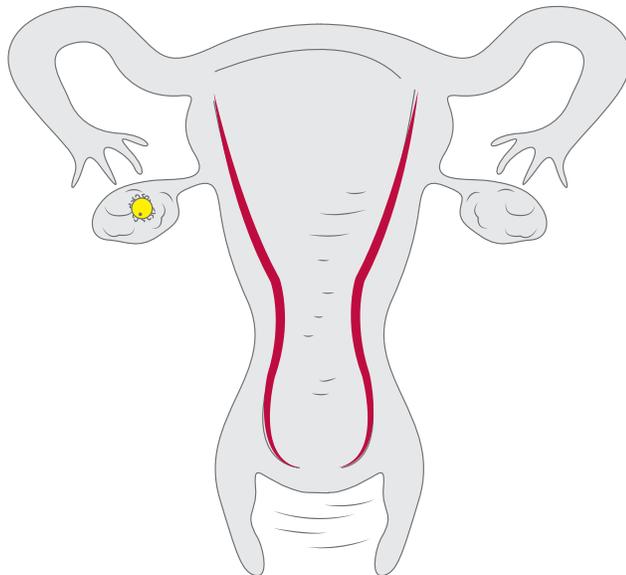




Menstrual period ending/ended and lining of uterus starting to grow again

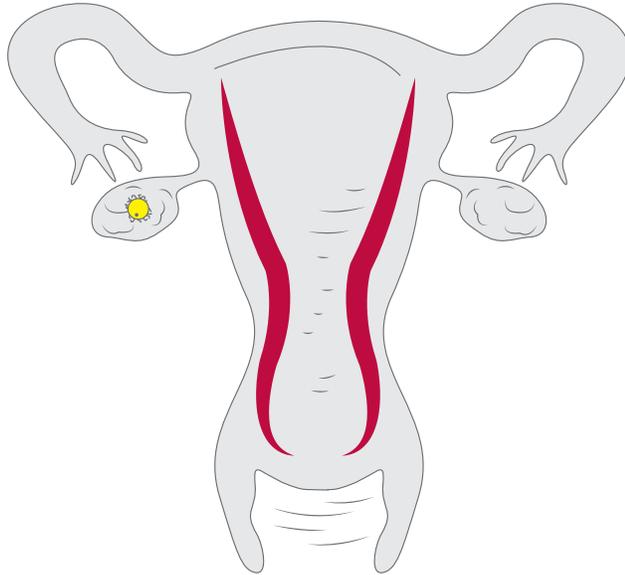


Lining of uterus continues to grow and one egg is preparing to be released



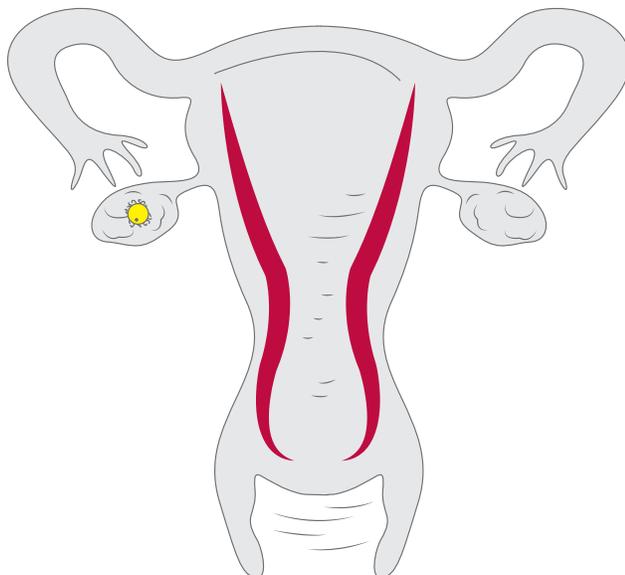
9

Lining of uterus continues to grow and one egg is preparing to be released



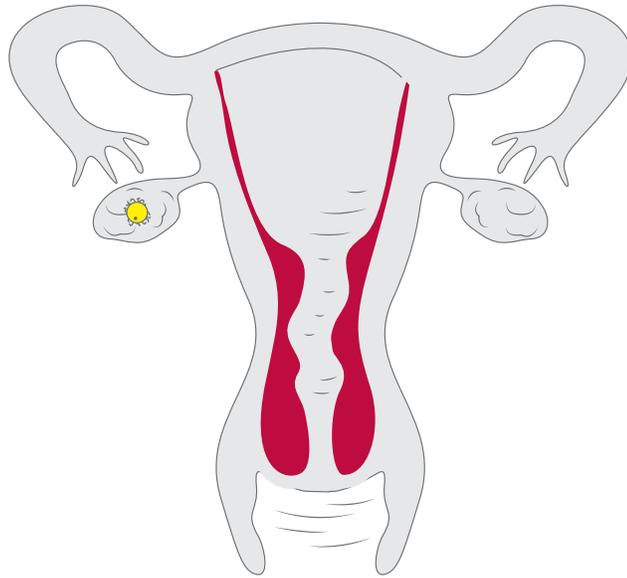
10

Lining of uterus continues to grow and one egg is preparing to be released



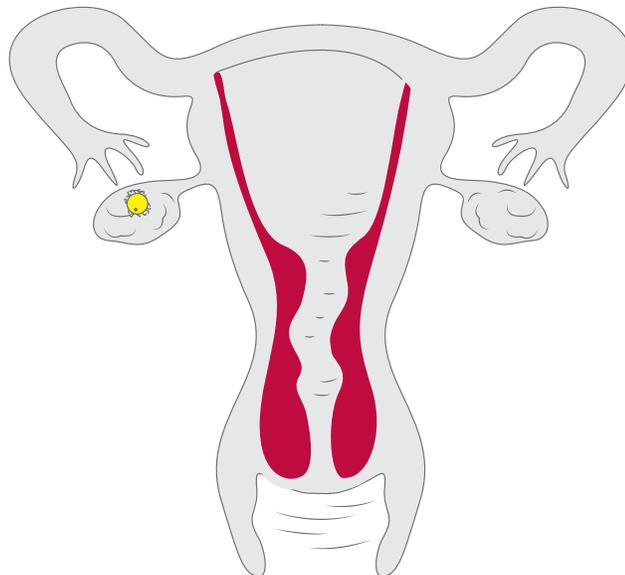
11

Lining of uterus continues to grow and one egg is preparing to be released



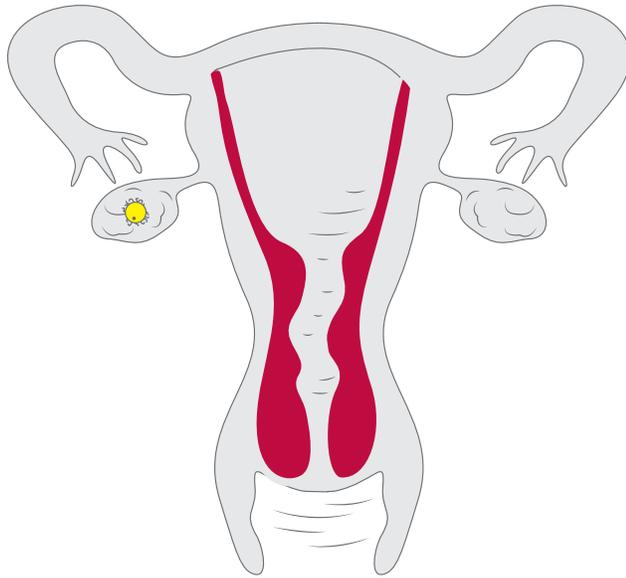
12

Lining of uterus continues to grow and one egg is preparing to be released



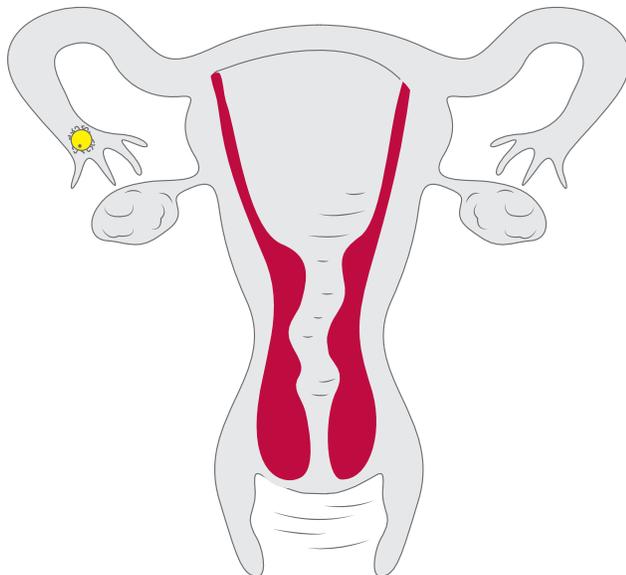
13

Lining of uterus continues to grow and one egg is preparing to be released



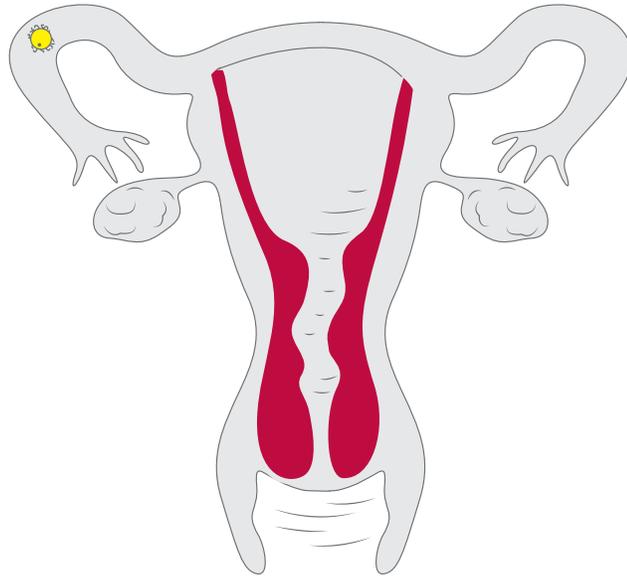
14

Ovulation is most likely to occur, meaning an egg is released from an ovary and starts to travel down a fallopian tube.



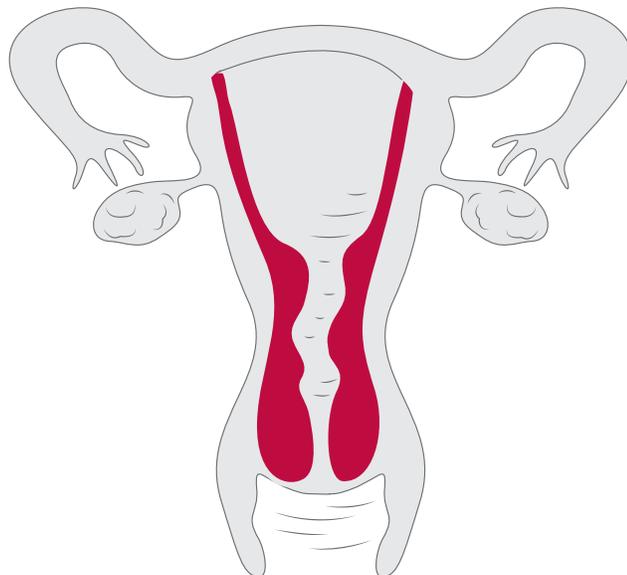
15

The egg, if it does not unite with a sperm by the end of Day 15, will dissolve and no longer viable.



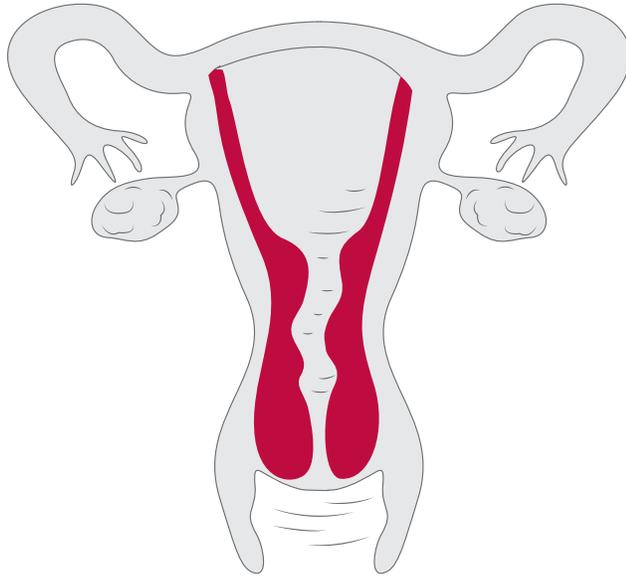
16

The egg has dissolved and will leave the body during the menstrual period.



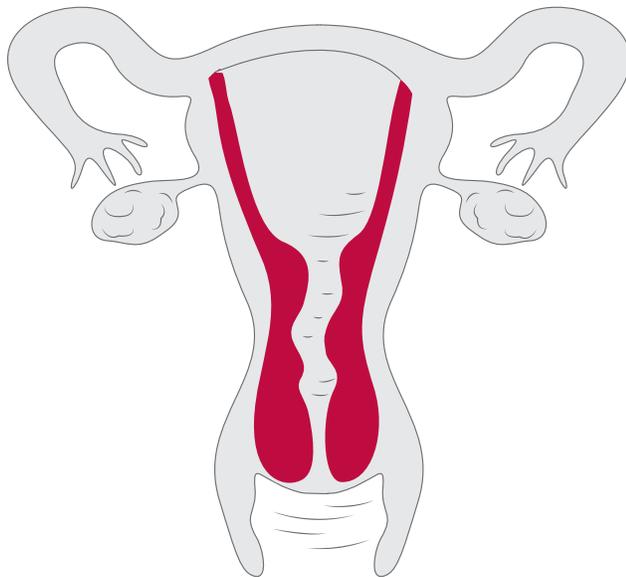
17

Lining of uterus continues to grow,  
just in case it's needed



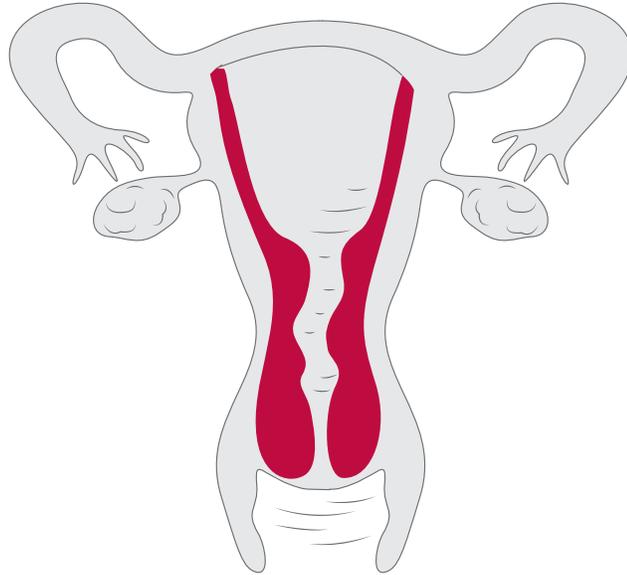
18

Lining of uterus continues to grow,  
just in case it's needed



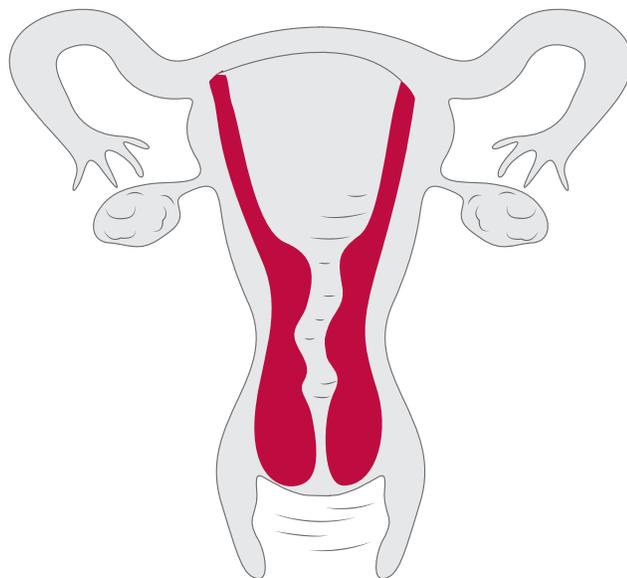
19

Lining of uterus continues to grow,  
just in case it's needed



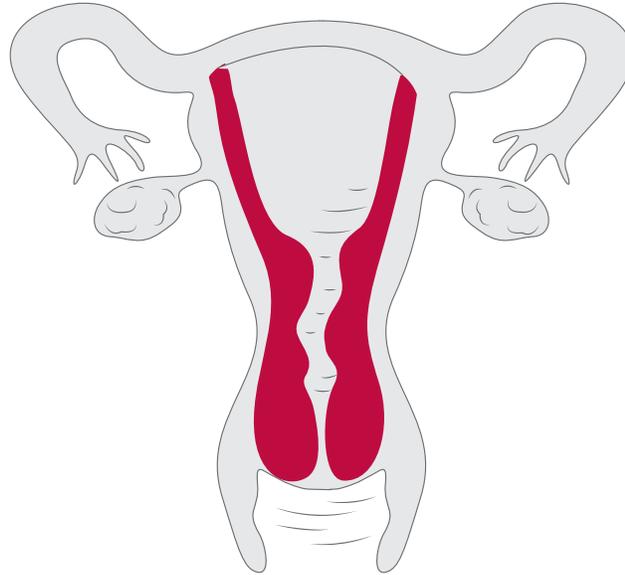
20

Lining of uterus continues to grow,  
just in case it's needed



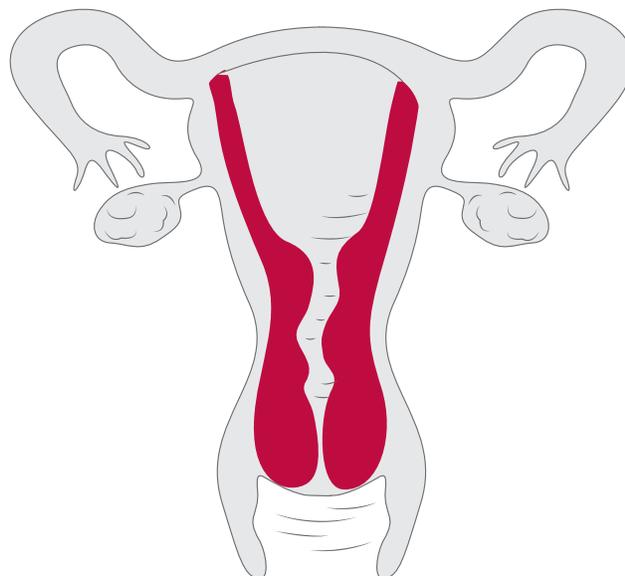
21

Lining of uterus continues to grow,  
just in case it's needed



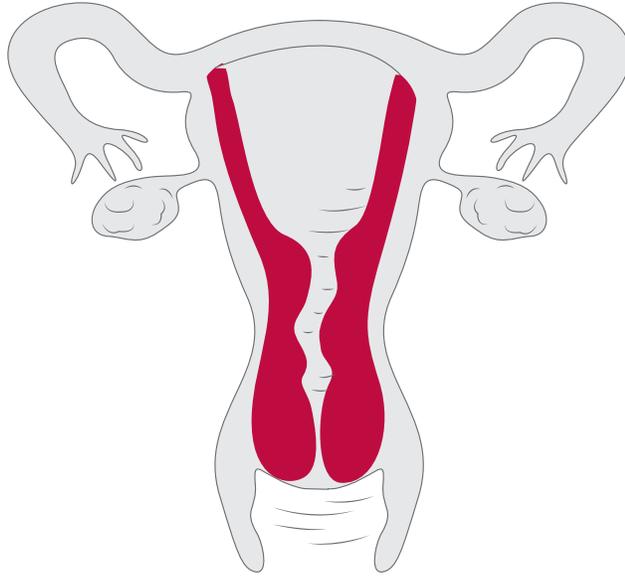
22

Lining of uterus continues to grow,  
just in case it's needed



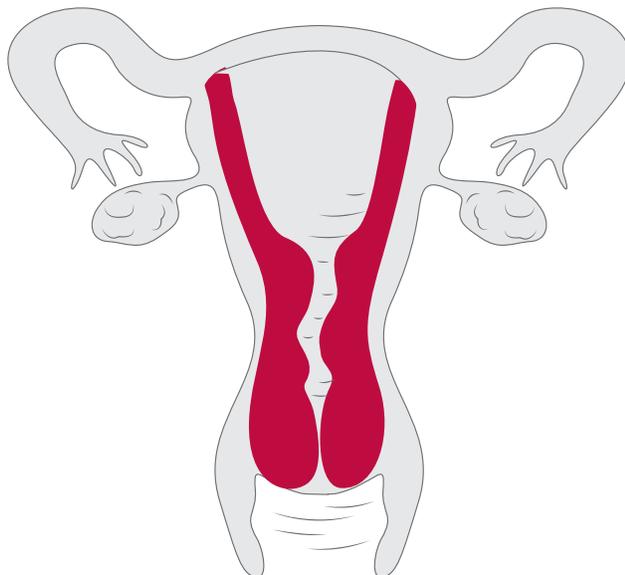
23

Lining of uterus continues to grow,  
just in case it's needed



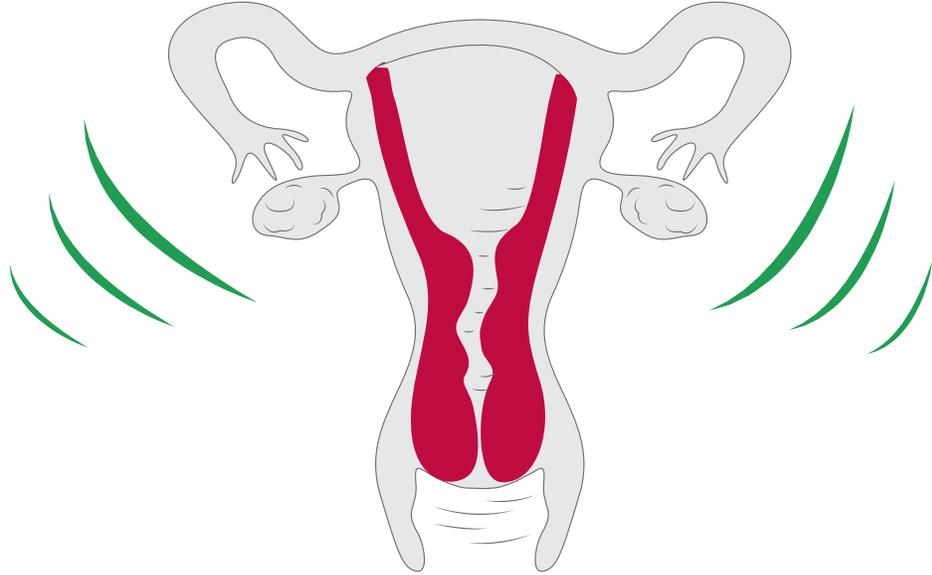
24

Lining of uterus continues to grow,  
just in case it's needed



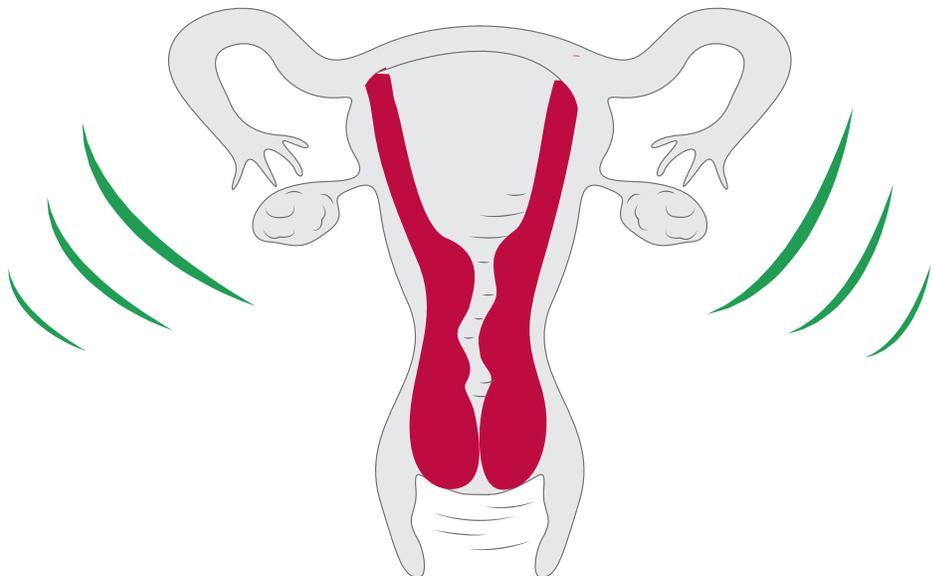
25

Lining of uterus continues to grow and hormones signal the body to prepare for next menstrual period



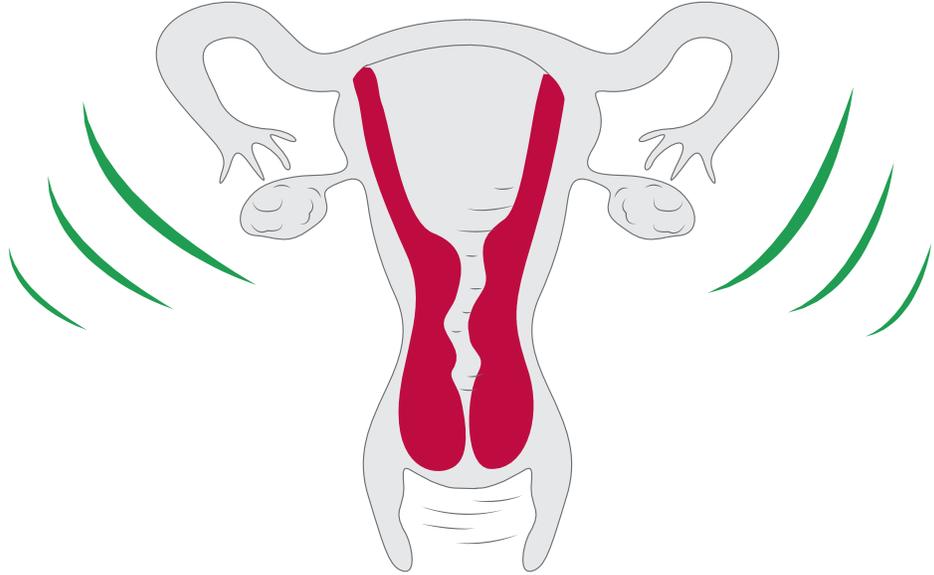
26

Lining of uterus continues to grow and hormones signal the body to prepare for next menstrual period



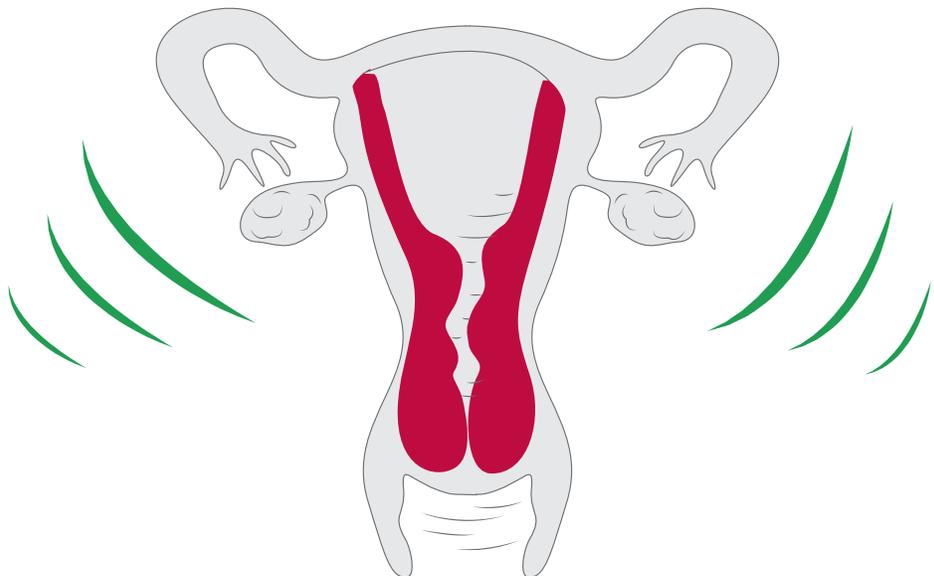
27

Lining of uterus continues to grow and hormones signal the body to prepare for next menstrual period



28

Lining of uterus continues to grow and hormones signal the body to prepare for next menstrual period



# Protecting Your Health:

## Understanding and Preventing STDs

### ADVANCED PREPARATION:

- Post the STD Clues Sheets around the room with enough space between them so that students will not get crowded around each.
- Tear off 13 one-inch pieces of masking tape and have them taped to a table or desk at the front of the room.

**TARGET GRADE:** Grade 7, Lesson 4

**TIME:** 50 minutes

### FLORIDA STANDARDS ALIGNMENT:

- HE.7.PHC.1.3 - Explain the importance of assuming responsibility for personal and reproductive health behaviors.
- HE.7.PHC.3.4 - Predict the short and long-term consequences of engaging in health-risk behaviors.
- HE.7.PHC.3.9 – Practice behaviors that will maintain or improve personal health and reduce health risks, including reproductive health.

### LEARNING OBJECTIVE:

1. Define STDs and HIV.
2. Name at least three common STDs and how they are transmitted.
3. Compare sexual behaviors that put people at high, low, or no risk for STDs.

### LESSON MATERIALS:

- One copy of the “STD Clues Sheets” 1-9
- One copy of “STD Clues Answer Key” 1-9
- “STD Clue Worksheet” – enough copies for triads in class to each have one
- One copy each of the STD High Risk, Low Risk and No Risk signs
- List of Behaviors for STD Risk – enough copies for triads in class to each have one
- Homework: “HIV and AIDS” – one per student
- Masking tape
- Pencils in case students do not have their own
- Strips of scrap paper
- Question box

### LESSON STEPS:

#### GROUND RULES

*Note to teacher: This curriculum works best in classrooms where there's a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student's age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what's expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

**Make your ground rules list with your class. The first six 6 in bold may work with your grade level.**

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***
- ***listen when others are speaking***
- ***speak for yourself***
- ***respect personal boundaries***
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

**Step 1:** Review Ground Rules with students. Answer question(s) from the previous lesson.

*Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**Step 2:** Explain that today's lesson is about sexually transmitted diseases (STDs) and HIV.

Say the following, writing key terms on the board as needed: "A sexually transmitted disease means a disease a person can get from another person when they do something sexual with that person. You can only get an STD from someone who has one. You may hear 'STD or 'STI' used out in the world; the 'D' refers to 'disease,' and the 'I' to infection. There is a minor difference between the two, but for the purposes of this lesson, we will be referring to STDs.

We're also going to be talking about HIV, which stands for the Human Immunodeficiency Virus. The 'Human' part means only people can get it and transmit to other people. While

there are animal versions of HIV, a person cannot get HIV from a cat or a dog or any other animal, or vice versa. 'Immunodeficiency' is actually two words stuck together – you might remember from science class that our immune system is the system in our body that fights off infection.

A deficiency is when something isn't working the way it should. So, when a person has HIV, they have a deficient immune system – meaning, infections their body could usually fight off on its own are harder or even impossible to fight off. So HIV is a virus that weakens the immune system that, if it is not successfully treated, can become AIDS."

Say: "HIV is transmitted through bodily fluids including blood, semen, vaginal fluid, and breast milk. There are a variety of ways to prevent the sexual transmission of HIV including abstinence, using condoms, and regular testing. Another way to prevent it is through the use of medication. Raise your hand if you have heard of PrEP as an option to prevent HIV transmission."

If you have a student who has heard of PrEP invite them to share what it is with the class and assure other students who have never heard of PrEP that you will explain what it is and how it works.

Say, "We are going to watch a short video that explains what PrEP is and how it works to prevent the transmission of HIV from a person living with the virus to a person without the virus."

Start the video (<https://youtu.be/SOLV5ep6B-I?si=h-eb0wqPPsT-34Gl>). After the video has played say, "PrEP is a preventative medication that if taken daily can significantly reduce a person's chances of contracting HIV. PrEP is to be taken every single day in order to work. This is just like medication that a person might take if they have high blood pressure. They would take their medication daily to make sure that they continue to be as healthy as possible.

Step 3: Tell the students that they are now going to discuss STDs other than HIV. Say, "there are many STDs, but that they tend to have at least a few things in common with other STDs. So you are going to be doing an activity where they are going to be assigned an STD and try to discover which one they have."

Divide the class into nine groups. Say, "Each small group will receive a worksheet with a list of clues on it. Around the room are clues with characteristics of different STDs. Your job is to go around the room and based on what's listed on those sheets of paper, determine which STD is on your paper. At the bottom of your sheet is a word bank of different STDs. When you find something that doesn't apply to you, just cross it off. By the end of the activity, you should be able to determine the STD." Tell them that they will have 10 minutes in which to work on these. Distribute the worksheet and ask them to get started.

Step 4: Once 10 minutes have elapsed, have the groups return to their seats, staying in their groups. Go through the responses using the answer key.

Step 5: Say, "One of the things all these STDs have in common is that they can be transmitted through sexual behaviors. But some behaviors put people at higher risk than others. We're going to do an activity now where we will look at which behaviors carry a lot of risk, which put you at some risk, and which have no risk for transmitting STDs." Since students are already in their groups from the first activity, ask them to remain in their groups. Tell them that you are going to hand out a list of sexual behaviors people can do. Ask them to read each of them and decide together whether they think each behavior puts a person at high risk for getting an STD, some (but lower) risk, or no risk. Ask them to make three piles on the desk or table in front of them. Tell them that they will have 10 minutes to complete the activity.

*Note to the Teacher: As students are working, post the "High Risk, Low Risk, No Risk" signs to the board with at least 2 – 3 feet between each for easy reading.*

Step 6: Once ten minutes have passed, ask one of the groups to bring their answers up and tape them to the board beneath each of the signs you have posted using the prepared masking tape. Go through the responses using the Answer Key as a guide making corrections as necessary.

Once you have been through all the answers, say, "A key point about STDs and your risk for them is that one person has to have an STD in order to give it to someone else. None of these behaviors, including the high-risk behaviors, can spontaneously create an STD. They are caused by bacteria, they are caused by viruses, they are caused by parasites or bugs. This means that just as you can be exposed to them by someone who has one, you can take specific steps to lower or eliminate your chances of getting one."

Answer any questions they may have about the activity. Describe the homework, which is a worksheet specifically on HIV and AIDS, which needs to be completed using the internet and handed in at the next class.

Step 7: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**ASSESSMENT:** Student participation in the two small group activities will enable the teacher to measure whether the learning objectives have been achieved. The small groups increase the chance of participation by all members, and going over the answers in front of the whole class will reinforce the content.

**OPTIONAL HOMEWORK:** Ask students to complete the HIV and AIDS worksheet.

## HOW HIGH IS THE RISK FOR STDs? ANSWER KEY

### HIGH RISK FOR STDs

Unprotected vaginal sex

Unprotected anal sex

Unprotected oral sex

### LOW RISK FOR STDs

Deep (“tongue”) kissing

Vaginal sex using an external or internal condom correctly

Anal sex using a condom correctly

Oral sex using a latex barrier or cut-open condom correctly

### NO RISK FOR STDs

Bathing together

Kissing on the lips

Holding hands

Abstaining from sexual activity

### HIGH RISK FOR STDs

Unprotected oral, vaginal and anal intercourse are high risk behaviors for transmitting STDs. “Unprotected” means not using a latex barrier, such as a condom.

### LOW RISK FOR STDs

Just as the key to the high risk behaviors was “unprotected,” the key word for low risk behaviors is “correctly.” These behaviors are only low-risk if condoms or other barriers are used consistently and correctly – which means every time two people are sexual together, from the beginning of the sex act to the end. As soon as body parts come into contact with each other, and/or mouths come into contact with body parts, STD transmission is possible.

The level of risk also depends on the STD. For example, deep or “tongue” kissing is high risk for herpes, but not for HIV.

In addition, although using external and internal condoms and latex barriers significantly reduce the risk of STD transmission, they don’t protect partners completely. While semen and vaginal fluids are blocked by the condom, they do not cover bodies completely. When bodies rub against each other, they can also cause microscopic openings in the skin, which are small enough for some viruses to pass through in order to transmit an STD.

### NO RISK FOR STDs

Aside from continuous abstinence – meaning, not having oral, anal or vaginal sex with another person for a period of time – very few shared sexual behaviors carry no risk for STDs. The activities here are more related to intimacy. These behaviors are important because they can help people learn about their bodies and build connection between people without any risk of STDs (or pregnancy).

## Homework: HIV and AIDS

Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Instructions:** There are some unique aspects of HIV and AIDS that are different from other STDs. Complete the questions below by going to <http://teens.webmd.com/hiv-aids-and-teens-faq>.

1. What does HIV cause?
2. HIV weakens which system in the human body?
3. That means it's harder for people with HIV to fight off certain \_\_\_\_\_.
4. Which three body fluids do NOT transmit HIV?
5. Can you get HIV from someone sneezing on you?
6. You can't tell whether someone has HIV just by looking at them. How can people know for sure whether they have HIV?
7. If someone doesn't know where to go get tested, what number can they call that's both free and confidential (no one will know they called)?

BEHAVIORS FOR STD RISK CARD

**LOWER RISK**  
**for STDs**

----- (CUT HERE) -----

**HIGH RISK**  
**for STDs**

# NO RISK for STDS

----- (CUT HERE) -----

**Unprotected  
vaginal sex**

----- (CUT HERE) -----

**Unprotected  
anal sex**

# **Vaginal sex using an external or internal condom correctly**

**Kissing on  
the lips**

----- (CUT HERE) -----

**Unprotected  
oral sex**

( CUT HERE )

# Anal sex using a condom correctly

**Oral sex using  
a latex barrier  
or condom  
correctly**

**Holding hands**

----- (CUT HERE) -----

**Abstaining  
from sexual  
activity**

## Clue Worksheet #1: \_\_\_\_\_

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be cured easily.
3. Condoms offer very good protection against you.
4. You are one of the most common STDs among adolescents in the US.
5. You are not detected by a blood test.
6. You can be transmitted through oral sex.
7. You are not transmitted via skin-to-skin contact.
8. You do not cause an outbreak of sores within two weeks of having it.
9. You are not caused by a parasite or "bug."
10. You do not have a vaccine.

CHLAMYDIA

TRICHOMONIASIS

HUMAN PAPILLOMAVIRUS (HPV)

HEPATITIS B

PUBIC LICE

HIV/AIDS

SCABIES

GONORRHEA

SYPHILIS

GENITAL HERPES

## Clue Worksheet #2: \_\_\_\_\_

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be treated, but not cured.
3. Condoms don't provide really good protection, only some protection against you.
4. You are one of the most common STDs among adolescents in the US.
5. You can be detected by a blood test.
6. You can be transmitted through oral sex.
7. You can be transmitted via skin-to-skin contact.
8. You cause an outbreak of sores within two weeks of having it.
9. You are not caused by a parasite or "bug."
10. You do not have a vaccine.

CHLAMYDIA

TRICHOMONIASIS

HUMAN PAPILLOMAVIRUS (HPV)

HEPATITIS B

PUBIC LICE

HIV/AIDS

SCABIES

GONORRHEA

SYPHILIS

GENITAL HERPES

### Clue Worksheet #3: \_\_\_\_\_

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be treated, but not cured.
3. Condoms don't provide really good protection, only some protection against you.
4. You are one of the most common STDs among adolescents in the US.
5. You are not detected by a blood test.
6. You can be transmitted through oral sex.
7. You can be transmitted via skin-to-skin contact.
8. You do not cause an outbreak of sores within two weeks of having it.
9. You are not caused by a parasite or "bug."
10. You do have a vaccine.

CHLAMYDIA

TRICHOMONIASIS

HUMAN PAPILLOMAVIRUS (HPV)

HEPATITIS B

PUBIC LICE

HIV/AIDS

SCABIES

GONORRHEA

SYPHILIS

GENITAL HERPES

## Clue Worksheet #4: \_\_\_\_\_

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be cured easily.
3. Condoms offer very good protection against you.
4. You are one of the most common STDs among adolescents in the US.
5. You are not detected by a blood test.
6. You can be transmitted through oral sex.
7. You are not transmitted via skin-to-skin contact.
8. You do not cause an outbreak of sores within two weeks of having it.
9. You are not caused by a parasite or "bug."
10. You do not have a vaccine.

CHLAMYDIA

TRICHOMONIASIS

HUMAN PAPILLOMAVIRUS (HPV)

HEPATITIS B

PUBIC LICE

HIV/AIDS

SCABIES

GONORRHEA

SYPHILIS

GENITAL HERPES

## Clue Worksheet #5: \_\_\_\_\_

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be treated, but not cured.
3. Condoms offer very good protection against you.
4. You are not one of the most common STDs among adolescents in the US.
5. You are detected by a blood test.
6. You can be transmitted through oral sex.
7. You are not transmitted via skin-to-skin contact.
8. You do not cause an outbreak of sores within two weeks of having it.
9. You are not caused by a parasite or "bug."
10. You do have a vaccine.

CHLAMYDIA

TRICHOMONIASIS

HUMAN PAPILLOMAVIRUS (HPV)

HEPATITIS B

PUBIC LICE

HIV/AIDS

SCABIES

GONORRHEA

SYPHILIS

GENITAL HERPES

## Clue Worksheet #6: \_\_\_\_\_

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be treated, but not cured.
3. Condoms offer very good protection against you.
4. You are not one of the most common STDs among adolescents in the US.
5. You can be detected by a blood test.
6. You can be transmitted through oral sex.
7. You are not transmitted via skin-to-skin contact.
8. You do not cause an outbreak of sores within two weeks of having it.
9. You are not caused by a parasite or "bug."
10. You do not have a vaccine.

CHLAMYDIA

TRICHOMONIASIS

HUMAN PAPILLOMAVIRUS (HPV)

HEPATITIS B

PUBIC LICE

HIV/AIDS

SCABIES

GONORRHEA

SYPHILIS

GENITAL HERPES

## Clue Worksheet #7: \_\_\_\_\_

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be easily cured.
3. Condoms do not offer any protection against you.
4. You are not one of the most common STDs among adolescents in the US.
5. You are not detected by a blood test.
6. You can be transmitted through oral sex.
7. You are transmitted via skin-to-skin contact.
8. You do not cause an outbreak of sores within two weeks of having it.
9. You are caused by a parasite or "bug."
10. You do not have a vaccine.

CHLAMYDIA

TRICHOMONIASIS

HUMAN PAPILLOMAVIRUS (HPV)

HEPATITIS B

PUBIC LICE

HIV/AIDS

SCABIES

GONORRHEA

SYPHILIS

GENITAL HERPES

## Clue Worksheet #8: \_\_\_\_\_

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be easily cured.
3. Condoms offer very good protection against you.
4. You are not one of the most common STDs among adolescents in the US.
5. You are detected by a blood test.
6. You can be transmitted through oral sex.
7. You are transmitted via skin-to-skin contact.
8. You cause a sore within two weeks to three months of having it
9. You are not caused by a parasite or "bug."
10. You do not have a vaccine.

CHLAMYDIA

TRICHOMONIASIS

HUMAN PAPILLOMAVIRUS (HPV)

HEPATITIS B

PUBIC LICE

HIV/AIDS

SCABIES

GONORRHEA

SYPHILIS

GENITAL HERPES

## Clue Worksheet #9: \_\_\_\_\_

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be easily cured.
3. Condoms offer very good protection against you.
4. You are one of the most common STDs among adolescents in the US.
5. You are not detected by a blood test.
6. You can be transmitted through oral sex.
7. You are transmitted via skin-to-skin contact.
8. You do not cause an outbreak of sores within two weeks of having it.
9. You are caused by a parasite or a "bug".
10. You do not have a vaccine.

CHLAMYDIA

TRICHOMONIASIS

HUMAN PAPILLOMAVIRUS (HPV)

HEPATITIS B

PUBIC LICE

HIV/AIDS

SCABIES

GONORRHEA

SYPHILIS

GENITAL HERPES

**ANSWER KEY**  
**CLUE WORKSHEET #1: CHLAMYDIA**

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be cured easily.
3. Condoms offer very good protection against you.
4. You are one of the most common STDs among adolescents in the US.
5. You are not detected by a blood test.
6. You can be transmitted through oral sex.
7. You are not transmitted via skin-to-skin contact.
8. You do not cause an outbreak of sores within two weeks of having it.
9. You are not caused by a parasite or "bug."
10. You do not have a vaccine.

CHLAMYDIA

TRICHOMONIASIS

HUMAN PAPILLOMAVIRUS (HPV)

HEPATITIS B

PUBIC LICE

HIV/AIDS

SCABIES

GONORRHEA

SYPHILIS

GENITAL HERPES

**ANSWER KEY**  
**CLUE WORKSHEET #2: GENITAL HERPES**

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be treated, but not cured.
3. Condoms don't provide really good protection, only some protection against you.
4. You are one of the most common STDs among adolescents in the US.
5. You can be detected by a blood test.
6. You can be transmitted through oral sex.
7. You can be transmitted via skin-to-skin contact.
8. You cause an outbreak of sores within two weeks of having it.
9. You are not caused by a parasite or "bug."
10. You do not have a vaccine.

CHLAMYDIA  
TRICHOMONIASIS  
HUMAN PAPILLOMAVIRUS (HPV)  
HEPATITIS B  
PUBIC LICE

HIV/AIDS  
SCABIES  
GONORRHEA  
SYPHILIS

GENITAL HERPES

**ANSWER KEY**  
**CLUE WORKSHEET #3: HUMAN PAPILLOMA VIRUS (HPV)**

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be treated, but not cured.
3. Condoms don't provide really good protection, only some protection against you.
4. You are one of the most common STDs among adolescents in the US.
5. You are not detected by a blood test.
6. You can be transmitted through oral sex.
7. You can be transmitted via skin-to-skin contact.
8. You do not cause an outbreak of sores within two weeks of having it.
9. You are not caused by a parasite or "bug."
10. You do have a vaccine.

CHLAMYDIA

TRICHOMONIASIS

HUMAN PAPILLOMAVIRUS (HPV)

HEPATITIS B

PUBIC LICE

HIV/AIDS

SCABIES

GONORRHEA

SYPHILIS

GENITAL HERPES

**ANSWER KEY**  
**CLUE WORKSHEET #4: GONORRHEA**

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be cured easily.
3. Condoms offer very good protection against you.
4. You are one of the most common STDs among adolescents in the US.
5. You are not detected by a blood test.
6. You can be transmitted through oral sex.
7. You are not transmitted via skin-to-skin contact.
8. You do not cause an outbreak of sores within two weeks of having it.
9. You are not caused by a parasite or "bug."
10. You do not have a vaccine.

CHLAMYDIA  
TRICHOMONIASIS  
HUMAN PAPILLOMAVIRUS (HPV)  
HEPATITIS B  
PUBIC LICE

HIV/AIDS  
SCABIES  
GONORRHEA  
SYPHILIS  
GENITAL HERPES

**ANSWER KEY**  
**CLUE WORKSHEET #5: HEPATITIS B**

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be treated, but not cured.
3. Condoms offer very good protection against you.
4. You are not one of the most common STDs among adolescents in the US.
5. You are detected by a blood test.
6. You can be transmitted through oral sex.
7. You are not transmitted via skin-to-skin contact.
8. You do not cause an outbreak of sores within two weeks of having it.
9. You are not caused by a parasite or "bug."
10. You do have a vaccine.

CHLAMYDIA

TRICHOMONIASIS

HUMAN PAPILLOMAVIRUS (HPV)

HEPATITIS B

PUBIC LICE

HIV/AIDS

SCABIES

GONORRHEA

SYPHILIS

GENITAL HERPES

**ANSWER KEY**  
**CLUE WORKSHEET #6: HIV/AIDS**

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be treated, but not cured.
3. Condoms offer very good protection against you.
4. You are not one of the most common STDs among adolescents in the US.
5. You can be detected by a blood test.
6. You can be transmitted through oral sex.
7. You are not transmitted via skin-to-skin contact.
8. You do not cause an outbreak of sores within two weeks of having it.
9. You are not caused by a parasite or “bug.”
10. You do not have a vaccine.

CHLAMYDIA

TRICHOMONIASIS

HUMAN PAPILLOMAVIRUS (HPV)

HEPATITIS B

PUBIC LICE

HIV/AIDS

SCABIES

GONORRHEA

SYPHILIS

GENITAL HERPES

**ANSWER KEY**  
**CLUE WORKSHEET #7: SCABIES AND PUBIC LICE**

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be easily cured.
3. Condoms do not offer any protection against you.
4. You are not one of the most common STDs among adolescents in the US.
5. You are not detected by a blood test.
6. You can be transmitted through oral sex.
7. You are transmitted via skin-to-skin contact.
8. You do not cause an outbreak of sores within two weeks of having it.
9. You are caused by a parasite or "bug."
10. You do not have a vaccine.

CHLAMYDIA  
TRICHOMONIASIS  
HUMAN PAPILLOMAVIRUS (HPV)  
HEPATITIS B  
PUBIC LICE

HIV/AIDS  
SCABIES  
GONORRHEA  
SYPHILIS  
GENITAL HERPES

**ANSWER KEY**  
**CLUE WORKSHEET #8: SYPHILIS**

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be easily cured.
3. Condoms offer very good protection against you.
4. You are not one of the most common STDs among adolescents in the US.
5. You are detected by a blood test.
6. You can be transmitted through oral sex.
7. You are transmitted via skin-to-skin contact.
8. You cause a sore within two weeks to three months of having it
9. You are not caused by a parasite or “bug.”
10. You do not have a vaccine.

CHLAMYDIA

TRICHOMONIASIS

HUMAN PAPILLOMAVIRUS (HPV)

HEPATITIS B

PUBIC LICE

HIV/AIDS

SCABIES

GONORRHEA

SYPHILIS

GENITAL HERPES

**ANSWER KEY**  
**CLUE WORKSHEET #9: TRICHOMONIASIS**

1. You are spread through sexual contact, including vaginal sex, anal sex, and oral sex.
2. You can be easily cured.
3. Condoms offer very good protection against you.
4. You are one of the most common STDs among adolescents in the US.
5. You are not detected by a blood test.
6. You can be transmitted through oral sex.
7. You are transmitted via skin-to-skin contact.
8. You do not cause an outbreak of sores within two weeks of having it.
9. You are caused by a parasite or a “bug”.
10. You do not have a vaccine.

CHLAMYDIA

TRICHOMONIASIS

HUMAN PAPILLOMAVIRUS (HPV)

HEPATITIS B

PUBIC LICE

HIV/AIDS

SCABIES

GONORRHEA

SYPHILIS

GENITAL HERPES

STD Clue #11

Do you have a **VACCINE**?

You could be...

HPV

HEPATITIS B

## STD Clue #10

Can you be detected by a **BLOOD TEST**?

You could be...

HERPES

HEPATITIS B

HIV/AIDS

SYPHILIS

## STD Clue #9

Are you **CAUSED BY A PARASITE** or “bug?”

You could be...

**TRICHOMONIASIS**

**SCABIES**

**PUBIC LICE**

## STD Clue #8

Do you cause a sore or outbreak of sores within  
two weeks of having it?

You could be...

GENITAL HERPES  
SYPHILIS

## STD Clue #7

Can you be transmitted via  
**SKIN-TO-SKIN CONTACT?**

You could be...

GENITAL HERPES

HPV

SYPHILIS

TRICHOMONIASIS

PUBIC LICE

SCABIES

## STD Clue #6

Can you be transmitted through **ORAL SEX**?

You could be...

CHLAMYDIA

GONORRHEA

SYPHILIS

HPV

GENITAL HERPES

HIV

HEPATITIS B

TRICHOMONIASIS

PUBIC LICE

SCABIES

## STD Clue #5

Are you **one of the MOST COMMON STDs** among adolescents in the US? If so, you could be...

CHLAMYDIA  
HUMAN PAPILLOMAVIRUS (HPV)  
GONORRHEA  
GENITAL HERPES  
TRICHOMONIASIS

## STD Clue #4

**Does a condom offer really  
good protection against you?**

You could be...

CHLAMYDIA

GONORRHEA

HEPATITIS B

SYPHILIS

HIV

TRICHOMONIASIS

## STD Clue #3

Can you be **TREATED**, but **NOT** cured?

You could be...

GENITAL HERPES  
HUMAN PAPILLOMAVIRUS (HPV)  
HEPATITIS B  
HIV/AIDS

## STD Clue #2

Can you be **CURED** easily?

You could be...

CHLAMYDIA

GONORRHEA

SYPHILIS

SCABIES

PUBIC LICE

TRICHOMONIASIS

## STD Clue #1

Are you **spread through sexual contact**, including vaginal sex, anal sex, and oral sex?

You could be...

CHLAMYDIA

GENITAL HERPES

HUMAN PAPILLOMAVIRUS (HPV)

GONORRHEA

HEPATITIS B

HIV/AIDS

SCABIES

PUBIC LICE

SYPHILIS

TRICHOMONIASIS

# Sexually Transmitted Infections

**TEACHER'S NOTE/PREPARATION:** This lesson uses the terms sexually transmitted infections (STIs), blood-borne infections (BBIs) and sexually transmitted and blood-borne infections (STBBIs) as needed.

Learning about STIs and BBIs helps students take care of their own bodies, thereby reducing the risk of STIs and BBIs and preventing possible health problems related to having an STI or BBI.

One of the greatest deterrents to the practice of safer sex is the “It won’t happen to me” mindset. However, the risk of infection is very real. Statistics show that rates of chlamydia cases reported in people ages 13-19, as well as gonorrhea and syphilis levels, are also very high in this age group.

STI education has often focused on trying to scare students. Research shows this technique does not work. STIs are often seen as shameful and a “consequence” for sexual activity, especially for teens. This shame prevents many people from accessing testing and treatment and is a major contributor to the high rates of STIs among young people.

A more effective strategy is to encourage everyone who is sexually active to access at least yearly testing, and treatment as needed, as a regular part of routine healthcare. All students should discuss with their parents how they can appropriately access this kind of care.

Guidelines for STI testing include the following times to get tested:

- You have a new sexual partner before you start having sex
- If you have noticed any bumps, discharge, rashes or other symptoms
- If you or your partners are having sex with other people
- If you had sex with someone who has an STI and didn’t use a condom or other prevention methods
- If you had sex without a condom with someone who doesn’t know if they have an STI (because they haven’t gotten tested in a long time)
- If you had sex with a condom and the condom broke

STI has replaced the term STD (sexually transmitted disease). In medical science, infection is the term used to indicate that a bacteria, virus, parasite or other microbe has entered the body and begun to multiply. The term disease indicates that signs and symptoms of illness are present. There are many people with STIs who have no symptoms, therefore, STI is a more accurate term.

**TARGET GRADE:** 7<sup>th</sup> Grade, Lesson 5

**TIME:** 45 Minutes

**FLORIDA STANDARDS ALIGNMENT:**

- **HE.7.PHC.1.2** - Classify infectious diseases and their modes of transmission to the human body.

- **HE.7.PHC.1.3** - Explain the importance of assuming responsibility for personal and reproductive health behaviors.

### **LEARNING OBJECTIVE:**

1. Describe symptoms, effects, treatments, and prevention for common sexually transmitted diseases; i.e., chlamydia, HPV, herpes, gonorrhea, hepatitis B/C, HIV

### **LESSON MATERIALS:**

- STI Chart (6pages) - One for each student
- STI Chart Answer Key for teacher
- Strips of scrap paper
- Question box

### **LESSON STEPS:**

#### **GROUND RULES**

*Note to teacher: This curriculum works best in classrooms where there's a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student's age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what's expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

*Make your ground rules list with your class. The first six 6 in bold may work with your grade level.*

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***
- ***listen when others are speaking***
- ***speak for yourself***
- ***respect personal boundaries***
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*

- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students. Answer question(s) from the previous lesson.

Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.

Step 2: **Defining STIs and BBIs**

Note to teacher: These discussion questions help students define STBBIs and provide a rationale for learning about them through class discussion.

With the class, discuss answers to the following questions. Discussion notes are provided.

**What is an STI?**

- STIs are infections spread primarily by close sexual contact and sexual intercourse. Sexual contact means any intimate skin-to-skin contact of the genital area. This includes touching or oral, vaginal, or anal sexual activity with partners of any gender.

**What are some STIs you have heard of?**

- List student suggestions on the board.

**What are BBIs?**

- Blood-borne infections are passed from one person to another through an exchange of blood and other body fluids.
- Examples include HIV, hepatitis B, and hepatitis C

**STIs can be viral, bacterial, or parasitic. What do those words mean?**

- **Viral:** If a virus causes an infection, it is possible for the person to remain 'asymptomatic' for periods of time (meaning there are no symptoms). It is possible to have the virus and not know it. Passing the virus to another person without either person knowing it is possible. Viral STIs can be treated but are more difficult to cure. Some viral STIs are not curable at this time.
  - Viral STIs include human papillomavirus (HPV or genital warts) and genital herpes.
  - HIV, hepatitis B, and hepatitis C are viral blood-borne infections.
- **Bacterial:** If bacteria cause an infection, it can be treated and cured with antibiotic medication. STIs that are bacterial include gonorrhea, chlamydia, and syphilis.
- **Parasitic:** If a parasite causes an infection, it can be treated and cured with medication. Parasitic STIs include pubic lice (crabs), scabies and trichomoniasis

**Why is it important to learn about STIs and BBIs?**

- It helps a person be able to take care of their own body.
- It helps a person to discuss STIs with a partner.

- Some STIs and BBIs can be prevented through immunization (HPV, Hep B) or medication (PrEP for HIV)
- Regular testing and treatment can eliminate or minimize the health problems caused by an STI/BBI.
- Untreated STIs or BBIs can cause problems for a person's health and future ability to have children.
- BBIs and some untreated STIs can be passed to unborn children or babies during pregnancy or childbirth, although with testing and treatment, this can be prevented.

**When you hear the words STI or STBBI, what do you think?**

- Encourage students to share feelings and reactions.
- Common student responses may be that these words are “disgusting,” or that it makes them think about death. Other responses may include embarrassment or shame. If students express ideas of shame or stigma, it can help to talk about what causes these feelings. Stigma and shame are rooted in fear, and often provide a false sense of protection, that only ‘other’ people get STIs. In reality, anyone having sex can get an STI, and there is nothing to be ashamed of. They can be tested for and treated. Talking about STIs is part of good healthy sexual relationships and consent.

**How do HIV and hepatitis B and C differ from other STIs?**

- HIV and hepatitis B and C are blood-borne infections.
- HIV and hepatitis B can also be transmitted by exchanging body fluids such as semen and vaginal secretions. HIV can also be transmitted through breast milk.
- BBIs can be transmitted through sex, sharing drugs, tattooing or piercing equipment that has traces of infected blood, or to a baby during pregnancy or birth. Hepatitis B and C can also be transmitted by sharing razors, nail clippers, or toothbrushes with someone who has hep B or C.
- Individuals cannot become infected with BBIs through ordinary day-to-day contact such as kissing, hugging, shaking hands or sharing food or water.
- Transmitting hepatitis C through sex is rare, however, it can occur if infected blood is present (such as during menstruation). The presence of HIV also increases the risk of transmitting hepatitis C through sex.
- There is a lot of fear and misinformation about BBIs, especially HIV. This is because when it was first discovered, many people were dying of AIDS. However, now, there is really good treatment for HIV, and people can live long healthy lives. There is also great

preventative medication, called PrEP.

- There is also excellent treatment for Hep C now, and it's possible to "clear" the virus and cure it. Most people are immunized against hepatitis B. Both of these viruses are now fairly uncommon.

**If you want to find out about STIs, what sources can provide accurate information?**

- Family doctors, clinics (e.g., Sexual and Reproductive Health Clinic or STI Clinic) or community health centers
- Teachers, counselors, or school nurse
- Fact sheets from a reliable source (Health Services/Agency)  
*Teacher note: Remind students to always speak to their parent/caregiver/guardian if they think they may have an STI, BBI or need to be tested.*

**Step 3: Studying STIs**

Students describe symptoms, effects, testing, treatment, and prevention for common STIs.

*Teacher Note: Before the lesson, print copies of STI Charts one for each student – There one chart is for students to record transmission and symptoms and the other chart is to record Prevention, testing and treatment of the following common infections:*

- Chlamydia
  - Genital herpes
  - Gonorrhea
  - Syphilis
  - HIV
  - HPV
- Give each student the blank STI Chart handouts (6 pages)
  - Using the STI Chart Answer Key. Give the students information on the 6 STIs identified above. Students will fill in their chart with the information you share.  
*Teacher Note: Use the **STI Chart Answer Key** to ensure students have the correct information.*

Step 4: Debrief this activity using the following questions:

**What are some symptoms of STIs?**

- Point out that many people with STIs have no symptoms.

**How would you know if you had an STI?**

- If you have no symptoms, regular testing is the only way to know.
- If you have symptoms, a test will confirm which STI you have.

**What does a person with an STI look like?**

- Stress that anyone can get an STI. You can't tell if someone has an STI by looking at them.

**Prevention is key. What are the best ways to prevent STIs?**

- Abstinence
- Using condoms (internal or external) and dental dams correctly
- Using condoms/dental dams every time there is sexual touching, vaginal, oral or anal sex or use of sex toys
- Limiting the number of sexual partners
- Having open and honest communication with every partner about STI history and testing
- Not having sex if there are any symptoms present (e.g., sores, unusual discharge)
- Regular STI testing (annually or as recommended by a doctor)
- Vaccination for HPV and hepatitis B
- Using Pre-Exposure Prophylaxis (PrEP) to help prevent HIV in people who have a very high risk of getting the virus

Step 5: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

# STI Chart

## Transmission and Symptoms

Using the information provided on the health information sheets, fill in the chart below.

Infection	Bacteria or Virus?	Transmission	Symptoms/Effects
Chlamydia			
Gonorrhea			

Infection	Bacteria or Virus?	Transmission	Symptoms/Effects
HPV			
Genital Herpes			
HIV			

Infection	Bacteria or Virus?	Transmission	Symptoms/Effects
Syphilis			

# STI Chart

## Prevention, Testing and Treatment

Infection	Prevention	Testing	Treatment
Chlamydia			
Gonorrhea			

Infection	Prevention	Testing	Treatment
HPV			
Genital Herpes			
HIV			

Infection	Bacteria or Virus?	Transmission	Symptoms/Effects
Syphilis			

## STI CHART TEACHER ANSWER KEY

Infection	Bacteria or Virus?	Transmission	Symptoms/Effects
<b>The majority of STIs are asymptomatic. There are often no symptoms!</b>			
<b>Chlamydia</b>	Bacteria	<ul style="list-style-type: none"> <li>• Vaginal, anal, or oral sex with a person who has Chlamydia without using a condom and/or a dental dam</li> </ul>	<ul style="list-style-type: none"> <li>• Pain or burning when peeing</li> <li>• Discharge, bleeding or itching from the bum</li> <li>• Redness and/or discharge from one or both eyes</li> <li>• Watery or milky discharge from penis</li> <li>• Unusual discharge from the vagina</li> <li>• Pain or swelling of the testicles</li> <li>• Irritation or itching inside the penis</li> <li>• Vaginal bleeding/spotting between periods</li> <li>• Vaginal bleeding or pain during or after sex</li> <li>• Lower abdominal pain</li> <li>• If untreated, could lead to pelvic inflammatory disease, pain and swelling of the testicles, urinary tract problems, tubal pregnancy, fertility issues and/or arthritis</li> </ul>
<b>Gonorrhea</b>	Bacteria	<ul style="list-style-type: none"> <li>• Vaginal, oral or anal sex with a person who has gonorrhea without using a condom and/or a dental dam.</li> </ul>	<ul style="list-style-type: none"> <li>• Pain or burning when peeing</li> <li>• Swelling, itching, or pain in the genital area</li> <li>• Discharge, bleeding, or itching from the bum</li> <li>• Redness and/or discharge from one or both eyes</li> <li>• Unusual vaginal discharge</li> <li>• Irregular vaginal bleeding (often after sex)</li> <li>• Pain in the lower abdomen or pain during sex</li> <li>• Green or yellow discharge from the penis</li> <li>• Irritation or itching inside the penis</li> <li>• Painful or swollen testicles</li> <li>• If left untreated, could lead to pain and swelling of the testicles, urinary tract problems, pelvic inflammatory disease, tubal pregnancy, and/or fertility issues</li> </ul>

<b>HPV</b>	Virus	Through intimate skin-to-skin contact with a person who has HPV	<ul style="list-style-type: none"> <li>• Some strains of HPV cause genital warts; some strains cause cancer in the mouth, throat, anus, penis or cervix</li> <li>• Many people with HPV do not have symptoms</li> <li>• Some people get warts</li> <li>• Warts can show as tiny bumps or in clustered growths on the skin (may look like small cauliflower-like bumps)</li> <li>• Warts can be found in and around the genital area, including in the vagina</li> <li>• Warts may feel itchy or irritated</li> </ul>
<b>Genital Herpes</b>	Virus	<ul style="list-style-type: none"> <li>• Herpes simplex virus is spread through intimate skin-to-skin contact and oral, vaginal or anal sex</li> <li>• It can be transmitted by people who have oral or genital herpes but don't have sores at the time of contact</li> <li>• Cold sores are a form of the herpes virus. If a cold sore comes into contact with someone's genitals (oral sex) there is a risk for genital herpes.</li> </ul>	<ul style="list-style-type: none"> <li>• Some people have mild or no symptoms and don't know that they are infected</li> <li>• One or more painful blisters in or around the genitals, or wherever there is skin-to-skin contact (rectum, mouth)</li> <li>• Feeling unwell (e.g., flu-like symptoms such as chills, fever or muscle aches)</li> <li>• Tingling or itching of the skin around the genitals</li> <li>• Burning when urinating</li> <li>• Unusual discharge from vagina or penis</li> <li>• The first outbreak is the most painful. Repeat outbreaks tend to be shorter and less severe than the first outbreak.</li> </ul>
<b>HIV</b>	Virus	<ul style="list-style-type: none"> <li>• Infected semen, vaginal secretions, rectal fluid or breastmilk that gets into the blood stream through: <ul style="list-style-type: none"> <li>• vaginal, anal, oral sex without a condom and/or dental dam</li> <li>• sharing sex toys</li> <li>• sharing needles used for tattooing, drugs, piercings</li> </ul> </li> <li>• Pregnancy – the infection can be passed to a baby through childbirth or breastfeeding</li> </ul>	<ul style="list-style-type: none"> <li>• People with HIV often have no symptoms and look and feel fine.</li> <li>• Some people with HIV will have flu-like symptoms when they first get infected (e.g., fatigue, fever, sore throat, swollen glands loss of appetite, night sweats etc.)</li> <li>• HIV can lead to a condition called AIDS, after the virus has damaged the immune system. With access to treatment, most people living with HIV never develop AIDS.</li> </ul>

<b>Syphilis</b>	Bacteria	<ul style="list-style-type: none"><li>• By having direct contact with a syphilis sore</li><li>• Oral, vaginal, anal sex with infected partner</li><li>• Mother to fetus</li></ul>	<ul style="list-style-type: none"><li>• Symptoms are the same for both males and females. However many people have no symptoms</li><li>• Painless sore(s) (chancres) from pinpoint size to as large as a quarter</li><li>• Flu-like symptoms, fever, fatigue, pain in the joints and muscles</li><li>• Painless rash on hands, feet or whole body</li><li>• Swollen lymph nodes</li><li>• Hair loss</li><li>• Untreated may result in headache, dizziness, changes in personality, dementia</li></ul>
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## Answer Key

Infection	Prevention	Testing	Treatment
Chlamydia	<ul style="list-style-type: none"> <li>• Abstinence</li> <li>• Choose not to have oral, vaginal or anal sex</li> <li>• Choose safer sex practices with lower risk</li> <li>• Use condoms and/or dental dams for oral, vaginal, and anal sex.</li> <li>• Limit the number of sexual partners</li> <li>• Regular testing</li> <li>• Discuss STI history and when you were last tested with your partner(s)</li> <li>• Don't have sexual contact if you or your partner(s) have symptoms of an STI or may have been exposed to an STI</li> </ul>	<ul style="list-style-type: none"> <li>• Urine sample or swab of the penis, rectum, vagina or throat</li> </ul>	<ul style="list-style-type: none"> <li>• Antibiotic</li> </ul>
Gonorrhea	<ul style="list-style-type: none"> <li>• Abstinence</li> <li>• Choose not to have oral, vaginal or anal sex</li> <li>• Choose safer sex practices with lower risk</li> <li>• Use condoms and/or dental dams for oral, vaginal, and anal sex.</li> <li>• Limit the number of sexual partners</li> <li>• Regular testing</li> <li>• Discuss STI history and when you were last tested with your partner(s)</li> <li>• Don't have sexual contact if you or your partner(s) have symptoms of an STI or may have been exposed to an STI</li> </ul>	<ul style="list-style-type: none"> <li>• Urine sample or swab of the penis, rectum, vagina or throat</li> </ul>	<ul style="list-style-type: none"> <li>• Antibiotic</li> </ul>

Infection	Prevention	Testing	Treatment
HPV	<ul style="list-style-type: none"> <li>• Abstinence</li> <li>• Choose not to have oral, vaginal or anal sex</li> <li>• Choose safer sex practices with lower risk</li> <li>• Using condoms can lower risk, but can't completely prevent HPV because they don't cover all the skin around the genitals</li> <li>• Tell your partner(s) if you have genital warts so you can make choices together to lower the risk of passing the virus</li> <li>• Avoid intimate skin-to-skin contact where the warts are until warts are treated</li> <li>• Get immunized! Ask your health care provider about the HPV vaccine</li> </ul>	<ul style="list-style-type: none"> <li>• Visual exam if warts are present</li> <li>• Regular PAP tests (cervical cancer screening)</li> </ul>	<ul style="list-style-type: none"> <li>• Warts can be treated by health care provider with freezing</li> <li>• Can apply prescription liquids or creams to the wart</li> </ul>
Genital Herpes	<ul style="list-style-type: none"> <li>• Abstinence</li> <li>• Choose not to have oral, vaginal or anal sex</li> <li>• Choose safer sex practices with lower risk</li> <li>• Tell your partner(s) if you have herpes or cold sores so you can make choices together to lower the risk of passing the virus.</li> <li>• Use condoms and/or dental dams between outbreaks to lower the risk of passing the virus – the virus can be transmitted even when symptoms aren't present</li> <li>• Avoid sexual contact while sores are present (during an 'outbreak')</li> </ul>	<ul style="list-style-type: none"> <li>• When sores are present, they can be swabbed to test for the herpes virus</li> </ul>	<ul style="list-style-type: none"> <li>• No cure</li> <li>• Medicine may help shorten or prevent outbreaks</li> </ul>

Infection	Prevention	Testing	Treatment
HIV	<ul style="list-style-type: none"> <li>• Abstinence</li> <li>• Choose not to have oral, vaginal or anal sex</li> <li>• Choose safer sex practices with lower risk</li> <li>• Use condoms for vaginal and anal sex</li> <li>• Use a condom or dental dam for oral sex</li> <li>• Use lubrication to help avoid injury to body tissues</li> <li>• Use condoms on sex toys or avoid sharing them.</li> <li>• Don't share needles or equipment for injecting drugs</li> <li>• Be sure that the instruments for tattoos and body piercing have been sterilized</li> <li>• Pre-Exposure Prophylaxis (PrEP) helps prevent HIV in people who have a very high risk of getting the virus</li> </ul>	<ul style="list-style-type: none"> <li>• Blood test – the most accurate results will be 3 months after a potential exposure</li> </ul>	<ul style="list-style-type: none"> <li>• Anti-retroviral drugs cannot cure HIV but can help people with HIV live long, healthy lives. Treatment also makes it so that people with HIV who are on treatment are less likely to pass the virus to others.</li> </ul>
Syphilis	<ul style="list-style-type: none"> <li>• Abstinence</li> <li>• Abstain from sexual activity until treatment is completed.</li> <li>• Choose not to have oral, vaginal or anal sex</li> <li>• Choose safer sex practices with lower risk</li> <li>• Use condoms and/or dental dams for oral, vaginal, and anal sex.</li> <li>• Limit the number of sexual partners</li> <li>• Regular testing</li> <li>• Discuss STI history and when you were last tested with your partner(s)</li> <li>• Don't have sexual contact if you or your partner(s) have symptoms of an STI or may have been exposed to an STI</li> </ul>	<ul style="list-style-type: none"> <li>• Blood test</li> </ul>	<ul style="list-style-type: none"> <li>• Antibiotic</li> </ul>

# Making SMART Choices

**TARGET GRADE:** Grade 7, Lesson 7

**TIME:** 50 minutes

## **FLORIDA STANDARDS ALIGNMENT:**

- HE.7.PHC.1.3 - Explain the importance of assuming responsibility for personal and reproductive health behaviors.
- HE.7.PHC.3.4 - Predict the short and long-term consequences of engaging in health-risk behaviors.
- HE.7.PHC.3.9 – Practice behaviors that will maintain or improve personal health and reduce health risks, including reproductive health.

## **LEARNING OBJECTIVE:**

1. Describe three different types of communication people use.
2. Demonstrate how to effectively use assertive communication in relationships.

## **LESSON MATERIALS:**

- Assertive Communication Worksheets 1-5 – one per every three students
- Homework: “Talking by Text: What Do You Mean?” – one per student
- Pencils in case students do
- not have their own.
- White board or flipchart pad
- White board or flipchart markers
- Strips of scrap paper
- Question box

## **LESSON STEPS:**

### **GROUND RULES**

*Note to teacher: This curriculum works best in classrooms where there’s a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student’s age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what’s expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

***Make your ground rules list with your class. The first six 6 in bold may work with your grade level.***

*Ground rules work better when students are involved in creating the list. The list doesn’t have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***

- *respect each other*
- *questions are welcome using the question box*
- *listen when others are speaking*
- *speak for yourself*
- *respect personal boundaries*
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students. Answer question(s) from the previous lesson.

Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.

Step 2: Ask the students, “How many of you have mastered the skill of reading people’s minds?” The students will likely look confused, and a few might raise their hands, realizing you are joking. Say, “Exactly. We can’t read each other’s minds so if we want to have good relationships with people, we need to learn how to communicate with them effectively. That includes family relationships, friendships, and romantic relationships. Today, we’re going to be focusing on communicating about sex.”

Ask, “What can sometimes make communicating about sex difficult?” Some possible responses might include:

- “I’m too embarrassed to talk about it.”
- “I don’t want to upset the other person by bringing something up.”
- “I’m nervous if I bring something up they’ll break up with me.”
- “It’s too much work – I just want to have a boy/girlfriend.”
- “I don’t want to pry – and I don’t want them asking me things that might be none of their business.”

Say, “While these are certainly all reasons why people are often unable to communicate in a relationship, no relationship can last without communication. When it comes to communicating about sexual behaviors or relationships, there’s also more at stake – because you’re talking about avoiding STDs and/or pregnancy.”

Step 3: Explain that HOW we express ourselves is just as important as WHAT we are trying to communicate. Say, “We can communicate aggressively, passively, or assertively.” As you say this, write the words Aggressive, Passive and Assertive on the board or flipchart. Say, “Being AGGRESSIVE is when someone tries to get what they want by bullying the other person into it.

Being PASSIVE is when a person is timid or unclear in expressing their needs – or when they won't speak up about what THEY want, but just go along with what the other person wants. Being ASSERTIVE is when we say what we want or mean without being hurtful to the other person."

Ask, "What if someone asked you out and you weren't interested in that person. If you were PASSIVE, how might you react?"

Possible responses might include:

- "I'd probably say yes even though I didn't want to."
- "I'd say, 'Let me think about it – can I text you later?' and then never text them."

Ask, "Why isn't that an effective way of responding?"

Possible responses might include:

- "Because you'd end up doing something you don't want to do."
- "Because it's not fair to the other person."

Ask, "How would you respond to the same question if you were AGGRESSIVE?"

Possible responses might include:

- "Go out with you? Are you kidding? Loser!"
- "Um... no."

Ask, "Why isn't that an effective way of responding?"

Possible responses might include:

- "Because it's rude, and can make the other person feel bad"
- "Because it becomes all about what I want and relationships should be about what both people want."

Ask, "How would you respond to the same question if you were ASSERTIVE?"

Possible responses might include:

- "I'm actually interested in someone else, but thanks."
- "I really like you as a friend – just not as more than that."

Ask, "Why is this an effective way of responding?"

Possible responses might include:

- "Because both people's needs count"
- "Because the person said what they meant, but didn't offend the other person"

Note to the Teacher: It is possible that some students will insist that aggressive communication is the way to go, looking only at the result – which is getting what they want. If this happens, try to facilitate a discussion about this. Ask "If you can get what you want without hurting the other person, might it make more sense to do it that way? Why or why not?" You can also talk about situations where it can be appropriate to speak in a more aggressive tone, reinforcing any earlier lessons about bullying prevention.

Say, "So, it's easy to define terms – what we are going to do now is practice actually communicating with a partner about sex."

Step 4: Break the class up into small groups of three (no more than four) per group. Ask them to decide who in the group is going to be the writer, and make sure that student has a pencil or pen. Hold up one of the worksheets and say, "I am going to give each group a sheet that has a statement made by a person to their boyfriend or girlfriend that has something to do with sex. This person's name is 'Partner A.' You are 'Partner B.' Your job is to respond to Partner A in an ASSERTIVE (not aggressive, not passive) way. Partner B wants to stay in the relationship with Partner A."

When you get your sheets, talk among yourselves about what an effective, assertive response to the line would be that refuses the behavior. Once you have figured that line out, write it on the second line, marked Partner B. You only have about two minutes, so you need to work quickly. PLEASE DO NOT MOVE ON TO THE OTHER LINES!! Once everyone has written their line, I will give you further instructions. Please keep in mind that this activity needs to follow school rules – no violent dialogue, nothing inappropriate."

Answer any questions about the instructions, and then distribute the sheets, instructing students to wait until all the sheets have been distributed. Tell students to get started and remind them that they only have two minutes in which to come up with a response. Walk around as they work, answering questions and reminding them not to move on. As you walk around, check some of the language to be sure they are on task and not writing anything silly or inappropriate.

After two minutes, have everyone stop writing. Ask each group to pass their sheet clockwise to the group next to them. Say, "Now that you've been Partner B, you're going to become Partner A. Read through the original type-written line, and what the group before you came up with as an assertive response. Then, as a group, come up with a new line for Partner A. Keep in mind that Partner A may really want to have sex or is strongly considering it. Once you've come up with what you feel is an effective line, write it down. You only have two more minutes for this. Please do NOT go beyond Partner A."

After a few minutes, stop the students and again ask them to pass their sheet clockwise to the group next to them. There, they will become Partner B again and have to come up with a response to Partner A that again assertively refuses the behavior. Continue the activity until all the sheets have been filled. Allow a little more time for each round so that students can read through the previous lines before writing their responses. Remind the students as necessary that their responses should be assertive, rather than passive or aggressive. Once the sheets have been filled, have them pass their sheets one more time. Then give the groups one minute to read their completed sheets within their small groups.

Step 5: Ask each group to select two volunteers who will come to the front of the room to read their dialogues. After each group has read their sheet, be sure to have the class applaud for each. Take a moment to ask the class how realistic a discussion they thought this was, and whether Partner B remained assertive throughout.

After all the groups have read their dialogues, process by asking the following questions:

- "What was it like to do that?"
- "Was there anything that surprised you in what you heard?"
- "What did you think of the ways in which partner A and partner B communicated?"

What are some specific examples you heard?"

- "What were some of the things you heard partner B say that you really liked, or thought would be particularly effective?"

Note to the Teacher: In most cases, the two people students will select will be a boy and a girl – with the boy being Partner A. If this happens, point it out to the students:

"What did you notice about the pairs that came up to the front of the room?"

Ask the students whether anyone else assumed the partners were each a particular gender and why. Ask if they think it is realistic for a girl to put pressure on someone to have sex or for a boy to want to refuse it.

Step 6: Summarize the lesson by making the following points:

- Being in a relationship does not mean that a person has to give up who they are and their own needs.
- In a healthy relationship, both people should be able to express themselves openly, and be able to listen to, appreciate, and accept the other person's needs.
- Compromise is a part of every relationship. This means that you give in sometimes, and the other person gives in at other times. But if one person is giving in more often than the other, it is an unequal, unhealthy relationship.
- It is important to stick to what you believe in and the decisions you make, even if they're different from what people around you are saying.
- No one should do anything sexual in a relationship that they do not feel 100% ready to do.

Explain that a lot of times people are communicating more by text than in person, so the homework assignment will be to look at some examples of people texting each other and see how effective they think they are. Distribute the homework sheets and ask them to complete them and bring them to the next class.

Step 7: **QUESTION BOX:** Give each student several strips of scrap paper.

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.

**ASSESSMENT:** Going through the types of communication will achieve the first learning objective. The Assertive Communication worksheets are designed to achieve the second objective.

**OPTIONAL HOMEWORK:** Students should complete the "Talking By Text: What Do You Mean?" worksheet to apply the skills learned in class about assertive communication to communicating via text.

## Assertive Communication Worksheet #1

**Instructions:** Partner A really wants something from Partner B. Partner B, however, doesn't want to do what Partner A wants to do. Work with your group to come up with an assertive next line in this dialogue. When instructed to, pass the sheet to the next group and await further instructions. **Please only fill in one line. Do NOT complete the entire form.**

Partner A: "I saw Sam and Kayla earlier. They said they've decided to have sex after all. I know you and I said we'd wait, but if they're going to do it, wouldn't it be okay for us to?"

Partner B

Partner A

Partner B

Partner A

Partner B

## Assertive Communication Worksheet #2

**Instructions:** Partner A really wants something from Partner B. Partner B, however, doesn't want to do what Partner A wants to do. Work with your group to come up with an assertive next line in this dialogue. When instructed to, pass the sheet to the next group and await further instructions. **Please only fill in one line. Do NOT complete the entire form.**

Partner A: "Why don't we just have oral sex? You can't get STDs from it."

Partner B

Partner A

Partner B

Partner A

Partner B



## Assertive Communication Worksheet #3

**Instructions:** Partner A really wants something from Partner B. Partner B, however, doesn't want to do what Partner A wants to do. Work with your group to come up with an assertive next line in this dialogue. When instructed to, pass the sheet to the next group and await further instructions. **Please only fill in one line. Do NOT complete the entire form.**

Partner A: "It's our first time having sex, we don't need to use condoms or birth control."

Partner B

Partner A

Partner B

Partner A

Partner B



## Assertive Communication Worksheet #4

**Instructions:** Partner A really wants something from Partner B. Partner B, however, doesn't want to do what Partner A wants to do. Work with your group to come up with an assertive next line in this dialogue. When instructed to, pass the sheet to the next group and await further instructions. **Please only fill in one line. Do NOT complete the entire form.**

Partner A: "If you're not willing to do it with me, then I'll just go find someone else who will."

Partner B

Partner A

Partner B

Partner A

Partner B

## Assertive Communication Worksheet #5

**Instructions:** Partner A really wants something from Partner B. Partner B, however, doesn't want to do what Partner A wants to do. Work with your group to come up with an assertive next line in this dialogue. When instructed to, pass the sheet to the next group and await further instructions. **Please only fill in one line. Do NOT complete the entire form.**

Partner A: "I don't want to use condoms when we have sex. It's like you're saying I'm dirty or something!"

Partner B

Partner A

Partner B

Partner A

Partner B

## HOMEWORK: Talking By Text: What Do You Mean?

Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Instructions:** The following are examples of texts between two people. In the space provided, explain what you think person two means by their responses. What could they have texted that would have been clearer?

**1. Person One: "Liked hanging w you last night"**

**Person Two: "Thx"**

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**2. Person One: "Hey, I was just thinking about you!"**

**Person Two: "K"**

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---

**3. Person One: "Are you mad at me?"**

**Person Two: "???"**

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**4. Person One: "Wanna hang out later?"**

**Person Two:** 

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# Making SMART Choices

**TARGET GRADE:** Grade 7, Lesson 6

**TIME:** 50 minutes

## **FLORIDA STANDARDS ALIGNMENT:**

- HE.7.PHC.1.3 - Explain the importance of assuming responsibility for personal and reproductive health behaviors.
- HE.7.PHC.3.4 - Predict the short and long-term consequences of engaging in health-risk behaviors.
- HE.7.PHC.3.9 – Practice behaviors that will maintain or improve personal health and reduce health risks, including reproductive health.

## **LEARNING OBJECTIVE:**

1. Model to determine whether they want to be in a sexual relationship.
2. Demonstrate their understanding of how to apply the SMART decision-making model to real-life situations.

## **LESSON MATERIALS:**

- Markers for white board or flipchart paper
- Flipchart paper if no white board available
- Masking tape
- Handout: “Making SMART Choices (Teacher’s Guide)” – one copy for the teacher
- Handout: “Making SMART Choices (Student Handout)” - one per student
- Handouts: Making SMART Choices Scenarios 1-3, one per groups of 3 students
- Handouts: Three homework assignments – one of each per student:
  - “Everything’s Different, Nothing’s Changed” Student Questionnaire
  - “Everything’s Different, Nothing’s Changed” Parent/Caregiver Questionnaire
  - Three-question homework reflection sheet
- Strips of scrap paper
- Question box

## **LESSON STEPS:**

### **GROUND RULES**

*Note to teacher: This curriculum works best in classrooms where there’s a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student’s age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what’s expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

***Make your ground rules list with your class. The first six 6 in bold may work with your grade level.***

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- *no put-downs*
- *respect each other*
- *questions are welcome using the question box*
- *listen when others are speaking*
- *speak for yourself*
- *respect personal boundaries*
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students. Answer question(s) from the previous lesson.

*Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

Step 2: Sometimes, just launching into a story can get your students' attention. Walk to the front of the room and begin the class by saying the following:

"Let's say you were in the cafeteria here at school and you saw two students who clearly didn't like each other. They start out giving each other looks as they get their food and go to sit down; then one makes a comment a little too loudly about the other. That student gets up, walks over to the first student, and asks, also loudly, 'are you talking to ME?' The first student stands up and says, 'Sure am – what are you going to do about it?'"

On the board/flipchart paper in front of the room, write "What can you do?" Ask the students, "What are ALL the different things you can POSSIBLY do in this situation? Don't worry if they sound unrealistic or might not be what YOU would do. Just tell me what all the possible options are here."

Record the responses on the white board or chart paper. Possible responses may include:

- Leave the cafeteria
- Run and get an adult
- Stand between the two students and tell them both to calm down
- Jump up and chant, "Fight! Fight! Fight!"
- Join in with the student you agree with and stand next to that person
- Try to calm everyone down by making a joke, like, "Hey, you're being so loud, I can't concentrate on my tater tots over here!"

- Grab your phone and start filming

Note to the Teacher: Feel free to contribute any of the responses listed above if the class does not come up with them and ask whether they feel they should be added to the list.

Explain to the students, “Clearly, there are things people need to think about before making a decision. We are now going to talk about a model that can guide us in making difficult decisions. And for the rest of the class, we’re going to be talking about how we can use it decide about whether to be in a sexual relationship with another person.”

Step 3: Distribute the student handout of the Making SMART Choices Model to students. Writing each letter and word/phrase on the board or flipchart paper as you go along, go through the model with the students using the teacher’s guide as a resource. Answer any questions the students may have about the model.

Say, “We’re now going to put the SMART Model into practice. Let’s take the scenario we just talked about. Just to remind you, the scene is: you are in the cafeteria here at school and you see two students who clearly don’t like each other. They start out giving each other looks as they get their food and go to sit down; then one makes a comment a little too loudly about the other. That student gets up, walks over to the first student and asks, also loudly, ‘are you talking to ME?’ The first student stands up and says, ‘Sure am – what are you going to do about it?’”

Let’s go through the model together. First, we need to stop for a minute because this is a big decision to make. Second, you want to make a list of all your possible options – we just did that at the beginning of class. Now comes the fun part: Analyzing your options.”

Ask the class to review the list of options on the board and help you to delete the options that are less realistic or are not allowed because you’re in school. Work with the students to get down to one, and circle it on the board.

Say, “So we analyzed our options, and with this one that I circled, we reached a decision – which is the next letter in the model. The last letter, the T, really comes after you’ve made your decision. You need to check in from time to time about what you felt was a good decision, what you felt maybe wasn’t the best decision for you, and determine what, if anything, you want to do differently moving forward.”

Step 4: Tell them that they are now going to practice using the model themselves – but this time, they’re going to look at a situation that has to do with sex. Break students into groups of three. Provide each triad with a scenario for which they are to put themselves in the position of a person who wishes to wait to have sex and is faced with the decision to either wait or to have sex.

Note to the Teacher: More than one pair will have the same scenario. The number of students in the class will determine how many copies of the scenarios are necessary.

Instruct the students to walk through the Making SMART Choices Model as if they were the character in the scenario, and make the decision based on this process. Tell them they will have about 10 minutes in which to do this work. Walk around the room while they are working to see whether there are any questions and to provide guidance.

Step 5: After about ten minutes, ask for a few groups to volunteer to walk through what they came up with. After each group presents their model, ask for the rest of the class to give feedback on what they thought was particularly effective and what, if anything, they'd propose changing about it.

Step 6: Ask, "Do you think it's any easier for people your age to make decisions about sex than it was for your parents/caregivers?" After a few responses, explain that they have a homework assignment where they are going to ask a parent/caregiver about their experiences growing up. Distribute the homework assignment, go through it briefly and ask them to bring only the last page with the three questions to their next class to hand in.

Step 7: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**ASSESSMENT:** Teacher observation during the full-class discussion will be combined with the small group worksheet done to determine whether the learning objectives have been met.

**OPTIONAL HOMEWORK:** "Everything's Different, Nothing's Changed" – worksheets that the student and a parent/caregiver are to complete and then discuss together. The student is then to complete a reaction worksheet to be handed in during the next class.

## **The MAKING SMART CHOICES Model**

Student Handout

*Adapted with permission from a lesson in Goldfarb, E. and Schroeder, E. (2004), Making SMART Choices about Sex: A Curriculum for Young People. Rochester, NY: Metrix Marketing.*

Whenever we have a decision to make, we need to think before we act if we want to make a SMART decision. But how do we go about doing this? In this model, each letter in the word “SMART” stands for one step toward making smart decisions.

### **S – SLOW DOWN**

You have the right to take as much time as you need to make a good decision that is right for you.

### **M – MAKE A LIST OF YOUR OPTIONS**

Looking at every possible choice will help you know that you’ve really thought everything through.

### **A – ANALYZE YOUR CHOICES**

Be honest with yourself and think about the pros and cons of each option. Make sure to weigh your options because not all will have equal value.

### **R – REACH A DECISION**

Pick the best choice and consider what’ll help you STICK to your decision.

### **T – THINK AND EVALUATE**

Depending on the choice you make, you may need to check in from time to time and see how things are going.

## **The MAKING SMART CHOICES Model**

### **Teacher's Guide**

Whenever we have a decision to make, we need to think before we act if we want to make a SMART decision. But how do we go about doing this? In this model, each letter in the word "SMART" stands for one step toward making smart decisions.

#### **S – SLOW DOWN**

The LEAST effective way to make a decision is in the moment, before thinking about it first! You need to look at all the things that are going on – who might be involved? Who's definitely not? You have the right to take as much time as you need to make sure you are making a good decision.

#### **M – MAKE A LIST OF YOUR OPTIONS**

Looking at every possible choice you can make – even the silly ones, even the irresponsible ones – will help you know that you've really thought everything through. Talk about your options with people in your life who you know well and trust. And once you've made up your list you're ready for the next step.

#### **A – ANALYZE YOUR CHOICES**

This means thinking about the pros and cons of each, weighing your options and being honest with yourself. If your choice will lead to healthy behaviors, is consistent with your values, and will help you meet your future goals, it's the SMART choice for YOU. Once you've figured this out, you're ready to for the next step.

#### **R – REACH A DECISION**

After analyzing all of your choices, pick the one that is the right decision for you. Think about your decision and make sure it feels like a healthy, smart choice for you. Okay, so now that you've made a SMART decision, you need to think about what you'll need to STICK to it. For example, if your decision is about waiting to have sex, who in your life can support you in this decision?

#### **T – THINK AND EVALUATE**

Depending on the choice you make, you may need to check in from time to time, see how things are going, and look at what may need to change in order to stick with – or alter – the decision you've made. Thinking about how you made your decision in the first place – even going through the beginning part of the SMART model again – can really help you stay true to what YOU think is best, not what you think your friends or your partner want you to do.

*From Goldfarb, E. and Schroeder, E. (2004), Making SMART Choices about Sex:  
A Curriculum for Young People. Rochester, NY: Metrix Marketing.*

## STUDENT QUESTIONNAIRE

“Everything’s Different; Nothing’s Changed”

**DIRECTIONS:** Please answer the questions on this sheet using your own personal beliefs and ideas. Have your parent/caregiver fill out the other questionnaire. When you are both done, share your responses to the questions with each other. Note where you and your parent/caregiver agree and disagree. Also, notice what surprises you as you discuss your answers. After the interview, complete the reaction page with three questions.

How do you think the pressures to have sex are DIFFERENT today from when your parent(s)/caregiver(s) were your age?

In what ways do you think the pressures to have sex are THE SAME for teens today as they were for your parent(s)/caregiver(s) when they were growing up?

What are three things that people your age need or want most from your parent(s)/caregiver(s) when it comes to making healthy sexual decisions?

- 1.
- 2.
- 3.

## PARENT/CAREGIVER QUESTIONNAIRE

“Everything’s Different; Nothing’s Changed”

**DIRECTIONS:** Answer the questions on this sheet using your own personal beliefs and ideas. Your child will fill out their sheet with the same questions. When you are both done, share your responses to the questions with each other. Note where you and your child agree and disagree. Also, notice what surprises you as you discuss your answers with your child. Be sure to talk about how it felt to be pressured when you were your child’s age.

When you were young, how did people your age make decisions about sex? Do you think the pressures to have sex are DIFFERENT today from when you were your child’s age? Were these pressures different depending upon your gender?

In what ways do you think the pressures to have sex are THE SAME for teens today as they were for you when you were growing up?

What are three suggestions you could make that you think would help your child make healthy sexual decisions?

1.

2.

3.

## **Making SMART Choices Scenario #1**

Your boyfriend/girlfriend invites you and two other couples over on a night when their parents are out. You are all in one main room together, and each couple is kissing. At some point, you hear someone say, "I think we all need some more privacy," and soon both of the other couples disappear. Your boyfriend/girlfriend looks at you and says, "Now that we're alone, maybe we can finally take things to the next level."

*Adapted with permission from a lesson in Goldfarb, E. and Schroeder, E. (2004), Making SMART Choices about Sex: A Curriculum for Young People. Rochester, NY: Metrix Marketing.*

## Making SMART Choices Scenario #2

You are out with your boyfriend or girlfriend and your conversation moves to the topic of sex. Neither of you has ever had any kind of sex before and this is the first time you are talking about it. Your boyfriend or girlfriend says: "I really want to know what it feels like, don't you? What if we do it just once just to see what it feels like, and then we don't have to do it again if we don't want to?"

*Adapted with permission from a lesson in Goldfarb, E. and Schroeder, E. (2004), Making SMART Choices about Sex: A Curriculum for Young People. Rochester, NY: Metrix Marketing.*

### **Making SMART Choices Scenario #3**

You and your boyfriend or girlfriend have been together for six months. No one else you know has ever lasted that long in a relationship. You are both really in love and feel you were meant for each other. You agreed a few months ago that you were both too young to have sex and decided, together, to wait. There's a Valentine's Day dance at school and you plan to go together. That night, your boyfriend or girlfriend says, "Let's skip the dance. I know a place where we can go and be alone together."

*Adapted with permission from a lesson in Goldfarb, E. and Schroeder, E. (2004),  
Making SMART Choices about Sex: A Curriculum for Young People. Rochester, NY:  
Metrix Marketing.*

## HOMEWORK

Name: \_\_\_\_\_ Date: \_\_\_\_\_

*From Goldfarb, E. and Schroeder, E. (2004), Making SMART Choices about Sex: A Curriculum for Young People. Rochester, NY: Metrix Marketing.*

1. What, if anything, surprised you and your parent/caregiver about doing this assignment?

Me:

My parent/caregiver:

2. Were there more similarities in what you and your parent/caregiver wrote, or more differences? Provide at least two examples.

3. What is one thing you learned from doing this activity?

# Being Smart, Staying Safe Online

## ADVANCED PREPARATION:

<https://youtu.be/MmfiHdQ4Wfs?si=cBdcKnRM8QP1ansI>

**TARGET GRADE:** Grade 7, Lesson 8

**TIME:** 50 minutes

## FLORIDA STANDARDS ALIGNMENT:

- HE.7.PHC.1.3 - Explain the importance of assuming responsibility for personal and reproductive health behaviors.
- HE.7.PHC.3.4 - Predict the short and long-term consequences of engaging in health-risk behaviors.
- HE.7.PHC.3.9 – Practice behaviors that will maintain or improve personal health and reduce health risks, including reproductive health.

## LEARNING OBJECTIVE:

1. Describe positive aspects of online talking and messaging.
2. Identify examples of flirting and chatting that can be inappropriate or risky.
3. Demonstrate an understanding of how to deal with uncomfortable situations when communicating online.

## LESSON MATERIALS:

- Laptop or desktop computer with internet access
- LCD projector and screen
- Take Three Student Handout – one per student
- Take Three Handout – Teacher Version
- Internet Traffic Light Student Handout – one per student
- Internet Traffic Light Handout – Teacher Version
- Safe Online Talk Teacher Backgrounder
- Half-size sheets of paper, three for every student
- Green, yellow, and red markers or colored pencils, one set for each group of four to five students
- Whiteboard and markers
- Speakers to project sound from videos
- Strips of scrap paper
- Question box

## LESSON STEPS:

### GROUND RULES

*Note to teacher: This curriculum works best in classrooms where there's a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student's age and developmental stage*
- *agreed upon by everyone*

- *well explained so that students are very clear about what's expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

**Make your ground rules list with your class. The first six 6 in bold may work with your grade level.**

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***
- ***listen when others are speaking***
- ***speak for yourself***
- ***respect personal boundaries***
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students. Answer question(s) from the previous lesson.

*Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

Step 2: Ask students to raise their hand if they have ever heard the saying, "Don't talk to strangers." Ask, "How might this 'rule' change when we communicate online?" Probe for the fact that while the Internet allows people to keep in touch or hang out with friends they already know offline, it also allows people who don't know each other to interact, debate, share, and collaborate. Explain that the Internet gives students a wide range of opportunities to connect with or learn from people who may not be in their circle of close friends—whether through games, social network sites, blogs, instant messaging, forums, and so on. And while this can be great, connecting with people online occasionally can carry risks. Therefore, it is important to know how to deal with inappropriate situations if they arise.

Step 3: Distribute the Take Three Student Handout and explain to students that they are going to watch a video of three teens sharing their experiences about connecting with people online. Ask students to pay attention to the positives and the negatives that each of the three teens mentions in the film. Play the video, "Perspectives on Chatting Safely Online"

(<https://youtu.be/MmfiHdQ4Wfs?si=cBdcKnRM8QP1ansl>).

Once the video is over, ask the students to complete the Take Three Student Handout with a partner. Tell them they will have about 5 minutes in which to complete their sheets. As they are working, draw a table on the white board that looks like this, leaving enough space between the three young people's names:

	Positives	Negatives
Randy (Social Networking)		
Aseal (Gaming)		
Renee (Texting/Video chatting)		

Step 4: After about five minutes, ask students to share the positives and negatives that Randy, Aseal and Renee talk about in the video. Fill in the information on the board as it is contributed by the students. Ask, "What advice did they share in the video that connected for you?" After a few responses, ask, "Would you add any advice of your own?" Remind them of Renee talking about getting a "gut feeling" when she felt something was wrong online. Ask, "Have you ever had that kind of gut feeling, whether online or in real life? What does that feel like?" After a few students have responded say, "That gut feeling is there for a reason – it's kind of like an internal warning system. If something doesn't feel quite right, chances are it isn't. So it's important to pay attention and at least get out of the situation that's making us feel that way to have the chance to think about what was making us feel that way and why."

Step 5: Point out that Randy and Aseal used the word "harass" in the video to describe awkward or annoying interactions with strangers online. For example, Aseal says he was harassed when during a game someone he didn't know said some mean things about him. Explain that online flirting can sometimes be a less obvious form of harassment.

Ask, "How would you handle someone walking up to you on the street and making crude or sexual comments? (Students should respond that they would walk away and call for help if they felt threatened.) Ask "How would you handle someone trying to flirt with you on the street?" (Students may respond that it depends on whether they know the person or not. They may also say it depends on whether the person is someone their own age or much older.)

Explain to students that the same kinds of situations can happen when they are online. Say, "Sometimes it's obvious that what a person is saying online is wrong and even harmful. Other times people may flirt online, and so warning signs are not always so obvious." Discuss with students how flirting is normal among middle school students. When flirting is done face to face, it might feel comfortable. However, it quickly can become uncomfortable online, even when it's with other people that they may know. This is because people sometimes say things online to one another that they might not say if they were face to face.

Explain to students that when they are talking online with people they don't know in person, flirting and other sexual talk is risky behavior. There are times when flirting can lead to an ongoing

relationship with a stranger that seems deep and personal. But this is tricky, because some people online don't actually have teens' best interests in mind. If the person they're communicating with online says anything inappropriate or sexual, and especially if that person is older than they are, students should stop talking right away and then tell a friend or trusted adult about it.

Step 6: Distribute the "Internet Traffic Light Student Handout." Review the Internet Safety Tips on the handout with them aloud. Tell students to keep these rules in mind during the activity you are about to do.

Arrange students in groups of four or five. Distribute three sheets of paper for each student and one set of green, yellow, and red markers or pencils for each group. Follow the instructions on the "Internet Traffic Light Student Handout – Teacher Version" to guide students through the group activity and class discussion.

Process by using the following questions:

- What are some of the positive things and what are some of the negative things about connecting with people online? (Probe for: The Internet gives you the opportunity to connect with people your age that aren't in your close friend group; with the Internet, you can work together with people in an online game or virtual world; dealing with online harassment can be a pitfall when connecting with strangers online.)
- In what online situations should you get a "gut feeling" that tells you that you may be at risk? (Probe for: When people you know only online flirt with you or talk about sex; when someone you don't know wants you to send them a picture, to meet you alone, or asks you to keep your conversation a secret.)
- What are some rules for staying safe when talking and messaging online? (Don't reply to any questions that make you uncomfortable; tell a friend or trusted adult when someone bothers you online; avoid flirting or using sexual language online, especially with people you and your friends do not know in person; never plan a face-to-face meeting with someone you met online without taking along a parent or guardian.)

Step 7: Explain the homework assignment, where they will take the most important points they learned from today's class relating to being safe online that they think other students at school need to know and create a poster representing them. Tell them they can work with another student if they wish, or on their own. Determine how long you want to give them and provide a due date for that. Speak with your school about posting the homework assignments in the hallway, or keeping them in your classroom but having students from other classes visit to see what your class did.

Step 8: **QUESTION BOX:** Give each student several strips of scrap paper.

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

[Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.](#)

**ASSESSMENT:** The processing of the video clips and the homework assignment will demonstrate to the teacher whether the first and second learning objectives have been achieved. The stop light activity will fulfill the third learning objective.

**OPTIONAL HOMEWORK:** Have students create “Stay Safe Online!” posters to teach other students about the pros and cons about online communication. Suggest they refer to their Internet Traffic Light Student Handout, and include one or more of the tips in their posters.



Name(s)

Class

Date

## Internet Safety Tips

If you develop a friendship with someone online, be sure to ask yourself the following questions:

- *Has this person asked me to keep any information secret?*
- *Has this person flirted with me, or asked me about anything sexual?*
- *Has this person asked me about anything private?*
- *Have I felt pressured by this person to do anything?*
- *Do I feel true to myself— sticking to my values — when I talk to this person?*

If someone starts chatting with you about inappropriate topics or asks you to send a picture of yourself, end the conversation immediately. And never plan a face-to-face meeting with someone you met online without taking a parent or guardian along.

## Directions

*When people drive, they should know the rules of the road. Traffic lights tell them when it's safe to move forward, and when they need to stop.*

1. Take three sheets of paper and draw a circle on each one. Color your circle “lights” green, yellow, and red.
2. With your group, read through each of the following stories. Use the Internet Traffic Light descriptions on the next page to help you decide whether it is a green, yellow, or red light situation. When you have made your choice, take one of your lights and place it face down in front of you.
3. Wait until all group members have made their choices, and then flip your papers over. Discuss the choices you made, and decide as a group which one is best.
4. After each story, write down the choice your group made and why.



<b>Stop! Too dangerous to proceed.</b>	The person you are talking to is clearly acting inappropriately, and the conversation needs to end.
<b>Slow down, be cautious – and be prepared to stop.</b>	Something about this conversation makes you feel uncomfortable. You’re alert for any signs of inappropriate or suspicious behavior.
<b>Coast is clear (but look both ways!)</b>	You feel safe and enjoy interacting with this person online. But you also remember that all conversations can take unexpected turns, so you’re prepared to put the brakes on if you need to. You have not provided any private information.

## Abby’s Story

Abby is 14. Yesterday was her friend Ivan’s bar mitzvah, and Abby chatted with some of his relatives at the party. Today, Abby logs on to the social networking site MyFace and sees a friend request from Ivan’s uncle. She doesn’t know him very well, but they did chat a little bit about school at the dessert buffet.

**What light do you think Abby should choose in this situation? Explain your choice.**

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## Vince’s Story

Vince is 12 and loves playing EscapeGo – a fantasy combat MMORPG (massive multiplayer online role-playing game). When he first started playing, another avatar was nice to him and helped him learn the ways of the game. Since then they’ve been good friends online, completing quests together and protecting each other during combat. Once, one of their teammates asked them how old they were during a quest. “Enough small talk, dude. Nobody cares, just play the game,” Vince’s friend said in response.

**What light do you think Vince should choose in this situation? Explain your choice.**

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## Keyanna’s Story

Keyanna is 13 and she often plays Whatville, a virtual world for middle school kids like herself. One day, another avatar throws a heart her way. Keyanna knows that throwing hearts is a common way to flirt on Whatville. She also knows he’s not a newbie, because it takes someone with a lot of experience to design the kind of appearance that his avatar has.

**What light do you think Keyanna should choose in this situation? Explain your choice.**

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## Catherine’s Story, Part 1

Catherine, who is 15, logs on to a chat room for teenagers. Her screen name is CathyKisses15. A guy called MikeyMike99 said hi to her a few days ago, and they’ve talked every day since. He’s really easy to chat with, and she likes venting to him about things that annoy her at school and at home. She hasn’t told him anything too personal yet. “U seem so mature. Ur 15 right? I’m 20,” MikeyMike99 says.

**What light do you think Catherine should choose in this situation? Explain your choice.**

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## Catherine’s Story, Part 2

Catherine is back online with MikeyMike99, and they’ve been talking for about a week now. He’s starting to flirt with her, and she’s flattered because he seems pretty mature. After all, Catherine’s not really into any of the guys at her school, so she likes flirting with Mike online. She’s pretty good at it too. And yeah, he said something that might have been kind of sexual once or twice. Today he writes, “Can I show u a pic?” Before she types a response, he says again: “Keep this private ok? I like u, Cat. I hope u like me 2.”

**Now what light do you think Catherine should choose? Explain your choice.**

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## Teacher Instructions

After arranging the class into groups of four or five and distributing the **Internet Traffic Light Student Handout**, guide students through the Internet Safety Tips below. These tips also appear on their handouts.

## Internet Safety Tips

If you develop a friendship with someone online, be sure to ask yourself the following questions:

- *Has this person asked me to keep any information secret?*
- *Has this person flirted with me, or asked me about anything sexual?*
- *Has this person asked me about anything private?*
- *Have I felt pressured by this person to do anything?*
- *Do I feel true to myself – sticking to my values – when I talk to this person?*

If someone starts chatting with you about inappropriate topics or asks you to send a picture of yourself, end the conversation immediately. And never plan a face-to-face meeting with someone you met online without taking a parent or guardian along.

**DISCUSS** the idea that just as drivers need rules when they're on the road, students need rules when they're online. Drivers also need traffic lights to tell them when they need to stop, and when it's safe to proceed. Because the Internet has no traffic lights, students need to develop their own internal traffic lights. These will tell them when it's safe to proceed, and when they should come to a stop.

**TELL** students to begin the activity by reading the directions on their handouts (see below).

## Directions

*When people drive, they should know the rules of the road. Traffic lights tell them when it's safe to move forward, and when they need to stop.*

1. Take three sheets of paper and draw a circle on each one. Color your circle "lights" green, yellow, and red.
2. With your group, read through each of the following stories. Use the Internet Traffic Light descriptions on the next page to help you decide whether it is a green, yellow, or red light situation. When you have made your choice, take one of your lights and place it face down in front of you.
3. Wait until all group members have made their choices, and then flip your papers over. Discuss the choices you made, and decide as a group which one is best.
4. After each story, write down the choice your group made and why.



<b>Stop! Too dangerous to proceed.</b>	The person you are talking to is clearly acting inappropriately, and the conversation needs to end.
<b>Slow down, be cautious – and be prepared to stop.</b>	Something about this conversation makes you feel uncomfortable. You're alert for any signs of inappropriate or suspicious behavior.
<b>Coast is clear (but look both ways!)</b>	You feel safe and enjoy interacting with this person online. But you also remember that all conversations can take unexpected turns, so you're prepared to put the brakes on if you need to. You have not provided any private information.

**ALLOW** students 10 to 15 minutes to complete the activity. Then reassemble the class.

**DISCUSS** each story, inviting students to explain the choices their groups made. Although the students should think critically about their choices, it is important for them to understand that there sometimes are truly correct answers, especially when it comes to “red light” and “yellow light” situations. You may also use the following material to guide class discussion:

### Abby's Story

*Abby is 14. Yesterday was her friend Ivan's bar mitzvah, and Abby chatted with some of his relatives at the party. Today, Abby logs on to the social networking site MyFace and sees a friend request from Ivan's uncle. She doesn't know him very well, but they did chat a little bit about school at the dessert buffet.*

**Discussion:** YELLOW – SLOW DOWN, BE CAUTIOUS. Abby should think twice about this one. The best thing she can do is ask her parents what they think about the situation. If they think it's fine, Abby should also let Ivan know and ask for his permission. If everyone gives her the thumbs up – and she feels comfortable being the uncle's friend on MyFace – then it's probably all right to accept his request. Abby should consider putting him on a limited profile setting so that he can't see her personal information or tagged photos. She should also check out their mutual friends.

**Additional Questions:** *What if Ivan's aunt asked to be Abby's friend on MyFace instead? Would the situation feel different? Why or why not? Do you have adult friends on Facebook or MySpace? If so, what made you decide to let them be your online friend?*



## Vince's Story

Vince is 12 and loves playing *EscapeGo* – a fantasy combat MMORPG (massive multiplayer online role-playing game). When he first started playing, another avatar was nice to him and helped him learn the ways of the game. Since then they've been good friends online, completing quests together and protecting each other during combat. Once, one of their teammates asked them how old they were during a quest. "Enough small talk, dude. Nobody cares, just play the game," Vince's friend said in response.

**Discussion:** GREEN – COAST IS CLEAR (BUT LOOK BOTH WAYS!) It sounds like Vince's friend has his mind set on *EscapeGo* and not much else. This is a good sign. It's exciting to be able to collaborate and strategize with other players in real time, too – that's the beauty of MMORPGs. Vince should still be aware that he's interacting with strangers online, and that it's never a good idea to reveal private information in these kinds of settings.

**Additional Questions:** *What if Vince's friend asked him how old he was later on? What if he wanted to meet Vince in person to talk about gaming?*

## Keyanna's Story

Keyanna is 13 and she often plays *Whatville*, a virtual world for middle school kids like herself. One day, another avatar throws a heart her way. Keyanna knows that throwing hearts is a common way to flirt on *Whatville*. She also knows he's not a newbie, because it takes someone with a lot of experience to design the kind of appearance that his avatar has.

**Discussion:** GREEN – COAST IS CLEAR (BUT LOOK BOTH WAYS!) Flirting online can be fun, as long as it's in a safe setting. And it's a popular thing to do in tween/teen virtual worlds like *Whyville* and *Habbo Hotel*. Keyanna can choose to throw a heart back or not – it's her decision. It's also a good sign that the other avatar doesn't look like a newbie. It takes a lot of time, energy, and youth-to-youth knowledge to make a trendy-looking avatar on *Whatville*. However, you can't always judge a book by its cover. If Keyanna starts feeling uncomfortable in any way, she should stop contact with this avatar immediately.

**Additional Questions:** *What if the male avatar started interacting with Keyanna in *Whatville* and no one else? Do you think that's a warning sign?*

## Catherine's Story, Part 1

Catherine, who is 15, logs on to a chat room for teenagers. Her screen name is *CathyKisses15*. A guy called *MikeyMike99* said hi to her a few days ago, and they've talked every day since. He's really easy to chat with, and she likes venting to him about things that annoy her at school and at home. She hasn't told him anything too personal yet. "U seem so mature. Ur 15 right? I'm 20," *MikeyMike99* says.

**Discussion:** YELLOW – SLOW DOWN, BE CAUTIOUS. And definitely consider coming to a complete



stop. Catherine should be aware that her screen name makes her a potential target for inappropriate contact in the chat room: it's flirty, indicates her age, and even says her name. It's good that Catherine hasn't divulged too much personal information to MikeyMike99. That said, she should be cautious about treating him as her confidant. Some people (older teens or young adults, more commonly) develop inappropriate relationships with younger teens online over time, establishing feelings of trust and affection at first in order to make their advances seem more normal.

**Additional Questions:** *Catherine insists she hasn't told MikeyMike99 anything too personal. From your perspective, what does that mean?*

## Catherine's Story, Part 2

*Catherine is back online with MikeyMike99, and they've been talking for about a week now. He's starting to flirt with her, and she's flattered because he seems pretty mature. After all, Catherine's not really into any of the guys at her school, so she likes flirting with Mike online. She's pretty good at it too. And yeah, he said something that might have been kind of sexual once or twice. Today he writes, "Can I show u a pic?" Before she types a response, he says again: "Keep this private ok? I like u, Cat. I hope u like me 2."*

**Discussion:** RED – STOP! TOO DANGEROUS TO PROCEED. Catherine has found herself in a sticky situation, whether she knows it or not. Talking sexually with people online is risky, especially if you know that person is older. There's a good chance that MikeyMike99's picture is inappropriate, and Catherine should feel uncomfortable that he is asking her to keep something private. Even though she's gone too far already, the power is still in her hands. Catherine should stop talking with Mike entirely. Even if it's a little embarrassing, she should talk to friend or parent about what happened, too.

**Additional Questions:** *What are some ways in which MikeyMike99 tries to make Catherine feel comfortable? (He uses a nickname (Cat) affectionately; he also appears to make himself vulnerable by telling her that he likes her, hopes she likes him too.)*

# The World Around Me

**TARGET GRADE:** Grade 8, Lesson 1

**TIME:** 50 minutes

## FLORIDA STANDARDS ALIGNMENT:

- HE.8.PHC.2.1 – Analyze the influences of media/social media on physical, emotional, and social health.
- HE.8.PHC.2.4 – Assess the role of the beliefs of friends and peers on health of adolescents.
- HE.8.CEH.2.1 – Analyze how the school and community may influence adolescent health.

## LEARNING OBJECTIVE:

1. Name at least two people or entities from which young people receive messages about relationships and sexuality.
2. Describe at least one message young people might receive about sex and sexuality from each of these sources.
3. Explain how these messages can have an impact on a young person's sexual decision-making.
4. Reflect on how examining these influences can have an impact on their self-concept and body image, which can affect their own sexual decision making in the future.

## LESSON MATERIALS:

- Scenario: Leah (enough two-sided copies for one quarter of the students in the class)
- Scenario: Malik (enough two-sided copies for one quarter of students in the class)
- Students' journals (or sheets of lined paper, one per student, if journals are not being used in class)
- White board and markers
- Pencils in case students do not have their own
- Strips of scrap paper
- Question box

## LESSON STEPS:

### GROUND RULES

*Note to teacher: This curriculum works best in classrooms where there's a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student's age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what's expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

***Make your ground rules list with your class. The first six 6 in bold may work with your grade level.***

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***

- *listen when others are speaking*
- *speak for yourself*
- *respect personal boundaries*
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students.

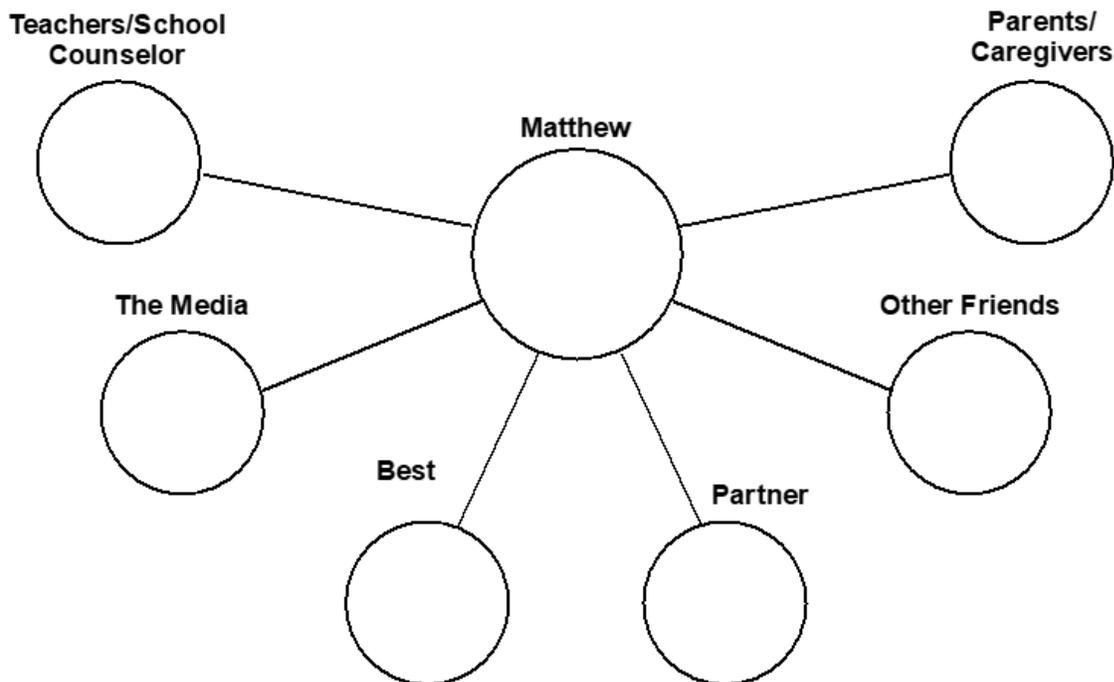
Step 2: Introduce the topic by telling students, "When we make decisions about significant things in our lives, we rarely do so without considering the thoughts, experiences, and messages we get from various sources in our lives. We ask people in our lives for their advice – and sometimes we get it even when we don't ask for it! Other times, we are barely aware of how outside messages do or don't have an influence on us and our decision-making."

Draw a large circle on the board, about 18" in diameter. On the top of the circle write a name that reflects the population of your students (for the purposes of this example, we will use "Matthew"). As you are drawing the circle and writing the name, "Matthew," or another name at the top, say, "Imagine for a moment that we have a teenager named Matthew.

Even though he's still in school, he's thinking about what he wants to be when he grows up." In the center of the circle, write, "Career." Say, "He's really good at art and photography and is thinking he might want to make that his job. From what types of sources might he expect to receive messages about his future career choices?" Probe for the following:

- Parent(s)/Caregiver(s)
- Teachers or Counselors at School
- Other Family Members
- Professional Artists and Photographers
- The Media
- Partner
- Best Friend
- Celebrities

As students contribute a particular source, draw a line from the center circle to another smaller circle that you draw. Then write the category of person or source at the top as you did with the first circle. Depending on what is contributed, you should end up with something that looks similar to this:



Go through the examples and ask the class one message Matthew might hear from his parent(s)/caregiver(s) about this possible work choice. Probe for, "Great, go for it!" or "Don't do it, it's not practical." Write that example in the circle titled, "Parent(s)/Caregiver(s)." Go around the rest of the cluster and add in one message, positive or negative, that he might expect to hear from each possible source.

Once you have put one example in each circle, ask the students to tell you what they notice about the messages, which may be consistent or inconsistent. Ask, "Has anyone ever asked more than one person for their opinions about something and gotten two totally different answers? If so, what does that feel like?" Probe for, "confusing," "overwhelming," "helpful," etc.

Ask, "So, whose opinions do you think will carry more weight with Matthew?" After a few responses, acknowledge what was shared and if it has not been shared already say, "It also depends on his relationship with each of these entities. If he is particularly close with someone or has relied on their advice in the past and it's helped him, he may consider their thoughts more seriously than other people's."

- Step 3: Say, "Now we are going to look at sexual decision-making and the people and entities that can have an impact on these decisions." Break the class into groups of four. Once they are in their groups, tell them they are going to work together on a scenario in which they'll have a character who they will be mapping as they did with Matthew. Distribute the Leah scenario to half the class and the Malik scenario to the other half. Let them know they will have about 15 minutes in which to do their work.
- Step 4: After about 15 minutes has passed, ask the groups to stop their work. Tell the students that half of groups worked on one scenario, and the other half on a different one. Ask for students from various groups that had the Leah scenario to read the scenario, alternating students for each paragraph. Ask groups to share the influences they noticed, and their responses to the questions asked.
- Next, ask for students from the other groups who had the Malik scenario to read their scenario, alternative students with each paragraph. Ask groups to share the influences they noticed, and their responses to the questions asked.
- Step 5: Acknowledge the work they did and ask them to hand in their worksheets. Ask students to take out their journals and write the following questions on one of the pages (have these written on the board or write them as you speak):

1. "Who or what do I consider before making decisions about sex or relationships?"
2. "How might using alcohol affect how I make decisions about sex or relationships, and whether I stick to them?"
3. "How can thinking about people and messages around me help me with my future decisions about sex and relationships?"

Ask them to write a minimum of three sentences in response to each question and hand in their journals during the next class.

*Note to the Teacher: If you are not using journals in class, feel free to have students write these prompting questions on a sheet of paper. You can also post or email an electronic version and have them complete these online and submit them to you once completed.*

**Step 6: QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**ASSESSMENT:** The first three learning objectives will be measured by classroom participation in the large group discussion and small group work; as a result, the teacher will need to solicit contributions from different students during the report-back portion of the lesson. Achievement of the fourth learning objective will be determined by completion of the homework assignment.

**OPTIONAL HOMEWORK:** Students will complete a journaling assignment responding to prompts as provided at the end of class, to be handed in during the next class period.

# Leah

Leah has been with Malik for almost a year. Malik has been bringing up whether they should start having sex, and Leah's trying to figure out whether the time is right. She's never had sex before, and she's nervous about getting pregnant or an STD. Malik's had sex once before, but things didn't work out with them. Malik says he's curious, but that he's not sure whether the time's right – he's got a lot of plans for the future, and if he ends up getting Leah pregnant or either of them get an STD, that could really affect his hopes for college and getting a scholarship.

Leah's best friend has had sex, but he goes back and forth as to whether he thinks Leah should, saying, "I think it's different for guys." They hang out a lot and watch reruns of "16 and Pregnant," as well as "East Los High," and talk about all the people who have sex on those shows and what's happened as a result. Leah doesn't feel like she can talk with her mom about this stuff, because her mom was brought up in a pretty conservative household and they've never talked about sex. Leah does, however, have a good relationship with her mom's best friend, who she's known since Leah was a baby, and feels like she can talk with her about anything.

Sometimes, when Malik gets stressed out or nervous, he drinks. When he does this, he gets a bit more assertive with Leah – as she tells her best friend, "he's all hands when he drinks." They've almost had sex a few times when he's gotten like this, but Leah's always told him to stop and he has. She loves Malik, she really does – she's just not sure whether the time is right or whether he's the one.

## Instructions:

1. On the back of this sheet, map the influences in Leah's life by writing the message(s) she's getting from each in the circles provided.
2. Is anyone missing, even if they're not listed in the story? If so, add them in to the "other" circle and add in what possible messages she might get from them about her decision.
3. We found out that Malik drinks sometimes – how does that come into play when it comes to Leah's decision?

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4. Who or what do you think has a LOT of influence on Leah? Why?

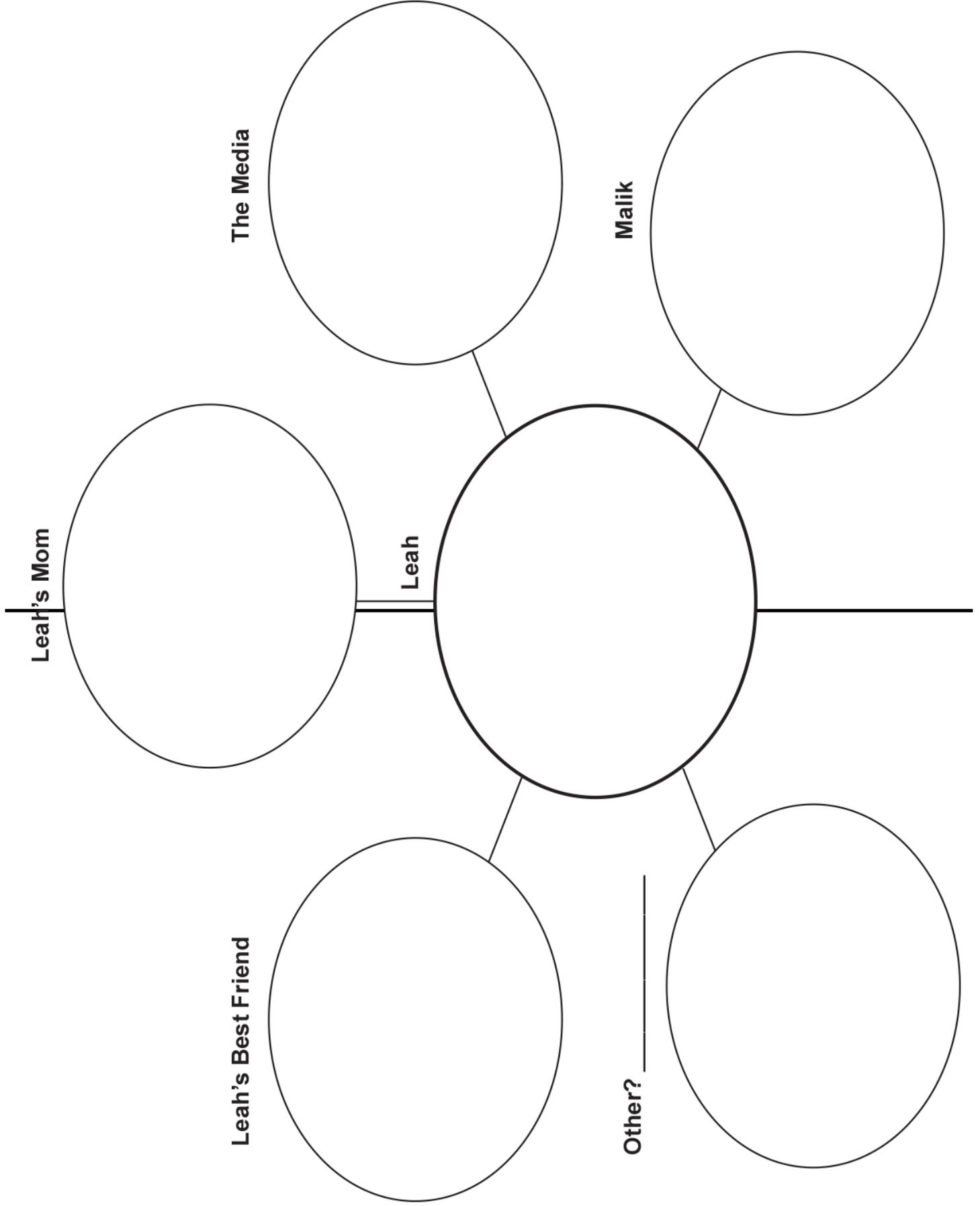
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5. What does this tell you about making decisions about big things in your life, like sex and sexuality?

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# Malik

Malik has been with Leah for almost a year. Leah has been bringing up whether they should start having sex, and Malik's trying to figure out whether the time is right. He's never had sex before, and he's nervous about getting Leah pregnant or getting an STD. Leah's had sex once before, but things didn't work out with them. Malik's curious, but he's not sure whether the time's right – he's got a lot of plans for the future, and if he ends up getting Leah pregnant or either of them get a really serious STD, that could impact his hopes for college and getting a scholarship.

Malik's best friend has had sex, and regularly asks Malik what he's waiting for. Malik's parents are very devout Catholics, and they don't talk about sex except to talk about abstinence and waiting for marriage. Malik is the youngest of four children, but his brothers and sisters are all older and don't live at home anymore. He only sees them at holidays and doesn't consider himself close to any of them. Malik is nervous about whether he'll know what to do.

Sometimes, when Malik gets stressed out or nervous, he drinks. That's when he feels most comfortable talking about sex with Leah – and when he feels like they're really close.

## Instructions:

1. On the back of this sheet, map the influences in Malik's life by writing the message(s) he's getting from each in the circles provided.
2. Is anyone missing, even if they're not in the story? If so, add them in to the "other" circle and add in what possible messages he might get from them about his decision.
3. We found out that Malik drinks sometimes – how does that come into play when it comes to his relationship with Leah?

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4. Who or what do you think has a LOT of influence on Malik? Why?

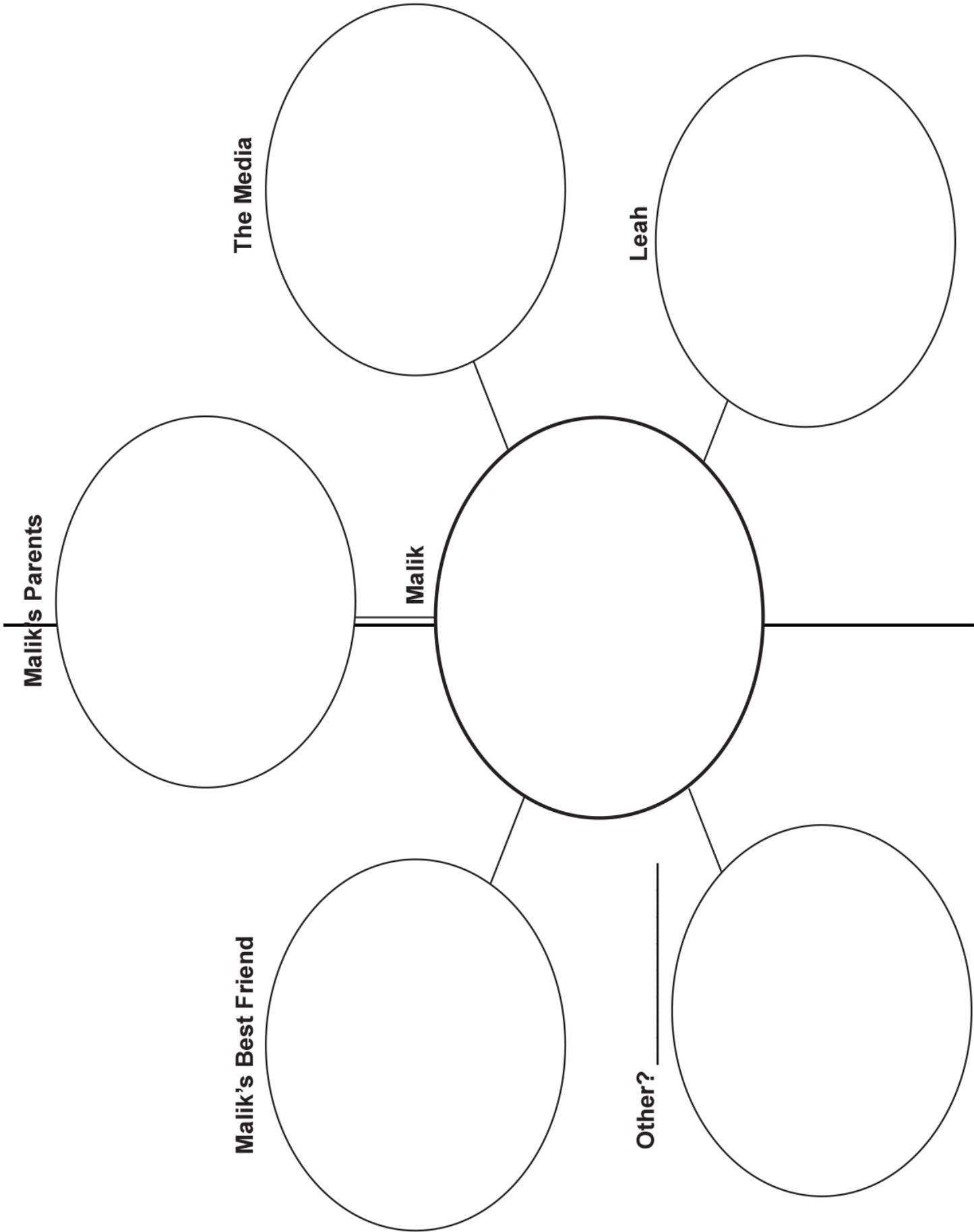
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5. What does this tell you about making decisions about big things in your life, like sex?

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**Malik's Parents**

**The Media**

**Leah**

**Malik**

**Malik's Best Friend**

**Other?**

# Healthy or Unhealthy Relationships

## ADVANCED PREPARATION:

- Print out enough of the Healthy vs. Unhealthy Relationship cards for half the class. Fold each one in half.
- Tape the Unhealthy and Healthy Relationship signs on the front board with a good distance between them to create a continuum.
- Print out the exit slip sheets and cut them in half, so each student gets one half (which is one complete exit slip).
- Tear off individual one-inch pieces of tape, enough for each sign in the Healthy vs. Unhealthy Relationships activity and stick on a ledge or table end so they are available for students to take and use during the activity.

**TARGET GRADE:** Grade 8, Lesson 2

**TIME:** 50 minutes

## FLORIDA STANDARDS ALIGNMENT:

- HE.8.PHC.2.1 – Analyze the influences of media/social media on physical, emotional, and social health.
- HE.8.PHC.2.4 – Assess the role of the beliefs of friends and peers on health of adolescents.
- HE.8.CEH.2.1 – Analyze how the school and community may influence adolescent health.

## LEARNING OBJECTIVE:

1. Characterize, in their own opinion, at least one relationship trait as either healthy or unhealthy.
2. Name at least two types of power differential in relationships, as well as their implication for the relationship.
3. Describe at least two ways in which an unhealthy relationship can become a healthy one.
4. Apply their understanding of healthy relationships to a couple represented in the media.

## LESSON MATERIALS:

- Two signs, one reading “Healthy Relationship” and one reading “Unhealthy Relationship”
- Enough of the 16 Healthy vs. Unhealthy Relationships cards for half the students in the class, prepared as described
- Homework: “Healthy Relationships All Around Us,”
- one per student
- Exit slips – one per student
- Masking tape
- White board and markers
- Extra pencils in case students don’t have their own
- Strips of scrap paper
- Question box

## LESSON STEPS:

## GROUND RULES

*Note to teacher: This curriculum works best in classrooms where there's a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student's age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what's expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

**Make your ground rules list with your class. The first six 6 in bold may work with your grade level.**

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***
- ***listen when others are speaking***
- ***speak for yourself***
- ***respect personal boundaries***
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

**Step 1: Review Ground Rules with students. Answer question(s) from the previous lesson.**

*Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**Step 2: Ask, "How many of you can think of a couple in your lives – it could be family members, friends, siblings, whoever – who you think are in a healthy relationship?" After some students have raised their hands, ask, "How many of you can think of a couple you'd consider to have an unhealthy relationship?"**

Say, "I bet if we described all these couples, we would not agree about whether they were healthy or unhealthy. That's because we have all received a variety of messages about how people should behave in relationships. These messages have a big impact on whether we see something as healthy,

unhealthy – or a mix. So today we’re going to take a look at some things that can happen in relationships – and whether you think these things mean a relationship is healthy or unhealthy.” Break the students into pairs. Give each pair one of the healthy vs. unhealthy relationship cards. Ask them to talk together about whether they think what they have describes a healthy relationship or an unhealthy relationship. Tell them that once they’ve decided, they should turn their sheet over and write down why they think it is unhealthy, healthy or somewhere in between. Explain that they are “Team One,” and so should only complete the first line on the back of the sheet, not the second. Hold up a sheet to demonstrate as you are giving these instructions.

Tell them that once they’ve finished writing their reason(s), they can bring their piece of paper up to the front of the room and tape it up where they feel it goes. Point out that there is a lot of space between the Unhealthy and Healthy Relationship signs, so they can put their card under one of the signs, or somewhere in between if they feel like it has some healthy or unhealthy characteristic, but isn’t completely one or the other.

After about 5 minutes, if all of the cards are not up, encourage students to stick their cards up on the board. Ask them to stay in their same pairs.

Step 3: Starting at one end of the continuum, read each of the cards. Once you have read them all, ask the students to look at what’s up on the board and comment on what they notice. Their responses will depend on where the cards have been placed (the activity is intentionally opinion-based, so the board will likely look different each time).

For example, students might say, “These all seem really unhealthy,” or “None of the cards are either completely unhealthy or healthy.”

Ask, “Are there any up here that you would want to move? Which one(s) and why?” As students indicate particular cards, take them down and read on the back why the pair of students who had each card chose to place it where they did. Ask whether that changed their view. Because this is an opinion-based activity, do not actually move any of the cards, just discuss a few.

*Note to the Teacher: Go through up to five of the cards, adjusting for student engagement in this part of the activity. If the discussion lags, stop after three; if it is still vibrant and connected, you may choose to continue beyond the five.*

Here are some suggestions for a few in which there is a lot of grey area and about which you will likely have extensive discussion:

- A guy walks his girlfriend to school every morning, meets her for lunch every day, and picks her up to walk her home at the end of each afternoon.
- A girl notices her boyfriend is getting a lot of attention from two different people at school. She goes up to each of them separately and warns them to stay away from him, “or else.”
- A couple has an agreement that they won’t put passwords on their phones and can check each others’ texts and social media accounts whenever they feel like it.

Step 4: Ask, “In which of these relationships do you feel like one person has more power than the other person?” Point to the example of a girl who has a boyfriend who is ten years older than she is. Ask, “In what ways could the older boyfriend have more power than the younger one?” Write a “P” on that card to indicate that there’s the potential for one partner to have more power than the other.

As students mention other examples where they feel like there could be a power difference, write a “P” on each of those.

Say, “Power can come in different forms. Sometimes, people realize there’s a power difference and are okay with it – and other times, a power difference can lead to really unhealthy or even abusive relationships. I’m going to ask you to keep the idea of power in mind as you do this next part of the activity.”

Step 5: Ask one student from each pair to come up to the board and take one of the cards, not the one they originally worked on, and return to sit with their partner. Tell them that they should talk about what’s on the card, turn the card over and read why the other students labeled it as they did. Then ask them to discuss what would need to change in order for them to feel like this card could go underneath the “Healthy Relationship” sign. Have them write their answers in the space provided. Tell them they have about 5 minutes in which to do this. As they are working, take the “Healthy Relationship” sign and move it to a more centered location on the board.

Step 6: Go around the room and ask the pairs to share what they came up with as specific steps or things their couple needs to do to make their relationship healthy. Paraphrase the characteristics they share and write them on the board beneath the “healthy relationship” sign.

For example, if students were to say, “They need to stop checking each others’ phones,” you might write “Trust” on the board and “cell phones” in parentheses next to that. If any of the next pairs repeat something that was already said, put a check mark next to that characteristic.

Step 7: Ask students to look at the list they generated and what they think of what they see. Again, because this list is generated from the students, it may look different each time. Process the list by asking the following questions:

1. Are you surprised by what’s received the most check marks here? Why or why not?
2. Is there anything missing? Is there anything else that would help make a relationship healthy wasn’t mentioned?
3. How easy or challenging is it to do some or all of these? For the ones labeled as “challenging,” ask why they think that is.
4. Ask, “What about the idea of power? Where do you see power reflected in
5. this list?”

Say, “What relationships look like and how they work can be different – but as you see here, there are certain characteristics that people will agree mean that a relationship is healthy. When a relationship is healthy, it’s good for both people involved – and it doesn’t have a negative impact on the people outside of the relationship who are still a part of the couple’s lives, like friends and family members.”

Describe the homework assignment and distribute the worksheet. Tell students that you created a list of characteristics that tend to be considered part of healthy relationships, which will include some of what they generated on the board as well as some other ideas. Ask them to talk about a couple they know – whether in real life or from a movie or tv show or a couple from a book or they’ve read about online -- and say whether they think they are a healthy couple based on those characteristics.

Distribute the Before You Go exit slips to the students and ask them to complete them and hand them to you on the way out of class.

Step 8: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**ASSESSMENT:** Teachers will be able to assess how well they have reached the first three learning objectives during the in-class activity, discussion and process. The fourth learning objective will be achieved through the homework assignment.

**OPTIONAL HOMEWORK:** Healthy Relationships All Around Us – Students are to provide three examples of couples in their own lives, or from a tv show, book, movie or other source and explain why they think they are healthy relationships.

## Healthy Relationships All Around Us!

Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Instructions:** Think about relationships you've seen in your life. These could be characters from a tv show or movie, public figures or people you know personally. Please provide three examples of healthy relationships and explain why you think they're healthy, based on what we talked about in class. Be sure to explain your reasons with examples, too!

-----

### EXAMPLE

Couple: Beyonce and Jay-Z

Know them from: Music videos and award shows

Why do you think this is a healthy relationship? Please give examples:

**They talk about each other a lot in the media, always in positive ways. They started a family together and both seem really into each other whenever you see them in pictures.**

-----

### Couple 1:

Know them from:

Why do you think this is a healthy relationship? Please give examples:

### Couple 2:

Know them from:

Why do you think this is a healthy relationship? Please give examples:

### Couple 3:

Know them from:

Why do you think this is a healthy relationship? Please give examples:

**BEFORE YOU GO...**

The characteristic of healthy relationships that most stood out for me from today's class was

---

---

because \_\_\_\_\_

---



**BEFORE YOU GO...**

The characteristic of healthy relationships that most stood out for me from today's class was

---

---

because \_\_\_\_\_

---

# Choose Your Words Carefully

## ADVANCED PREPARATION:

- On a sheet of chart paper, write the following statements in large letters:
  - Hey, can I talk with you about something?
  - Sure, what's up?
  - I can't go to your game, I'm sorry.
  - I'm not going to your game.
  - Let's talk later.
- Cut the chart paper so that each statement is an individual strip, at least three inches high each.
- Print out enough copies of the Choose Your Words activity statements for half the number of students in your class. Cut each copy into individual strips and place the strips into an envelope so that each envelope has an entire set of strips in it. You should have envelopes for half the class. Label half of the envelopes "Partner A" and half "Partner B."

**TARGET GRADE:** Grade 8, Lesson 3

**TIME:** 50 minutes

## FLORIDA STANDARDS ALIGNMENT:

- HE.8.PHC.2.1 – Analyze the influences of media/social media on physical, emotional, and social health.
- HE.8.PHC.2.4 – Assess the role of the beliefs of friends and peers on the health of adolescents.
- HE.8.PHC.3.9 - Apply healthy practices and behaviors that will maintain or improve personal health and reduce health risks.
- HE.8.CEH.2.1 – Analyze how the school and community may influence adolescent health.

## LEARNING OBJECTIVE:

1. Identify at least two characteristics of healthy communication in a relationship.
2. Apply their understanding of healthy communication to a scenario between two people who are discussing technology use within a relationship.

## LESSON MATERIALS:

- Large strips of chart paper statements, prepared as indicated
- Masking tape
- Choose Your Words activity statements, prepared as indicated
- Envelopes with Choose Your Words activity statements, prepared as indicated (there should be one envelope per every two students)
- Homework: "iRelationship" – one per student
- Teacher's Guide for Homework – one copy
- White board and markers
- Strips of scrap paper
- Question box

## LESSON STEPS:

## GROUND RULES

*Note to teacher: This curriculum works best in classrooms where there's a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student's age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what's expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

**Make your ground rules list with your class. The first six 6 in bold may work with your grade level.**

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***
- ***listen when others are speaking***
- ***speak for yourself***
- ***respect personal boundaries***
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

**Step 1: Review Ground Rules with students. Answer question(s) from the previous lesson.**

*Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**Step 2: Ask, "Has anyone ever had to talk with someone about something really important – but you weren't sure how to do it?" Acknowledge the raised hands and ask, "What specifically can make it challenging to talk with someone about something important to you?" Probe for:**

- You don't want to hurt their feelings
- You're not sure whether you should talk with them about it
- You're embarrassed about it
- You don't want to make them mad
- You just don't want to deal and hope that ignoring it will make it go away

- You like them as more than a friend and you're worried if you talk about something serious they won't want to hang out with you anymore

Say, "Whether it's a friendship or a relationship, it's important to be able to talk about things that come up. If a friend always teases you and you really hate when he does that – but you never tell him that you hate it – it's not his fault if he keeps doing it and makes you mad, it's yours because you didn't say anything about it!

The big question, of course, is how do you talk with someone about something that's important to you?"

Step 3: On the board write, "Partner A" at head level, followed by "Partner B" about five feet to the right of it. As you're writing, say, "Let me give you an example. Let's say I was Partner A, and the scenario was that my significant other wanted me to stay after school and watch their basketball game." Between the two headers, write "Basketball Game." Now, I want to be supportive, but I already told my best friend I'd hang out with them. So how do I bring this up?"

Post the large flipchart strip that reads, "Hey, can I talk with you about something?" Say, "This is always a good place to start. Giving the other person a heads up that you need to talk will get their attention and let them know that it's important they listen." Under the Partner B sign, post the flipchart strip that reads, "Sure, what's up?."

Say, "If you're Partner B, you want to respond to let the other person know that not only is it okay for them to talk, but that you're also going to pay attention to them – not anyone else, not your phone, not a video game – but them. Make sense?"

Under Partner A, post "I can't go to your game, I'm so sorry." Ask the students what they think of this as a way of breaking the news to the other person. Ask, "What might be some ways Partner B might respond?"

Once you've gotten some reactions, take down, "I can't go to your game, sorry" and ask, "How would Partner B respond, do you think, if I'd instead said this?" and post the large flipchart strip that reads, "I'm not going to your game. Let's talk later." Have a few students respond. Ask, "What's different between the two?" Probe for the fact that the last statement doesn't explain why and sounds like Partner A is mad or like something's wrong.

Say, "Clearly, I have some choices as to how I can bring this up – but regardless of what I choose, it's going to have an impact on how the other person responds. I won't necessarily know what that impact is until my significant other responds – but I can think before I speak and choose my words carefully. Which is what you are about to do."

Step 4: Divide the class into pairs. Then put two pairs together to form a group of four. Say, "In each group of four are two pairs. Each pair will represent one person in a relationship, partner A or partner B. This couple needs to talk about an important part of any relationship: how they're going to deal with technology in their communication with each other and with others about their relationship."

Hold up an envelope and say, "One pair will receive an envelope that reads 'Partner A' and the other, 'Partner B.' Inside are strips of paper with individual statements. You are going to create a conversation between the partners using these statements. Here are the rules:

1. You can only use each slip once.
2. You are both interested in staying together – you want the relationship to work!

You will have five minutes for each pair to look through their statements to get a sense of what's there. Then when I say, 'Go,' Partner A will start the dialogue with one of their statements. Partner B will then have a minute in which to put down their response. Partner A shouldn't move forward until I say so." Answer any questions and distribute the envelopes to the pairs and ask each pair to look at them together and start planning how they will use them.

Step 5: After a minute or two, say, "Okay – Partner A, let's get the conversation started. Put down your conversation starter. Partner B, don't respond yet." After a minute, check to make sure all the Partner As have gone, then say, "Okay, Partner B, put down your response. Partner A, read what Partner B put down on the desk. You have a minute to come up with your response. Partner B, please wait to respond until I tell you to."

Continue to facilitate this process, giving a minute for each "partner" to go, until each has put down five statements. Walk around the room and check their work, giving guidance as needed. As you walk around, tear off a long strip of masking tape and leave it for each group.

Step 6: After the last turn, ask students to stop and reflect on their dialogue. As they are reading through, ask them to take the pieces of tape and tape the dialogue to the desk or table top. Then ask groups of four to carefully walk around the room and read the dialogues of the other groups before returning to their original ones. Ask them to sit together as a group of four for the remainder of class.

Process the activity by asking the following questions:

- What was it like to do that? What was [easy, hard, fun] about it?
- What did you think of the conversation you created overall? Did it work out well or did it seem like they still had things to talk about?
- Thinking about your conversation or any of the ones you observed – what did you notice worked WELL in the "couples" discussions? What did you notice did NOT work well?
- What does this tell you about what's most important when you're trying to have a conversation about something important?

As students respond, write the phrase, "Take-home messages" on the board and record their answers beneath it. If it's not included by the students, be sure to share the following:

- However you communicate – whether verbally or via text – it's important to communicate. Otherwise, it's all a guessing game!
- Technology is a big part of all relationships today. Talking up front about what you do and don't want, and what you do and don't expect around privacy and the other things we discussed in class is really important.

Distribute and go over the homework assignment.

Step 7: **QUESTION BOX:** Give each student several strips of scrap paper.

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.

**ASSESSMENT:** The in-class activity is designed to achieve both learning objectives, while the homework assignment will reinforce the learning to ensure the objectives are met.

**OPTIONAL HOMEWORK:** “iRelationship” video clip and worksheet – students are to watch this brief, online video, respond to questions in the worksheet provided and bring their sheets to the next class session.

**I really like you.**

---

**I really like being with you.**

---

**I'm so glad that we're a couple.**

---

**I really like it when you post photos of us.**

---

**I don't want you to post photos of us unless I've seen them and said ok.**

---

**Snapchat's ok, but no Instagram posts.**

---

**Why don't you ever post pictures of us?**

---

**Can I talk to you about something?**

---

**I don't like posting photos – they're just for us.**

---

---

**Yes.**

---

**Yes.**

---

**Yes.**

---

**Okay.**

---

**I want you to send me a sexy picture of you.**

---

**I'm not comfortable doing that.**

---

**No.**

---

**No.**

---

**No.**

---

**Sure.**

---

---

**I don't feel like talking right now.**

---

---

**Why are you pushing me?**

---

---

**Me, too.**

---

---

**I really like that people know we're together.**

---

---

**I feel really close to you.**

---

---

**You can trust me.**

---

---

**Everyone does this.**

---

---

**I'm really serious.**

---

---

**I don't want you to check my phone without my saying it's okay.**

---

---

**We should trust each other.**

---

---

**I don't care if you check my phone.**

---

---

**I have nothing to hide, but you need to trust me.**

---

---

**What are you hiding?**

---

---

**I don't like it when you keep texting me and asking where I am.**

---

---

**I don't like it when I text you and you don't respond.**

---

---

**When you only text one word to me you sound mad.**

---

---

**I don't like texting.**

---

---

**We'll only post photos on...**

---

---

**Instagram.**

---

---

**Snapchat.**

---

---

**Other social media if we both agree.**

---

**If one of us posts a photo and the other doesn't like it, we'll take it down.**

---

Name: \_\_\_\_\_

Date: \_\_\_\_\_

## Homework: iRelationship

Instructions: Watch the video, iRelationship, which you can find online at <https://vimeo.com/22365117> and then answer the following questions about it.

1. Things seemed to be off to a good start between James and Jessica. What changed and why?
2. What was the main thing James was confused about?
3. What was the main thing Jessica was confused about?
4. What was different about Jessica and Ryan's encounter on the bus?
5. What could make James and Jessica's situation better?

# Teacher's Guide

## Homework: iRelationship

*The following offers some possible responses to the open-ended questions connected to the homework video. Student responses that recognize something close to these points, or that bring up other valid points in the teacher's opinion, should be considered correct.*

1. Things seemed to be off to a good start between James and Jessica. What changed and why?

*James didn't respond to Jessica's final text that first night they were texting, which sent Jessica the message that he wasn't interested in hanging out with her.*

2. What was the main thing James was confused about?

*Whether Jessica wanted to hang out as friends or whether going out meant they were on a date.*

3. What was the main thing Jessica was confused about?

*Why James didn't respond after she suggested getting together during their first text chat; also, why James eventually seemed interested, and then took off when they were out together in the park.*

4. What was different about Jessica and Ryan's encounter on the bus?

*Ryan spoke directly to Jessica. He was clear that he wanted to hang out. Jessica also asked him directly whether it would be a date and he said, again clearly, that it would be.*

5. What could make James and Jessica's situation better?

*If they avoided guessing what the other wanted or was interested in and just asked – or said so clearly. James and Jessica both talked with other friends about what the friends thought might be going on, but James and Jessica never spoke with each other.*

# We Need to Talk

**TEACHER'S NOTE/PREPARATION:** Print out and cut up the role-play scenarios as indicated below. Each triad should receive all three scenarios.

**TARGET GRADE:** Grade 8, Lesson 4

**TIME:** 50 minutes

## FLORIDA STANDARDS ALIGNMENT:

- **HE.8.PHC.1.3** – Assess the importance of assuming responsibility for personal health behaviors.
- **HE.8.PHC.1.4** – Assess personal health practices.

## LEARNING OBJECTIVE:

1. Name two characteristics of effective listening.
2. Name two characteristics of effective communication.
3. Demonstrate proficiency with using effective listening and communication skills in scenarios relating to sexual decision-making and safer sex.

## LESSON MATERIALS:

- Strips of scrap paper
- Question box
- Laptop or desktop computer
- LCD projector and screen
- PowerPoint: “Communication Skills”
- Role Play Scenarios – one handout per every three students, each cut into individual scenarios (three scenarios per triad)
- Pencils or Pens in case students do not have their own
- Homework: “Let’s Talk” – one per student

## LESSON STEPS:

### GROUND RULES

*Note to teacher: This curriculum works best in classrooms where there’s a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student’s age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what’s expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

***Make your ground rules list with your class. The first six 6 in bold may work with your grade level.***

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- *no put-downs*
- *respect each other*
- *questions are welcome using the question box*
- *listen when others are speaking*
- *speak for yourself*
- *respect personal boundaries*
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students. Answer question(s) from the previous lesson.

*Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

Step 2: Say, "Today we will be discussing how people communicate, specifically around sex-related issues. A lot of times when we try to figure out the best way of communicating with people, we focus on what we say, and how we say it. And that's really important. What we also need to keep in mind, though, is that listening is just as important as speaking. We're going to talk about both today, starting with looking at how we can be good listeners when someone is speaking with us – especially about something really important like making decisions about sexual behaviors."

Step 3: Start the PowerPoint, "Communication Skills." Explain that there are five things we should all do when someone is speaking with us to ensure we understand what they're saying – and they feel like they've been heard and understood. Go through the slide, "Listening is Key!" point by point. Once you are done, ask for a student who you know to be a strong participator in class to come to the front of the room and bring a chair. Once the student is seated, ask this student to talk about one of the things they most love to do. As the student speaks with you, model doing all five of the points on the slide WRONG. Once you are sure you have done all five poorly, stop, look at the class and ask, "What did you notice about what I did as [student's name] was speaking?"

After the students reflect back how they noticed you modeled each of the points on the slide, ask the student how they felt as they told you about what they enjoy doing. Ask if they felt like you were listening to them. What about what you did made them feel like they were not being listened to?

Ask them to start talking again. This time, model all five of the points on the slide CORRECTLY. Once you are sure you have done all five, stop, look at the class and ask, "What did you notice this time as [student's name] was speaking?"

After the students reflect back how they noticed you modeled each of the points on the slide, ask the student how they felt as they told you about what they enjoy doing. Ask if they felt like you were listening to them. What about what you did made them feel like they were not being listened to?

Step 4: Say, "Once you know how to be a better listener, you need to be a better communicator, too – especially when you're talking to someone about something you feel strongly about." Go through the second slide in the PowerPoint, titled, "So Is Being Clear!" Model this by asking another student to come to the front of the room. Say, "I want you to pretend to be the teacher, and I'm the student. My grades are slipping and I want to ask you to give me an opportunity to do some extra credit, okay?"

As in the previous example about listening, go through modeling the four points poorly. For example, you may wish to be really unclear about what you want from the "teacher;" to use "you" statements, such as, "you never want to help me improve my grades!"; to interrupt when the "teacher" speaks; and to not be willing to compromise.

Once you have done this, ask the class, "So, how effective of an exchange was that? What could I have done better?" After they have provided some responses, turn to the student who role-played the teacher and ask whether they would add anything else.

Turn back to the class and ask whether anyone would like to try asking this "teacher" for extra credit. When the volunteer comes to the front of the room, remind her/him that they are to try to do the steps well. Give them a few minutes to ask their "teacher" for extra credit, keeping the slide up so the student can refer back to the points.

Once the student has completed their request, ask the rest of the class and the "teacher" how they think the student did. After the feedback, say, "So, to summarize – any kind of discussion between people involves paying attention to both what we say and how we listen. If we miss any of these steps, that's when misunderstandings can happen."

Step 5: Say, "These examples were about something fairly easy to talk about – grades and extra credit. Let's look at what it's like to apply these tips to a conversation about sex."

Break the class into groups of three. Tell them that two of them will be practicing their communication and listening skills using a scenario you will provide, and the

third person will observe in order to tell them how they did. Let them know that they will be given three different scenarios, and that they will switch each time so that everyone will be the observer once.

Switch to the third PowerPoint slide and keep it posted as a reminder to the students as they role play. Distribute the scenario and ask them to decide who will play each role. Tell them they will have approximately 3 minutes in which to role play.

Once 3 minutes have elapsed, ask students to stop their role plays and the observers to comment on how the first two students did. After about 2 minutes, thank the observers and ask the students to decide who will be playing which roles for the next scenario. Distribute scenario #2 to the students.

Repeat the process as before, reminding the students who are participating in the role play that they have approximately 3 minutes. After 3 minutes, ask them to stop and have the observer weigh in on what they saw. After 2 minutes, thank the observers and ask the students to switch so that the student who has not yet been the observer is now the observer and the other two students can participate in the final scenario role play. Distribute the scenario and remind them they have about 3 minutes in which to role play. As before, ask students to stop after 3 minutes and ask the observer to share their impressions. After about 2 minutes, thank the observers.

Step 6: Process the experience by asking the class, "When it came to your small groups which of these things [indicating the PowerPoint slide] do you feel you tended to do well? Not as well? Why do you think that is?"

Step 7: After approximately 5 minutes, ask the students to pass up their reflection sheets. Explain the homework assignment, which involves having a conversation with a parent/ caregiver and practicing the skills you learned in class.

Step 8: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**ASSESSMENT:** The small group role plays will achieve the first two learning objectives and provide an opportunity for students to receive feedback on their understanding of

the communication and listening skills discussed in class. In addition, the brief self-reflections at the end of class will achieve the third learning objective and enable the teacher to ascertain which of the points resonated with the students and how they intend to use these skills in the future.

**HOMEWORK:** "Let's Talk" worksheet – ask students to complete the worksheets and bring them to the next class with them.

## Scenario One

**Person one:** You are at the beginning of a relationship with someone and are thinking it might go to the next level sexually. You don't think they've been with anyone else, so you don't think you need to use a condom. You're excited to tell your friend about your plans!

**Person two:** Your close friend is at the beginning of a new relationship and is thinking of taking it to the next level sexually with the person they're seeing. Unfortunately, they have zero interest in using condoms. You want to try to convince them that it's important to do so if they want to avoid STIs and/or pregnancy.

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## Scenario Two

**Person one:** You have every intention of staying abstinent until you're older. That doesn't mean, however, that you're against showing affection in other ways that don't carry a risk for STIs and/or pregnancy. Person two is the person you've been seeing – and who wants to start having sex with you. How can you let them know you want to stay in the relationship but stick with your decision to wait to have sex?

**Person two:** You have never had sex before, but you've dated and kissed and made out with people. You really like person one and have been spending a lot of time together. You feel like if there's anyone you could have sex with, it's them – but they seem to want to wait. Can you see whether you might be able to get them to change their mind?

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## Scenario Three

**Person one:** You and person two have talked about it and think you're ready to have sex for the first time. Neither of you has ever had sex before. I mean, you've done other stuff with people, but not sex. Do you need to speak with person two about safer sex or are you good? How do you do that?

**Person two:** You and person one have talked about it and think you're ready to have sex for the first time. You haven't really had intercourse before – I mean, there was that one time when you got pretty close to it – but that doesn't really count, does it? Do you need to speak with person two about safer sex or are you good? How do you do that?

# Homework: Let's Talk...

Dear Parent/Caregiver:

Today in class, we learned some new communication and listening skills. Because our unit now is on human sexuality, we practiced those skills within the context of sexual decision-making.

For homework, we'd like you to have a brief conversation with your 8th grader about something you'd like them to know relating to sexuality. Not sure what to ask about? Here's a list of some possible topics:

- At what age do you think it's okay for people to start having sex and why?
- What's the best way of making sure you treat a romantic partner with respect – and that you are also treated with respect?
- When you are ready to be in a sexual relationship, what's the best way of talking about safer sex with your partner?

Please know that you will not be asked to share the content of your conversation, so it can be about any of these or a totally different sex-related topic.

Once you've had this conversation, please sign below and ask your 8th grader to respond to the question that follows. Then ask your child to return it during the next class.

Student Name:

---

Parent/Caregiver Signature:

---

-----

Dear Student,

Which of the listening and communication skills did you use in your discussion with your parent/caregiver? How did it go?

**We Need to Talk**

# Listening Is Key!

*From The Random Acts of Kindness Foundation*

- **Look at the person who is speaking**
- **Concentrate on what is being said**
- **Respond by nodding or answering questions**
- **Ask questions if you do not understand or need more information**
- **Drop all other distractions or activities**

# So Is Being Clear!

- **Say what you want, directly.**
- **Use “I” statements**
- **Listen to what the other person says they want.**
- **If you agree, great – if you don’t, how can you compromise?**

# Effective Negotiation!

- **Communication is rarely one person speaks/texts, the other person responds, and it's over.**
- **Negotiation means saying what you want – and making your case in a way that respects the other person's needs, too.**
- **Communication and negotiation are about sometimes getting what you want, sometimes letting the other person get what they want, and sometimes compromising between the two.**

# Remember...

## When Listening...

- Look at the person who is speaking
- Concentrate on what is being said
- Respond by nodding or answering questions
- Ask questions if you do not understand or need more information
- Drop all other distractions or activities

## When Speaking...

- Say what you want, directly.
- Use “I” statements
- Listen to what the other person says they want.
- If you agree, great – if you don’t, how can you compromise?

# Talking Without Speaking:

## The Role of Texting in Relationships

**TARGET GRADE:** Grade 8, Lesson 5

**TIME:** 50 minutes

**FLORIDA STANDARDS ALIGNMENT:**

- **HE.8.PHC.1.3** – Assess the importance of assuming responsibility for personal health behaviors.
- **HE.8.PHC.1.4** – Assess personal health practices.

**LEARNING OBJECTIVE:**

1. Name at least one thing they do and don't like about communicating via text.
2. Identify at least two ways in which people can miscommunicate via text and the impact these miscommunications can have on their relationship with another person.
3. Explain at least one way of texting clearly and respectfully with another person in an effort to avoid misunderstandings.

**LESSON MATERIALS:**

- Strips of scrap paper
- Question box
- Laptop or desktop computer with PowerPoint on it
- Worksheet: "Beth and Sam" – enough copies for half the class
- Homework: "Let Me Think About It" – one per student
- White board and two markers (marker should be two different colors preferably green and red).
- LCD projector and screen
- PowerPoint: "Talking by Texting"

**LESSON STEPS:**

**GROUND RULES**

*Note to teacher: This curriculum works best in classrooms where there's a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student's age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what's expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

***Make your ground rules list with your class. The first six 6 in bold may work with your grade level.***

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***
- ***listen when others are speaking***
- ***speak for yourself***
- ***respect personal boundaries***
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students. Answer question(s) from the previous lesson.

Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.

Step 2: Say, "Today we are going to be talking about the types of social media you all tend to use, and what you do and don't like about them. What are you currently using?"

Record the list on the board.

Examples might include:

- Instagram
- Vine
- Facebook
- Snapchat
- YouTube
- Tumblr
- Twitter

Once you have a list brainstormed ask, "What are the things you like about these? What don't you like about them?" With the green marker, record what they say they like, and use the red marker to record what they say they don't like.

Ask, "How many of you have ever messaged with someone, either using a phone for texting or some other app?" After a few hands have been raised ask, "Have you ever misunderstood what someone meant when they messaged you – or had someone

misunderstood what you meant?" After a few responses say, "It's really common for this to happen. Let's take a look at why that might be, and what we can do about it."

Step 3: Start the PowerPoint, "Talking by Texting." Say, "Sometimes we don't know what a person means because there's no feeling behind the text. Or, people use shorthand – they think they're being super clear, but we're not sure what they mean, and vice versa. Let's take a look at a few examples."

Go to slide #2, and go through each example one at a time. Use the following as a guide:

Example One: Someone writing "Thx" vs. "Thanks" can sometimes communicate flirting – or just affection if it's done between friends or family members. In other cases, it's just a quick short-hand, and have no meaning behind it.

Point out that person one said "I enjoyed hanging with you yesterday" but person two did not say, "Me, too." Ask students whether they noticed that, and what they think. If they were Person One, how could they follow up to see whether Person Two enjoyed hanging out with them?

Example Two: Ask the students what they think Person Two is saying in their response, as well as how Person One might interpret that answer. Ask them to share what they think Person Two could have done differently.

Example Three: Ask students about Person Two's response. Explain that with punctuation in texts, the number used communicates different things. One question mark would have communicated confusion – three can communicate "I'm annoyed with you." Ask what Person Two could have said to be clearer.

Example Four: Ask students what the symbol on the slide means, probing for "I'm texting you back." Talk about how it feels to be waiting for a response – or how it feels to see those, have them disappear, and then reappear. This communicates that the person is writing and re-writing their response. In other cases, people aren't planning to respond, but hit a random letter, and so the dots will remain there until they delete the random letter. This can be really confusing to and raise anxiety for Person Two, depending on what they're discussing.

Example Five: Ask, "What are some reasons why a person may not text another person back?" Probe for:

- They may not feel like talking/not like you
- Somebody may have come up to them
- They might have gotten another text from someone else
- They might have gotten distracted

Say, "Has anyone ever been ignored by another person? What does that tend to feel like?" After a few responses, go to the next slide and say, "Not responding at all to a text is like ignoring someone. And even though you may have a reason for not responding, the other person doesn't necessarily know that. Go to Slide #5 and say,

“Emojis can help – as you know, this represents only a small number of what’s out there! The only problem is—” go to slide 6—“even Emojis can’t communicate everything you’re trying to communicate sometimes. Say Person One asks Person Two to hang out – A thumbs up is pretty clear that Person Two is up for it; what could the second Emoji communicate? How about the last two?” If it’s not mentioned, talk about how the fourth Emoji can be used to communicate an expectation of doing something sexual.

Step 4: Ask whether they know of anyone who had a fight with a friend or boyfriend or girlfriend via text or other messaging. Ask for examples of what the fight was about. Pull out themes, probing for issues relating to what was said and how it was said – as well as how each person responded.

Say, “Talking by text is really similar to talking in person or talking over the phone or by FaceTime – but there are some real differences. Let’s figure out how we can text in ways that are clear – and don’t put us into awkward or even unsafe situations.”

Divide the class into pairs. Hand out the Beth and Sam Worksheet and ask for individual volunteers to read the first three paragraphs aloud. Tell pairs they will have about 10 minutes to read the text dialogue and answer the questions on page 2 together.

Step 5: After about 10 minutes, process in the larger group by going through the questions on the worksheet. Make sure to make the following points:

- Just like with in-person conversations, people can misunderstand or miscommunicate via text.
- The main difference between a difficult conversation or disagreement via text rather than having it in person is that a person can put down their phone and not respond, which can feel hurtful and disrespectful to the other person.
- Texts that you thought were fine to send but were misconstrued by another person can be forwarded to other people, which can blow the situation out of proportion and make a private disagreement public.

Step 6: Distribute the homework sheet, which asks them about their own use of cell phones to communicate with others, and ask them to return it during the next class session.

Step 7: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.

**ASSESSMENT:** The first learning objective will be accomplished during the whole-class brainstorming activity. The second learning objective will be addressed during the short PowerPoint presentation and discussion, and reinforced by the paired worksheet activity, the latter of which will also fulfill the third learning objective.

**HOMEWORK:** Students will complete a self-assessment of their own cell phone use with a specific focus on communicating via text.

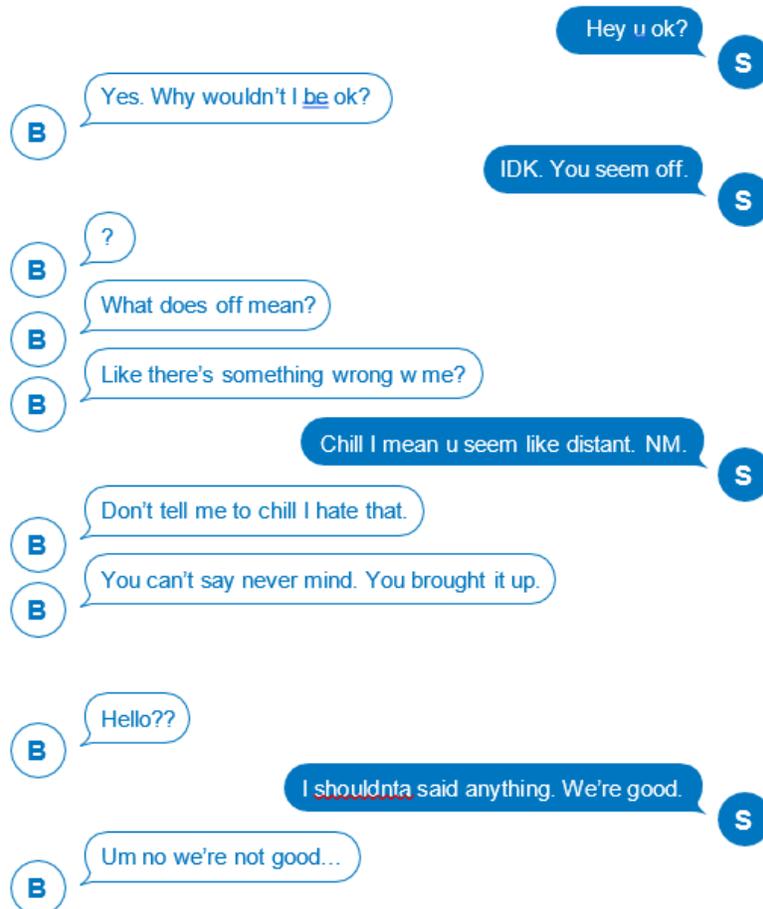
## Beth and Sam

Beth and Sam have been going to the same schools since Kindergarten. They only knew each other to say hi, but never really spent time together. When they got into middle school, things started to change – they started looking for each other in the hallways and then looking away and smiling. They also started asking other friends about each other. Finally, near the end of 8th grade, Sam got Beth’s number and texted her: “Hey.”

Beth responded with, “Hey you ;)” and Sam said, “sup?” and the texting went on from there. About a half an hour later, Sam asked Beth if she wanted to hang out after school the next day, and she said she did. Within a few days, they were officially a couple.

Sam and Beth spent a lot of time together. They also texted a lot – even just quick texts like, “hey boo” and “love u.” About a month into the relationship, Sam noticed those quick texts weren’t coming as often. He wants to talk with Beth about it but isn’t sure how.

Here’s what he tried:



## QUESTIONS:

1. What happened here?
2. What made it go from being a friendly text to an argument?
3. Why do you think Beth responded to Sam's text as she did?
4. How did Sam's response to Beth make things worse, not better?
5. Now that this has happened, what do you think Sam should do next? What do you think Beth should do next?

**Let Me Think About It:**  
**How I Use Technology to Communicate**

Name: \_\_\_\_\_

Instructions: Fill out the following survey about how YOU use technology to communicate with others in your life.

1. Do you own a cell phone? Yes    No

If yes, at what age did you get your cell phone?            If no, why not?

2. What do you use your cell phone for? (Check all that apply):

- Talking to friends/a boyfriend or girlfriend
- Texting with friends/a boyfriend or girlfriend
- Taking and sharing photos on SnapChat, Instagram, or other social media?
- On social media sites like Facebook or YouTube?
- Playing games?

3. What do you like about being able to text with friends/a boyfriend or girlfriend?

4. What do you NOT like about texting with friends/a boyfriend or girlfriend?

5. How do you think your life would be different if you didn't have technology to communicate with other people?

# Talking by Texting

# You're Person One.

## What do you think Person Two is saying to you?

- **Person One: “Liked hanging with you yesterday”**
- **Person Two: “Thx”**
  
- **Person One: “Hey, I was just thinking about you!”**
- **Person Two: “KK”**
  
- **Person One: “Thanks for the present. See you tmw!”**
- **Person Two: “???”**

# You're Person One.

## What do you think Person Two is saying to you?

- **Person One: "You're kinda awesome"**
- **Person Two:**
  
- **Person One: "You haven't texted me, wth???"**
- **Person Two:**

I text you, you  
dont text back,

I feel  
stupid.



Don't you hate when  
people text you, then  
don't text you back right  
away? What, did they just  
text you and then throw  
their phone?



someecards  
user card

# Emojis help...



...but even emojis are limited

• Person One: “Wanna hang out?”

• Person Two: 

vs.



vs.



vs.



## Warning Signs:

# Understanding Sexual Abuse and Assault

### ADVANCED PREPARATION:

- Make sure you have internet access in your classroom and that you have had these links unblocked for your use:
  - Rape and Sexual Assault: <https://www.hrmvideo.com/catalog/rape-get-the-facts>
  - The Signs: <https://youtu.be/He1pu4VwKdM?si=otvVtI0aj4GqMt41>
- Right before class, open the videos and make sure they are working; keep the links open and minimized so they are ready when you need them.
- Be sure to tell the school counselor that you will be addressing this topic in class and invite them to sit in in case a student discloses any current or past abuse or is triggered by what is discussed. If the counselor is not available, you may wish to follow up with them after the class as needed to let them know whether you observed anything in any of the students that would make you feel concerned and merit follow-up.
- If the school counselor is not available, it would still be useful to have another adult in the classroom in case a student needs to step out of the class or is otherwise particularly distressed by the material.

**TARGET GRADE:** Grade 8, Lesson 6

**TIME:** 50 minutes

### FLORIDA STANDARDS ALIGNMENT:

- HE.8.CEH.1.2 – Evaluate community health problems and concerns common to adolescents.
- HE.8.CEH.3.1 – Investigate community strategies to reduce or prevent injuries and other adolescent health problems.

### LEARNING OBJECTIVE:

1. Name two different types of sexual assault.
2. List one example of each of the following: mutual consent, unfair manipulation, threats and aggression.
3. Describe two possible impacts of a sexual assault or abusive relationship on the person who was assaulted.
4. Demonstrate an understanding of how to report a sexual assault or abusive relationship.

### LESSON MATERIALS:

- Strips of scrap paper
- Question box
- Laptop connected to the internet
- LCD projector and screen
- White board and markers
- Newsprint paper and markers (if pre-writing the chart is described on page 4)
- Homework: “Taking Action: Making Sexual Assault Stop” - one per student

- Pencils or Pens in case students do not have their own
- Speakers to project audio from videos

## **LESSON STEPS:**

### **GROUND RULES**

*Note to teacher: This curriculum works best in classrooms where there's a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student's age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what's expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

***Make your ground rules list with your class. The first six 6 in bold may work with your grade level.***

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***
- ***listen when others are speaking***
- ***speak for yourself***
- ***respect personal boundaries***
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

**Step 1:** Review Ground Rules with students. Answer question(s) from the previous lesson.

*Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**Step 2:** Explain to the students that you are going to be talking about a particularly intense topic today – sexual abuse and assault. If you have already created ground rules for your classroom, be sure to highlight them before starting the lesson. If you don't have any already created, explain to the students that you are going to ask them to be particularly sensitive and respectful during this class session.

Step 3: Say, "Talking about sexual abuse and assault and harassment can sometimes be really clear and straight forward. For example, you may know already that rape and sexual assault are when someone is forced to do something sexual they don't want to do. Let's take a quick look at some basic information about sexual assault."

Play the video clip, "Rape: Get the Facts" from <http://www.hrmvideo.com/catalog/rape-get-the-facts>. Stop the video at 2:00 after McPherson says, "It's a men's issue."

Ask the students, "What facts stood out to you about this clip?" Probe for the following:

- That sexual abuse and assault happens so often in the US
- That it happens so often to people when they're really young
- That most people know the person who assaulted them
- That it happens to boys and men, too
- That it happens to people of all races and ethnicities and other backgrounds

Ask, "What do you think one of the women interviewed meant when she said, 'rape is about power and control, it's not about sex?'" (As you ask this, be writing the phrase, "rape is about power and control, it's not about sex" on the board).

Probe for:

- People who rape aren't concerned about what the other person wants – it's all about "conquering" the other person and getting them to do what they want them to do.
- Even though the overpowering is done through a sexual behavior, the overpowering of the other person is the turn-on, it's not the sex act. People of all ages, body types and appearances are raped or sexually assaulted. It's not about physical attractiveness, it's about someone deciding that another person is vulnerable in some way and taking complete control away from that person.

Say, "The social worker talking about boys and men who are sexually assaulted said, 'For a boy or man to report a sexual assault really takes a lot.' Why do you think it may feel more difficult for boys and men to report sexual assault?" Probe for:

- Because if a heterosexual guy is assaulted by another guy, he may be worried that other people think he is or "will become" gay because of what happened (be sure to tell them this is not the case).
- If the guy who was assaulted actually is gay, he may feel unsafe reporting it to someone else because he might be worried they'll discriminate against or further victimize him (or simply not care).
- If the rapist is female, he may feel like no one will believe him – or won't understand why he could not overpower her or otherwise get away.

Say, "Don McPherson, the last person who spoke in the clip, talked about how people often think of rape and sexual assault as women's issues, since the majority of people who report being assaulted are women. What do you think he meant when he said that rape is a men's issue?" Probe for:

- Even though anyone of any gender can assault a person of any gender, the vast majority of rapes and sexual assaults in the world are committed by men. So in addition to helping people who are survivors of rape and sexual assault, we need

to focus on trying to keep boys and men from ever believing they have a right to force someone else to do something sexual.

Step 4: Say, "I mentioned before that when someone forces someone to do something they don't want to do, it's pretty clear cut that it's sexual assault. But what happens when it's unclear? We're going to do an activity now where we look at what's okay and not okay when it comes to sexual touch and behaviors – how we can be clear about what we do and don't want to do – and how we can be sure to recognize whether the other person is really giving their consent to – meaning, actively saying "yes" and that you are sure they want to be kissed or touched by you."

Step 5: Either have the following written on the board with the video screen covering it, or have it pre-written on newsprint and post it at this point:



Say, "I'm going to start at the far right, because we just talked about this, and as I said, it's the most obvious and easily recognizable example of sexual touch that is never okay, and illegal.

Rape/Sexual Assault is when someone forces another person to perform a sex act, such as vaginal, oral or anal sex. This includes when someone uses an object to – and in some states, even a finger.

Aggression is more random touching – like someone walks by someone and pinches them or touches a sexual body part – where the act is over before the person could have even given their consent. This is a type of assault, even if it may have been intended as a joke or as teasing.

Threats refers to when someone tells the other person that if they don't do something sexual with them, there will be consequences that are not physical – for example:

- 'If you don't have sex with me, I'll go out and find someone who will.'
- 'If you don't have sex with me, I'll just tell people you did anyway.'
- 'If you don't do this, I'll forward those sexy pictures you texted me to everyone you know.'

Unfair Pressure is when someone uses what they know is important to the other person to get that person to do what they want. It's not restricted to sexuality-related things, but we're going to keep focused on that. For example:

- When someone says, 'I love you' to someone even if they don't, because they think saying that will get that person to do something sexual with them.

- When someone keeps pressuring the other person, knowing that that person will eventually give in just to make the pressure stop.

Mutual consent is essential in any relationship. It's when both people actively say what they want, and both people agree to any behavior that they are going to do together. When we are talking about doing something sexual in nature, you need to ask your partner if they want to do it. Do they want what you want? Never assume that just because someone doesn't verbally say "no" it means that they are good with it, always ask. And if you can tell your partner doesn't feel right about doing something, back off and consider something else."

Likewise, if you don't feel right about doing something, speak up and say it." Say, "That was a lot to go through! What's your reaction to seeing all these? Do you have any questions?"

Step 6: After answering any questions or facilitating comments from the class, say, "Remember the part in the last video when it said that in most cases sexual assaults are committed by someone who knows the person they assault? This can, unfortunately, also be a family member. When it's committed by a family member it's called 'incest.' And sometimes, it can be a partner or spouse who is abusive, whether physically or not. For the next part of class, we're going to take a look at some of the abuse that can happen in those types of relationships."

Show the video clip, "The Signs." <https://youtu.be/He1pu4VwKdM?si=otvVtI0aj4GqMt41>

Process by asking the following questions:

- "How do you think Amanda is feeling when Nick first asked her out?"
- "What was the first sign that there was something off about the relationship?"
- "How did Nick respond after their first argument? Do you think this was a healthy way to respond or not?"
- "Where would you put the different interactions between them on the chart?"  
Write these up on the board/newsprint.
- "When the relationship started moving from Mutual Consent to the right, what impact(s) did it have on Amanda? What about on her best friend, Ashley?"

Step 7: Say, "We often hear the term 'dating or domestic violence,' when abusive relationships may not be physically abusive at all. The point here – and the theme that runs throughout these videos and all the information we have been discussing during this class -- is 'power and control.' And while you may hear 'power and control' and think that's something you'd want -- it's not something that should be a part of a healthy relationship. So even if you're the one doing the manipulating and controlling, your relationship isn't healthy. And keep in mind – some of the behaviors we've been talking about are also illegal. Someone who is being abused or assaulted should speak up if they can so that others can help make the abuse stop and so that it won't happen to someone else." Say, "The first step in making it stop is to know how. So the homework for this class will be to visit at least one of the websites on the sheet I'm about to hand out to you and answer some questions I've asked." As you distribute the homework assignments, say, "This is a very intense topic we've discussed. The school counselor knows we were going to talk about this today. So, if you have more questions and

you want to talk about this more, you can speak with the school counselor – or of course, you can always come to me to talk.”

Step 8: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**ASSESSMENT:** This lesson is very effective and discussion-based; as such, the teacher will need to assess understanding of the first four learning objectives and material during the discussions as part of student participation. It is also important to keep in mind that if students have had any personal experience with abuse or assault, they may participate less – which does not necessarily mean they are not understanding the material. The homework assignment will give students the opportunity to demonstrate their understanding of some of the class content, while also achieving the fifth learning objective.

# Birth Control Basics

## ADVANCED PREPARATION:

- Print one set of the three category cards with one each of the following per page:
  - Protects for a Few Years (Long-Acting Methods)
  - Protects for a Month (Short-Acting Methods)
  - Protects right now
- Seven method cards copied double-sided so that the method is on one side and the three statements are on the other side – two sets needed as noted in the materials section
  - abstinence
  - external condoms
  - pills/patch/ring
  - IUDs/shot/implant
  - withdrawal
  - emergency contraception
  - dual protection

**TARGET GRADE:** Grade 8, Lesson 7

**TIME:** 50 minutes

## FLORIDA STANDARDS ALIGNMENT:

- **HE.8.PHC.1.3** – Assess the importance of assuming responsibility for personal health behaviors.
- **HE.8.CEH.1.2** – Evaluate community health problems and concerns common to adolescents.
- **HE.8.CEH.3.3** – Categorize healthy and unhealthy alternatives to community health-related issues or problems.

## LEARNING OBJECTIVE:

1. Describe the impact of correct and consistent use of a birth control method on how effective it is at preventing pregnancy.
2. Correctly recall that there is generally a gap between when a person may start to have vaginal sex and when they may wish to get pregnant, which makes using effective birth control important.
3. State correctly what emergency contraception is.

## LESSON MATERIALS:

- Strips of scrap paper
- Question box
- Index cards – one per student
- One set of the seven method cards for students' use
- One set of the seven method cards with two additional copies of the “Dual Use” card for use by teacher
- One set of the three category cards

- Colored Construction paper
  - one piece, posted at the front of the room
- Markers
- Masking tape
- Homework – Birth Control Basics – one per student

## LESSON STEPS:

### GROUND RULES

*Note to teacher: This curriculum works best in classrooms where there's a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student's age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what's expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

***Make your ground rules list with your class. The first six 6 in bold may work with your grade level.***

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***
- ***listen when others are speaking***
- ***speak for yourself***
- ***respect personal boundaries***
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

**Step 1:** Review Ground Rules with students. Answer question(s) from the previous lesson.

*Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**Step 2:** Introduce the topic by explaining that birth control, sometimes called contraception, is a way to prevent pregnancy if a different-sex couple has vaginal sex. There are many different

kinds of birth control that work by preventing the sperm and egg from joining in a variety of ways if they are used consistently and correctly. This means the method is used every time the way it was intended.

Step 3: On the left end of the board draw a horizontal line running all the way to the other end of the board.

*Note to the Teacher: You're creating a timeline. On the left end write the typical age of your 8<sup>th</sup> graders, likely 13 or 14.*

Explain to students that this lesson will look a bit at their future through the end of middle school, over the summer, and into high school. Ask students to raise their hands if they think they may want to have children or become parents someday. Acknowledge that some might and some might not and either is fine. Ask students what someone would need to do in order to be ready to have a child. As students brainstorm responses, write them on the newsprint posted near the timeline you have created. Students will likely suggest things like have money, have a job, have a place to live, etc. Ask students, "Based on all the things on this list, what is the best age to have children, knowing that people's personal experiences can vary a lot?" (As students call out answers, write them under the timeline with a tick mark indicating where they fall. Students might give answers ranging from late teen years to early adulthood.) Summarize by saying, "Okay, now that we know what someone who wants children has to do to get ready by ages (insert ages they gave you), let's look at what they can do to reach those goals."

Step 4: Draw a stick figure above the timeline all the way to the left side. Introduce the stick figure you have drawn by stating they are currently an 8<sup>th</sup> grader like you. Say, "The stick figure wants to have children someday, but not any time soon. They are trying to decide if they should have vaginal sex or not. Let's imagine that they wait until they are older—maybe 16 before they have vaginal sex."

*Note to the Teacher: Write the age of 16 on the timeline above where the stick figure is.*

Say, "And this person also agrees with what we've brainstormed about what they need to do in order to be the best parent they can be. So maybe they want to wait until they are out of high school before they have children. Generally, someone is done with high school at age 18."

*Note to the Teacher: Write the age 18 on the timeline a few inches down from where you wrote age 16.*

Say, "So once this 8<sup>th</sup> grader is done with high school, have they done everything on this list we created?"

*Note to the Teacher: Generally the answer is "no" but allow students to respond authentically here since some may be children of young parents.*

So, let's say this person wants to wait a few more years after high school to have children, maybe until they're 21 years-old."

Note to the Teacher: Write the age 21 on the timeline a few inches down from age 18.

Say, "Now let's do some simple math. If this stick figure decides to have vaginal sex while they are age 16 but doesn't want to have children until age 21, how many years do they need to protect themselves from starting a pregnancy?"

Note to the Teacher: The answer should be 5 years.

Say, "We know the most effective way for this stick figure to absolutely make sure that they don't start a pregnancy is by delaying having vaginal sex, until they are older. So let's imagine that our stick figure is able to do that. Maybe they show their affection for people they are dating in other ways, but they do not have vaginal sex until age 17.

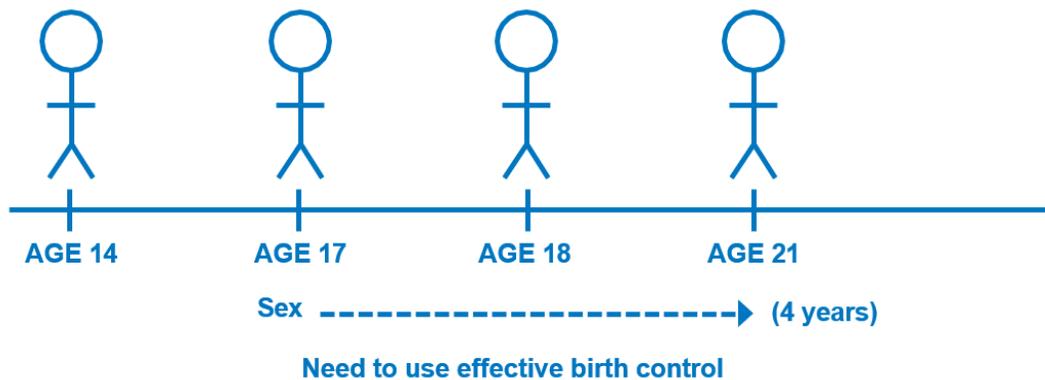
Note to the Teacher: Write the word "sex" under the age 17 on your timeline.

Now, between age 17, when they decide to have vaginal sex, until age 21, when they think they want to start having children, how many years is in between there?"

Note to the Teacher: The answer is 4 years so draw an arrow under the timeline from age 17 to 21 and the words 'need to use effective birth control'.

Say "So we have narrowed the gap a bit by waiting from 5 to 4 years But, four years is still a really long time! So this stick figure, if they decide to have vaginal sex will need to use effective birth control during that time period to make sure they don't start a pregnancy until they want to. And keep in mind that we're only talking about pregnancy today, but they will also need to protect themselves from STDs too."

Note to the Teacher: At the end, this is what your timeline should look like.



Step 5: Explain by saying, "There are many methods of birth control available to people who want to wait to have children until later in life or who may never want to have children." Introduce

the three categories and tape each category to the board to form three columns as you talk. Say, "All of these methods work a little differently but some protect right now, some protect for a short time, like one month, and some protect for a long-time, sometimes even a few years." Review the following 7 methods of birth control one at a time by showing the card with name of the method on it, stating the information about the method below and then tape the method card in the correct column you have already created.

"Abstaining from vaginal sex is the only 100% effective way to prevent pregnancy when done consistently and correctly. In fact, it is the method used by most 8th graders. Ask students what you mean by "when done consistently and correctly." Affirm or correct their statements until you feel satisfied that they understand that abstinence only works when people use it every time. This means a penis not going inside another person's vagina. Tell them that most people are not abstinent forever but choosing to delay having sex until you are a bit older can be a very healthy choice." [Place in the "protects right now" category.]

"External condoms (sometimes called male condoms) are worn on a penis. Anyone can buy them at the store (including 8th graders) and they are very effective at preventing pregnancy when used consistently (meaning every time a couple has vaginal sex) and correctly. They also have the added bonus of protecting against most sexually transmitted diseases or STDs." [Place in the "protects right now" category.] There are also places in Broward where you can get free condoms.

[Note to the Teacher: You will notice that we use the phrases "external" condom. Explain that, while students may be familiar with the terms "male" condom, you are using these terms to reflect how the methods are used, rather than to assign a gender to them.](#)

"The birth control pill, the patch and the ring all contain hormones that are very effective at preventing pregnancy. The patch and the ring work for a month at a time and then have to be replaced. The patch you replace once a week and the ring you replace once a month. The pill needs to be taken once a day, at the same time every day. A pack of pills lasts one month and then you need to start the next pack. These are called short-acting methods that you can get from a clinic." [Place in the "short-acting- protects for a month" category.]

"Most IUDs, the shot and the implant contain hormones that are very effective at preventing pregnancy for anywhere between a few months (3 months for the shot) and many years (up to 10 for some IUDs). These are called long-acting methods that you can get from a clinic too." [Place in the "long-acting- protects for a few years" category.]

"Withdrawal, often called pulling out, is when a penis is removed from a vagina before sperm are ejaculated to prevent pregnancy and while it is not as effective as some other methods, it is definitely better than not using anything. It is not, however, the same thing as abstinence." [Place in the "protects right now" category.]

"Emergency contraception, often called Plan B, is medicine that is taken after unprotected vaginal sex to prevent pregnancy and the sooner it is taken after vaginal sex, the more effective it is." [Place in the "protects right now" category.]

“Dual use is when people who have vaginal sex want to get the most effective protection possible by using a condom in addition to another method (a condom and the pill, a condom and the IUD). This doubles their protection and helps protect them against both unintended pregnancy and sexually transmitted diseases. But this does not apply to using two condoms at the same time, which should not be done, as that can cause the latex to break.” [Place a dual protection sign in all three categories to show that a wide variety of methods can be used together.]

*Note to the Teacher: At the end, your board should look like this.*

Protects Right Now	Protects for a Month (Short-Acting Methods)	Protects for a Few <u>Years</u> (Long-Acting Methods)
Abstinence	Pills/Patch/Ring	IUDs/Shot/Implant
External Condoms	Dual Use	Dual Use
Withdrawal		
Emergency Contraception		
Dual Use		

Step 6: Explain that the next activity will help students learn a bit more about the benefits of the various methods and how well they work when they are used correctly and consistently. Explain that the class will be playing a game called “Which One is Not True.” Select seven student volunteers and have them come to the front of the room.

*Note to the Teacher: Select students who you think would not be too embarrassed to participate and can handle the activity maturely.*

Give each of the seven volunteers one of the seven method cards and have them review the three statements on the back of the card to prepare to read them aloud to the class.

While volunteers are preparing, explain to the rest of the class that each of the seven students will be representing one of the methods of birth control that are on the board. The students will be sharing three statements about the method but only two will be true and one will be a lie. The class needs to decide which statement is the lie and be able to explain why it’s a lie.

Once the seven students are ready, have them reveal which birth control method they are and read aloud the three statements. Ask the class to guess which statement is the lie and explain why it's a lie adding in accurate information as needed and correcting any misinformation that might come up. Continue playing until all seven methods have been shared. Once done, thank the volunteers and have students return to their seats.

*Note to the Teacher: You can turn this activity into a competitive game with teams and points if you think your students will respond well and you have the time and set-up that would allow this.*

Step 7: Close by returning to the stick figure. Say, "Now knowing more about birth control, what methods do you think would be effective for this person if they were to have vaginal sex right now? What about when they are in high school?" Take some ideas and make sure to reinforce that delaying vaginal sex is the most effective way to prevent pregnancy, and if anyone chooses to have vaginal sex and they are not ready for a possible pregnancy, that using two methods together (dual protection) can be very effective. Assign homework and close the lesson.

Step 8: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**ASSESSMENT:** The Two Truths and a Lie activity will accomplish the first and third learning objective while the stick figure timeline discussion will accomplish the second learning objective.

**HOMEWORK:** Birth Control Basics worksheet



# Using Condoms Effectively

## ADVANCED PREPARATION:

- Print out enough copies of the handout, “Condom Steps” for every three students to have a full set. Cut out the individual steps and place an entire set into an envelope (for example, if you have 21 students, you would make 7 sets of the sheets).
- Load the “How to Use Condoms” video from Amaze.org  
<https://youtu.be/oaLdNErJ-Fk?si=70LaoaIS7iGe2znH>

**TARGET GRADE:** Grade 8, Lesson 8

**TIME:** 50 minutes

## FLORIDA STANDARDS ALIGNMENT:

- **HE.8.PHC.1.3** – Assess the importance of assuming responsibility for personal health behaviors.
- **HE.8.CEH.1.2** – Evaluate community health problems and concerns common to adolescents.
- **HE.8.CEH.3.3** – Categorize healthy and unhealthy alternatives to community health-related issues or problems.

## LEARNING OBJECTIVE:

1. Describe correctly, and in order, the steps to using an external condom.
2. Describe how an internal condom is used.

## LESSON MATERIALS:

- Strips of scrap paper
- Question box
- Handout: “Condom Steps” for condom order activity prepared as described above – one set per every 3 students
- Envelopes for condom order activity sheets, one per every 3 students
- Whiteboard and markers

## LESSON STEPS:

### GROUND RULES

*Note to teacher: This curriculum works best in classrooms where there’s a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student’s age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what’s expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

***Make your ground rules list with your class. The first six 6 in bold may work with your grade level.***

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***
- ***listen when others are speaking***
- ***speak for yourself***
- ***respect personal boundaries***
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students. Answer question(s) from the previous lesson.

*Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

Step 2: Tell the students that you are going to focus today on condoms, which are the only methods that provide protection against both pregnancy and STIs, so it's a healthy choice to use condoms in addition to another method for double protection. Say, "You are going to hear me use very specific language when we talk about condoms. People tend to use the word 'condom' to mean a latex condom that goes on a penis. But as you will see in a moment, there are different kinds of condoms that can be used in different ways on different people's bodies, regardless of their gender. For this reason, when we talk about a condom that goes on a penis, we will call it an 'external' condom. When we talk about a 'female' condom or pouch, we'll call it an 'internal' condom."

Step 3: Explain that condoms are extremely effective when they are used correctly – that means, every time a couple has oral, anal, or vaginal sex, from the beginning of the act to the end. Break the class into groups of 3. Once they are in their groups, explain that you will be providing each group with an identical set of sheets that list each of the steps to using an external condom correctly. Instruct them to work together and put their sheets in order from the beginning to the end of the sex act. Answer any questions and distribute the sheets, advising the students that they have approximately 5 minutes in which to work together.

Note to the Teacher: While they are working in their small groups, quickly go through the index cards and group them together so that you can be sure your explanation of how to use condoms includes as much of their questions as possible.

Step 4: After students have worked for five minutes, go around the room and ask each group to provide one of the steps in order (so group one would say, “check the expiration date”).

Note to the Teacher: The following represents the correct order in which to use a condom for your reference:

- Check expiration date on condom
- Have erection
- Take condom from wrapper
- Put condom right side up on head of penis
- Pinch the tip
- Roll condom down penis
- Begin intercourse
- Ejaculation
- Withdraw penis from partner, holding condom on at the base
- Remove condom from penis
- Throw condom away in trash

Play the Amaze “How to Use Condoms” video <https://youtu.be/oaLdNErj-Fk?si=70LaolS7iGe2znH>

Next, talk about the common mistakes that can be made, probing for these:

- Not checking the expiration date
- Storing condoms someplace that’s too hot or too cold
- Putting the condom on wrong side up
- Not putting the condom on before the penis goes inside the other person’s body (some people put their penis inside then pull out and only put a condom on before ejaculation)

Step 5: Say, “When people refer to condoms, they usually refer to condoms that go on a penis, like the one you just saw in the video. But there is another kind of condom that is as effective at preventing pregnancy and providing some very good protection against STDs.” This type of condom is commonly referred to as a female condom, or a pouch.

Step 6: Remind students that since condoms are the only method of birth control that protect against STDs, it is a good choice to use them in addition to another method for double protection.

Step 7: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT

to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.

**ASSESSMENT:** The individual small group activity will achieve both learning objectives and enable the teacher to determine whether students understand the steps to using a condom.

Check expiration date on condom	Have erection
Take condom from wrapper	Put condom right side up on head of penis
Roll condom down penis	Begin intercourse
Ejaculation	Withdraw penis from partner, holding condom on at the base
Remove condom from penis	Throw condom away in trash
Pinch the tip of the condom	

# STD Basics: Reducing Your Risk

## ADVANCED PREPARATION:

Go online to find the closest STD testing and treatment centers to you. If you go to the website, [http://yourstdhelp.com/free\\_clinic\\_locator.html](http://yourstdhelp.com/free_clinic_locator.html), you can enter your state, and several of the closest places where STD testing and treatment are available will come up. Note that these will list free and low-cost clinics, which is essential for students at this age; be sure, however, to tell them they can go to their own family doctor or clinician or another clinic they may have heard about from friends.

**TARGET GRADE:** Grade 8, Lesson 9

**TIME:** 50 minutes

## FLORIDA STANDARDS ALIGNMENT:

- **HE.8.PHC.1.3** – Assess the importance of assuming responsibility for personal health behaviors.
- **HE.8.CEH.1.2** – Evaluate community health problems and concerns common to adolescents.
- **HE.8.CEH.3.3** – Categorize healthy and unhealthy alternatives to community health-related issues or problems.

## LEARNING OBJECTIVE:

1. Describe at least two ways in which STDs, including HIV, can be transmitted.
2. Name at least one step they plan to take personally to reduce or eliminate their chances of contracting an STD.
3. Name at least one health center in their area to which they can go for STD testing and treatment that is affordable and confidential.

## LESSON MATERIALS:

- Strips of scrap paper
- Question box
- Worksheet: “STDs: What Can I Do?” – one per student
- Laptop or desktop computer with the website, [http://yourstdhelp.com/free\\_clinic\\_locator.html](http://yourstdhelp.com/free_clinic_locator.html) cued up
- Article: “Taking Charge of My Sexual Health with STD Testing and Communication” – one per student
- LCD projector and screen
- White board and markers (at least 3 different colors of markers)

## LESSON STEPS:

### GROUND RULES

*Note to teacher: This curriculum works best in classrooms where there’s a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student’s age and developmental stage*

- *agreed upon by everyone*
- *well explained so that students are very clear about what's expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

***Make your ground rules list with your class. The first six 6 in bold may work with your grade level.***

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***
- ***listen when others are speaking***
- ***speak for yourself***
- ***respect personal boundaries***
- *no personal questions*
- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students. Answer question(s) from the previous lesson.  
 Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.

Step 2: Ask, "I'd like you to think about your day this morning, from when you woke up until just now in class. Everyone please take out a piece of paper and write down everything that's happened from 'woke up' to 'being in this class.'"

As students begin to write, watch for those who finish first. As they finish, ask for 3 volunteers to come to the front of the room and write their lists on the board as the remainder of the class finishes their lists. While each list will look different, they may look something like this:

- Woke up
- Took a shower
- Got dressed
- Ate breakfast
- Got to school (probe: How?)
- Took the subway
- Took the school bus
- Took a regular bus

- Walked
- Got dropped off
- Had class (probe: Which classes?)
- Ate lunch (depending on class schedule)

Go through the lists, asking students to indicate where they had to make decisions along the way. Write the word “decision” in between the steps that required a decision with a different-color marker. For example:

“Got dressed - Decision - Decided what to wear”

Probe for more than just surface decisions, such as “had to decide what to pack for lunch” or “had to decide what to eat from the cafeteria.” For example, how did they decide which classes? Did they have any input or were they decided for them? Did they decide how to get to school, or was that decision made for them?

Ask, “How do you make decisions? What factors come into play?” After a few responses, ask, “Did any of these decisions require you to take risk?” (Probe for there being risk in getting in a car or bus; risk crossing the street; risk in how people react to what you choose to wear; risk that you eat something unhealthy and end up getting sick, etc.).

Ask, “When you were making your decisions, did you know there were risks involved? If so, know that there was risk involved, how did you make each of your decisions?” Possible responses may include, “I didn’t really think about it,” or “I’ve done it so many times I know how to do it,” or “I was (or wasn’t) worried about what would happen if I did one thing vs. something else.”

Say, “Now we’re going to take what we just talked about and apply it to one part of sex ed. There are things in our lives we make decisions about every day, some of which carry risks of different levels. Same thing goes for sexual behaviors.”

Write the phrase, “Sexually Transmitted Disease” on the board. Ask the students to remind you what an STD is. Probe for diseases that can be passed from one person to another through sexual contact. Remind students that to get an STD one person has to have one, STDs are not created spontaneously by doing something sexual with another person.

Step 3: Ask, “How many of you are hoping to get an STD at some point in your lives?” Students will hopefully laugh, and none of them will raise their hands (except for a class clown or two). Say, “Of course – no one wants to get an STD – just as no one wants to get the flu or any other kind of infection. The fact of the matter is, though, lots of people will get STDs at some point in their lives. It’s actually really common, especially among young people. So it’s important to know a few key things about them:

While some STDs can be cured, others can stay in your body for life and be treated. Others can be fought off by your body’s immune system and go away on their own. Some can affect whether you can get pregnant or get someone else pregnant, and others can affect sexual

functioning – or even, if left untreated, cause death. So if you’re going to be in a sexual relationship in the future, you want to be sure you do so in ways that keep you healthy and reduce your chances of getting an STD.”

Tell the class that you are going to be giving them individual worksheets and that they’ll have about 8 minutes to complete them. Tell them that the sheets are asking them to think about what they’ve heard about how people can get STDs – and to write down how the students plan to avoid getting them and if you’ve already experienced an STD, what your plan would be for not getting one in the future. Tell the students that they will be asked to share their completed sheets with at least one other person in the class, so they should keep that in mind as they write down their answers. Distribute the sheets.

Step 4: After about 8 minutes, ask students to stop where they are. Divide the group into pairs and ask students to share their plans with each other. Tell them that if they hear something from the other student about how you can get an STD that doesn’t sound quite right to mark it on their partner’s paper with a star so they can come back to it later or ask you about it. Ask the students to tell each other what they think of each person’s plan, and to provide any suggestions they think might help. Tell students they’ll have about 5 minutes in which to do this.

*Note to the Teacher: If you know that students have personal experience with STDs – for example, a family member with HIV – you may wish to intentionally pair certain students together to be sensitive. Otherwise, random pairing is fine.*

Step 5: Ask the students to stay in their pairs and ask how they think they did on their own plans. Ask what they thought of their partner’s plan, and whether they got any helpful feedback on theirs.

Ask the students to share what they’ve heard about how STDs can be transmitted. Write these on the board, asking students not to repeat something they’ve heard already. If anyone says something that is incorrect, be sure to correct it and write the correct information on the board.

Step 6: Say, “It’s great to think this through and to create a plan for yourselves. But what about the other person with whom you may end up having sex? How would you know whether they had an STD? What can you do to find out?”

Probe for:

- Ask the person (remind students that many STDs have no symptoms so they might not know they have one)
- Ask other people who know the person (which could also make that person mad)
- Go together to a doctor’s office or clinic to get tested for STDs.

Say, “A really important thing to keep in mind is that there is no one test that covers all STDs. So if someone says to you, ‘I’ve been tested already,’ ask that person what they’ve been

tested for. Sometimes, they've been tested for HIV – but there are different tests for the other STDs. A doctor or clinician will ask you some questions to determine which STDs you may or may not be at risk for and then conduct the tests based on that. So it's really important to give honest information and answers to that doctor or clinician.”

Project the website, [http://yourstdhelp.com/free\\_clinic\\_locator.html](http://yourstdhelp.com/free_clinic_locator.html), so that the class can see it on the screen or white board. Using the dropdown menu on the top left side of the landing page, put in your state and hit “go.” Scroll down for the city or town closest to you to show what is in your area. Have student write down the website address for future use and remind them that they can always come back to you in the future to be reminded of the URL.

**Step 7: QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum.*

*Remind students that you may not be able to answer all questions.*

**ASSESSMENT:** The individual worksheet, paired discussion and large group process will be directed at achieving the first two learning objectives. In addition, by collecting and going through the individual plans, the teacher will be able to catch any remaining myths/misinformation by correcting them on the sheets and returning each student's plan to them. Posting the website and showing students the link, as well as the search results that come up for local STD testing and treatment centers, will achieve the third learning objective.

# Sexually Transmitted Infections

**TEACHER'S NOTE/PREPARATION:** This lesson uses the terms sexually transmitted infections (STIs), blood-borne infections (BBIs) and sexually transmitted and blood-borne infections (STBBIs) as needed.

Learning about STIs and BBIs helps students take care of their own bodies, thereby reducing the risk of STIs and BBIs and preventing possible health problems related to having an STI or BBI.

One of the greatest deterrents to the practice of safer sex is the “It won’t happen to me” mindset. However, the risk of infection is very real. Statistics show that rates of chlamydia cases reported in people ages 13-19, as well as gonorrhea and syphilis levels, are also very high in this age group.

STI education has often focused on trying to scare students. Research shows this technique does not work. STIs are often seen as shameful and a “consequence” for sexual activity, especially for teens. This shame prevents many people from accessing testing and treatment and is a major contributor to the high rates of STIs among young people.

A more effective strategy is to encourage everyone who is sexually active to access at least yearly testing, and treatment as needed, as a regular part of routine healthcare. All students should discuss with their parents how they can appropriately access this kind of care.

Guidelines for STI testing include the following times to get tested:

- You have a new sexual partner before you start having sex
- If you have noticed any bumps, discharge, rashes or other symptoms
- If you or your partners are having sex with other people
- If you had sex with someone who has an STI and didn’t use a condom or other prevention methods
- If you had sex without a condom with someone who doesn’t know if they have an STI (because they haven’t gotten tested in a long time)
- If you had sex with a condom and the condom broke

STI has replaced the term STD (sexually transmitted disease). In medical science, infection is the term used to indicate that a bacteria, virus, parasite or other microbe has entered the body and begun to multiply. The term disease indicates that signs and symptoms of illness are present. There are many people with STIs who have no symptoms, therefore, STI is a more accurate term.

**TARGET GRADE:** 8<sup>th</sup> Grade, Lesson 10

**TIME:** 45 Minutes

**FLORIDA STANDARDS ALIGNMENT:**

- **HE.8.PHC.1.2** -Identify major chronic diseases that impact human body systems.
- **HE.8.PHC.1.3** - Assess the importance of assuming responsibility for personal health behaviors.

- **HE.8.PHC.1.4-** Assess personal health practices.
- **HE.8.PHC.2.2** - Analyze the influence of personal values, attitudes, and beliefs about individual health practices and behaviors.
- **HE.8.PHC.2.4** - Assess the role of the beliefs of friends and peers on the health of adolescents.
- **HE.8.CH.1.1** - Analyze how appropriate health care can influence personal health.

#### **LEARNING OBJECTIVE:**

1. Describe symptoms, effects, treatments, and prevention for common sexually transmitted diseases; i.e., chlamydia, HPV, herpes, gonorrhea, hepatitis B/C, HIV

#### **LESSON MATERIALS:**

- HANDOUT and ANSWER KEY: STI Chart
- Handout STI Health Information Sheets
- Strips of Scrap Paper
- Question box

#### **LESSON STEPS:**

#### **GROUND RULES**

*Note to teacher: This curriculum works best in classrooms where there's a mutual feeling of trust, safety, and comfort. Ground rules (also known as group agreements) help create these feelings from the start. Ground rules that work are:*

- *appropriate for your student's age and developmental stage*
- *agreed upon by everyone*
- *well explained so that students are very clear about what's expected*
- *posted clearly in your classroom*
- *referred to at the beginning and throughout the unit*

***Make your ground rules list with your class. The first six 6 in bold may work with your grade level.***

*Ground rules work better when students are involved in creating the list. The list doesn't have to be long. You can use 5 or 10 bullet points that are broad enough to cover the key messages you want students to remember. Some examples you can use as a guide are:*

- ***no put-downs***
- ***respect each other***
- ***questions are welcome using the question box***
- ***listen when others are speaking***
- ***speak for yourself***
- ***respect personal boundaries***
- ***no personal questions***

- *it's okay to pass*
- *use scientific terms for body parts and activities*
- *use inclusive language*
- *classroom discussions are confidential*
- *we will be sensitive to diversity, and be careful about making careless remarks*
- *it's okay to have fun*

Step 1: Review Ground Rules with students. Answer question(s) from the previous lesson.

Note to teacher: Please answer questions from the question box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.

Step 2: **Defining STIs and BBIs**

Note to teacher: These discussion questions help students define STBBIs and provide a rationale for learning about them through class discussion.

With the class, discuss answers to the following questions. Discussion notes are provided.

**What is an STI?**

- STIs are infections spread primarily by close sexual contact and sexual intercourse. Sexual contact means any intimate skin-to-skin contact of the genital area. This includes touching or oral, vaginal, or anal sexual activity with partners of any gender.

**What are some STIs you have heard of?**

- List student suggestions on the board.
- Show the [STI Tool](#) and compare the student suggestions to the eight common infections shown on the tool.

**What are BBIs?**

- Blood-borne infections are passed from one person to another through an exchange of blood and other body fluids.
- Examples include HIV, hepatitis B, and hepatitis C

**STIs can be viral, bacterial, or parasitic. What do those words mean?**

- **Viral:** If a virus causes an infection, it is possible for the person to remain 'asymptomatic' for periods of time (meaning there are no symptoms). It is possible to have the virus and not know it. Passing the virus to another person without either person knowing it is possible. Viral STIs can be treated but are more difficult to cure. Some viral STIs are not curable at this time.
  - Viral STIs include human papillomavirus (HPV or genital warts) and genital herpes.
  - HIV, hepatitis B, and hepatitis C are viral blood-borne infections.
- **Bacterial:** If bacteria cause an infection, it can be treated and cured with antibiotic medication. STIs that are bacterial include gonorrhea, chlamydia, and syphilis.

- **Parasitic:** If a parasite causes an infection, it can be treated and cured with medication. Parasitic STIs include pubic lice (crabs), scabies and trichomoniasis

### **Why is it important to learn about STIs and BBIs?**

- It helps a person be able to take care of their own body.
- It helps a person to discuss STIs with a partner.
- Some STIs and BBIs can be prevented through immunization (HPV, Hep B) or medication (PrEP for HIV)
- Regular testing and treatment can eliminate or minimize the health problems caused by an STI/BBI.
- Untreated STIs or BBIs can cause problems for a person's health and future ability to have children.
- BBIs and some untreated STIs can be passed to unborn children or babies during pregnancy or childbirth, although with testing and treatment, this can be prevented.

### **When you hear the words STI or STBBI, what do you think?**

- Encourage students to share feelings and reactions.
- Common student responses may be that these words are “disgusting,” or that it makes them think about death. Other responses may include embarrassment or shame. If students express ideas of shame or stigma, it can help to talk about what causes these feelings. Stigma and shame are rooted in fear, and often provide a false sense of protection, that only ‘other’ people get STIs. In reality, anyone having sex can get an STI, and there is nothing to be ashamed of. They can be tested for and treated. Talking about STIs is part of good healthy sexual relationships and consent.

### **How do HIV and hepatitis B and C differ from other STIs?**

- HIV and hepatitis B and C are blood-borne infections.
- HIV and hepatitis B can also be transmitted by exchanging body fluids such as semen and vaginal secretions. HIV can also be transmitted through breast milk.
- BBIs can be transmitted through sex, sharing drugs, tattooing or piercing equipment that has traces of infected blood, or to a baby during pregnancy or birth. Hepatitis B and C can also be transmitted by sharing razors, nail clippers, or toothbrushes with someone who has hep B or C.
- Individuals cannot become infected with BBIs through ordinary day-to-day contact such as kissing, hugging, shaking hands or sharing food or water.

- Transmitting hepatitis C through sex is rare, however, it can occur if infected blood is present (such as during menstruation). The presence of HIV also increases the risk of transmitting hepatitis C through sex.
- There is a lot of fear and misinformation about BBIs, especially HIV. This is because when it was first discovered, many people were dying of AIDS. However, now, there is really good treatment for HIV, and people can live long healthy lives. There is also great preventative medication, called PrEP.
- There is also excellent treatment for Hep C now, and it's possible to "clear" the virus and cure it. Most people are immunized against hepatitis B. Both of these viruses are now fairly uncommon.

**If you want to find out about STIs, what sources can provide accurate information?**

- Family doctors, clinics (e.g., Sexual and Reproductive Health Clinic or STI Clinic) or community health centers
- Teachers, counselors, or school nurse
- Fact sheets from a reliable source (Health Services/Agency)  
 Teacher note: Remind students to always speak to their parent/caregiver/guardian if they think they may have an STI, BBI or need to be tested.

**Step 3: Studying STIs**

Students describe symptoms, effects, testing, treatment, and prevention for common STIs.

Teacher Note: Before the lesson, print several copies of [STI Health Information Sheet](#) for these infections:

- Chlamydia
  - Genital herpes
  - Gonorrhea
  - Syphilis
  - HIV
  - HPV
- Give each student their own copy of the **STI/BBI Chart** handout.
  - Divide the class into small groups. Assign each group a specific infection by giving each group a different **Health Information Sheet**.
  - Ask each group to complete the appropriate section in the STI Chart using the information on the **STI Health Information Sheet**. You may wish to provide expectations such as "Fill in 1-2 bullet points in every box" as the Health Information Sheets contain a great deal of information.
  - Have groups share their findings with other groups, while students fill in all

sections of the chart. You can ask groups to present their findings to the entire class or use a [jigsaw](#) approach.

- **Teacher Note:** Use the **STI Chart Answer Key** to ensure students have the correct information in their charts. The answer key is very detailed, with more information than most students will have filled in, to give you a more complete background for each infection. You do not need to expect students to provide this level of detail.

Step 4: Debrief this activity using the following questions:

**What are some symptoms of STIs?**

- Point out that many people with STIs have no symptoms.

**How would you know if you had an STI?**

- If you have no symptoms, regular testing is the only way to know.
- If you have symptoms, a test will confirm which STI you have.

**What does a person with an STI look like?**

- Stress that anyone can get an STI. You can't tell if someone has an STI by looking at them.

**Prevention is key. What are the best ways to prevent STIs?**

- Abstinence
- Using [condoms](#) (internal or external) and [dental dams](#) correctly
- Using condoms/dental dams every time there is sexual touching, vaginal, oral or anal sex or use of sex toys
- Limiting the number of sexual partners
- Having open and honest communication with every partner about STI history and testing
- Not having sex if there are any symptoms present (e.g., sores, unusual discharge)
- Regular STI testing (annually or as recommended by a doctor)
- Vaccination for HPV and hepatitis B
- Using Pre-Exposure Prophylaxis (PrEP) to help prevent HIV in people who have a very high risk of getting the virus

**What ethical responsibilities does a person have to their sexual partner(s) regarding STIs?**

- Open and honest communication about their STI history and test results
- Not having sex /sexual activity if there are any symptoms present or you think you are infected
- Discussing with partners the ways of reducing the risk, such as using condoms and dental dams every time there is sexual touching, vaginal, oral or anal sex or use of sex toys
- Sharing a known exposure to STIs before sexual activity is part of getting consent for sexual activity. A person cannot consent to sexual activity with someone if they do not know about that person's STI.

Step 5: **QUESTION BOX:** *Give each student several strips of scrap paper.*

Give each student several strips of scrap paper. Ask students to write at least one question or one thing that they learned today and drop it in the anonymous question box. (If everyone is writing, nobody feels like the only one with a question). Tell your students NOT to write their name on the strip of paper, unless they would prefer to talk with the teacher privately about their question. Only one question should be written on each strip of paper, but it is OK for students to use as many strips of paper as they like.

*Note to teacher: Answer questions the following day to allow yourself time to review the questions from the box that are related to the content within the approved curriculum. Remind students that you may not be able to answer all questions.*

**ASSESSMENT: STI QUIZ**

## STI Quiz

1. STI stands for:
  - Small Talk International
  - Sexually Transmitted Disease
  - Subaru Testing Internal
  - Sexually Transmitted Infection
2. Many people who have an STI have no symptoms.
  - True
  - False
3. Ways to reduce the chance of getting an STI include:
  - Using condoms/dental dams
  - Abstinence
  - HIV PrEP
  - HPV immunization
4. Herpes cannot be cured, but there are good treatments for the symptoms.
  - True
  - False
5. STI testing is very painful.
  - True
  - False
6. Sexually active people should get tested for STIs regularly.
  - True
  - False
7. If you have an STI and don't tell your partner, that is fair. It is only your business.
  - True
  - False
8. STIs among teenagers are really pretty rare.
  - True
  - False
  - Unsure
  - Nobody Knows
9. In Broward, parents need to be notified if their child is treated for an STI.
  - True
  - False
  - Unsure
  - Nobody Knows

## ANSWER KEY: STI Quiz

Correct answers are in bold text.

1. STI stands for:
  - Small Talk International
  - Sexually Transmitted Disease
  - Subaru Testing Internal
  - **Sexually Transmitted Infection**

STI has replaced the older term Sexually Transmitted Disease (STD). In medical science, infection is the term used to indicate a bacteria, virus, parasite or other microbe has entered the body and begun to multiply. The term disease indicates that signs and symptoms of illness are present. As many people with STIs have no symptoms, STI is a more accurate term.

2. Many people who have an STI have no symptoms.
  - **True**
  - False

Some people have symptoms, but many don't. That is why regular testing is important for people who are sexually active.

3. Ways to reduce the chance of getting an STI include:
  - **Using condoms/dental dams**
  - **Abstinence**
  - **HIV PrEP**
  - **HPV immunization**

All of these are effective strategies for reducing transmission and preventing STIs.

4. Herpes cannot be cured, but there are good treatments for the symptoms.
  - **True**
  - False

Currently, there is no medical cure for herpes. Treatment is available for the symptoms and to reduce the likelihood of passing the virus on to others.

5. STI testing is very painful.
  - True
  - **False**

STI tests often involve a urine sample (pee in a cup), a throat swab (like a Covid test) or a blood test. They are quick and usually painless. Some tests can be taken home to do in private.

6. Sexually active people should get tested for STIs regularly.

- **True**
- False

Yearly testing is recommended for all sexually active people, and more often for some people. See the background information section for detailed recommendations on when a person should go for STI testing.

7. If you have an STI and don't tell your partner, that is fair. It is only your business.

- True
- **False**

We each have the responsibility to be honest with our partners. If you know or suspect you have an STI, it's important to tell your partner. People cannot fully consent to sex if they don't know their partner has an STI.

8. STIs among teenagers are really pretty rare.

- True
- **False**
- Unsure
- Nobody Knows

Thousands of teenagers have STIs. It doesn't matter what age you are; STIs can infect a person of any age.

9. In Broward, parents need to be notified if their child is treated for an STI.

- True
- **False**
- Unsure
- Nobody Knows

At the Sexual and Reproductive Health Clinics and STI Clinics, parents are NOT notified if their child is being treated for an STI as long as there are no concerns for the child's safety. However, it is always best to talk with your parents, even about a difficult subject such as an STI.

# STI Chart

## Transmission and Symptoms

Using the information provided on the health information sheets, fill in the chart below.

Infection	Bacteria or Virus?	Transmission	Symptoms/Effects
Chlamydia			
Gonorrhea			

Infection	Bacteria or Virus?	Transmission	Symptoms/Effects
HPV			
Genital Herpes			
HIV			

Infection	Bacteria or Virus?	Transmission	Symptoms/Effects
Syphilis			

# STI Chart

## Prevention, Testing and Treatment

Infection	Prevention	Testing	Treatment
Chlamydia			
Gonorrhea			

Infection	Prevention	Testing	Treatment
HPV			
Genital Herpes			
HIV			

Infection	Bacteria or Virus?	Transmission	Symptoms/Effects
Syphilis			

## STI CHART TEACHER ANSWER KEY

Infection	Bacteria or Virus?	Transmission	Symptoms/Effects
<b>The majority of STIs are asymptomatic. There are often no symptoms!</b>			
<b>Chlamydia</b>	Bacteria	<ul style="list-style-type: none"> <li>• Vaginal, anal, or oral sex with a person who has Chlamydia without using a condom and/or a dental dam</li> </ul>	<ul style="list-style-type: none"> <li>• Pain or burning when peeing</li> <li>• Discharge, bleeding or itching from the bum</li> <li>• Redness and/or discharge from one or both eyes</li> <li>• Watery or milky discharge from penis</li> <li>• Unusual discharge from the vagina</li> <li>• Pain or swelling of the testicles</li> <li>• Irritation or itching inside the penis</li> <li>• Vaginal bleeding/spotting between periods</li> <li>• Vaginal bleeding or pain during or after sex</li> <li>• Lower abdominal pain</li> <li>• If untreated, could lead to pelvic inflammatory disease, pain and swelling of the testicles, urinary tract problems, tubal pregnancy, fertility issues and/or arthritis</li> </ul>
<b>Gonorrhea</b>	Bacteria	<ul style="list-style-type: none"> <li>• Vaginal, oral or anal sex with a person who has gonorrhea without using a condom and/or a dental dam.</li> </ul>	<ul style="list-style-type: none"> <li>• Pain or burning when peeing</li> <li>• Swelling, itching, or pain in the genital area</li> <li>• Discharge, bleeding, or itching from the bum</li> <li>• Redness and/or discharge from one or both eyes</li> <li>• Unusual vaginal discharge</li> <li>• Irregular vaginal bleeding (often after sex)</li> <li>• Pain in the lower abdomen or pain during sex</li> <li>• Green or yellow discharge from the penis</li> <li>• Irritation or itching inside the penis</li> <li>• Painful or swollen testicles</li> <li>• If left untreated, could lead to pain and swelling of the testicles, urinary tract problems, pelvic inflammatory disease, tubal pregnancy, and/or fertility issues</li> </ul>

<b>HPV</b>	Virus	Through intimate skin-to-skin contact with a person who has HPV	<ul style="list-style-type: none"> <li>• Some strains of HPV cause genital warts; some strains cause cancer in the mouth, throat, anus, penis or cervix</li> <li>• Many people with HPV do not have symptoms</li> <li>• Some people get warts</li> <li>• Warts can show as tiny bumps or in clustered growths on the skin (may look like small cauliflower-like bumps)</li> <li>• Warts can be found in and around the genital area, including in the vagina</li> <li>• Warts may feel itchy or irritated</li> </ul>
<b>Genital Herpes</b>	Virus	<ul style="list-style-type: none"> <li>• Herpes simplex virus is spread through intimate skin-to-skin contact and oral, vaginal or anal sex</li> <li>• It can be transmitted by people who have oral or genital herpes but don't have sores at the time of contact</li> <li>• Cold sores are a form of the herpes virus. If a cold sore comes into contact with someone's genitals (oral sex) there is a risk for genital herpes.</li> </ul>	<ul style="list-style-type: none"> <li>• Some people have mild or no symptoms and don't know that they are infected</li> <li>• One or more painful blisters in or around the genitals, or wherever there is skin-to-skin contact (rectum, mouth)</li> <li>• Feeling unwell (e.g., flu-like symptoms such as chills, fever or muscle aches)</li> <li>• Tingling or itching of the skin around the genitals</li> <li>• Burning when urinating</li> <li>• Unusual discharge from vagina or penis</li> <li>• The first outbreak is the most painful. Repeat outbreaks tend to be shorter and less severe than the first outbreak.</li> </ul>
<b>HIV</b>	Virus	<ul style="list-style-type: none"> <li>• Infected semen, vaginal secretions, rectal fluid or breastmilk that gets into the blood stream through: <ul style="list-style-type: none"> <li>• vaginal, anal, oral sex without a condom and/or dental dam</li> <li>• sharing sex toys</li> <li>• sharing needles used for tattooing, drugs, piercings</li> </ul> </li> <li>• Pregnancy – the infection can be passed to a baby through childbirth or breastfeeding</li> </ul>	<ul style="list-style-type: none"> <li>• People with HIV often have no symptoms and look and feel fine.</li> <li>• Some people with HIV will have flu-like symptoms when they first get infected (e.g., fatigue, fever, sore throat, swollen glands loss of appetite, night sweats etc.)</li> <li>• HIV can lead to a condition called AIDS, after the virus has damaged the immune system. With access to treatment, most people living with HIV never develop AIDS.</li> </ul>

<b>Syphilis</b>	Bacteria	<ul style="list-style-type: none"><li>• By having direct contact with a syphilis sore</li><li>• Oral, vaginal, anal sex with infected partner</li><li>• Mother to fetus</li></ul>	<ul style="list-style-type: none"><li>• Symptoms are the same for both males and females. However many people have no symptoms</li><li>• Painless sore(s) (chancres) from pinpoint size to as large as a quarter</li><li>• Flu-like symptoms, fever, fatigue, pain in the joints and muscles</li><li>• Painless rash on hands, feet or whole body</li><li>• Swollen lymph nodes</li><li>• Hair loss</li><li>• Untreated may result in headache, dizziness, changes in personality, dementia</li></ul>
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## Answer Key

Infection	Prevention	Testing	Treatment
Chlamydia	<ul style="list-style-type: none"> <li>• Abstinence</li> <li>• Choose not to have oral, vaginal or anal sex</li> <li>• Choose safer sex practices with lower risk</li> <li>• Use condoms and/or dental dams for oral, vaginal, and anal sex.</li> <li>• Limit the number of sexual partners</li> <li>• Regular testing</li> <li>• Discuss STI history and when you were last tested with your partner(s)</li> <li>• Don't have sexual contact if you or your partner(s) have symptoms of an STI or may have been exposed to an STI</li> </ul>	<ul style="list-style-type: none"> <li>• Urine sample or swab of the penis, rectum, vagina or throat</li> </ul>	<ul style="list-style-type: none"> <li>• Antibiotic</li> </ul>
Gonorrhea	<ul style="list-style-type: none"> <li>• Abstinence</li> <li>• Choose not to have oral, vaginal or anal sex</li> <li>• Choose safer sex practices with lower risk</li> <li>• Use condoms and/or dental dams for oral, vaginal, and anal sex.</li> <li>• Limit the number of sexual partners</li> <li>• Regular testing</li> <li>• Discuss STI history and when you were last tested with your partner(s)</li> <li>• Don't have sexual contact if you or your partner(s) have symptoms of an STI or may have been exposed to an STI</li> </ul>	<ul style="list-style-type: none"> <li>• Urine sample or swab of the penis, rectum, vagina or throat</li> </ul>	<ul style="list-style-type: none"> <li>• Antibiotic</li> </ul>

Infection	Prevention	Testing	Treatment
HPV	<ul style="list-style-type: none"> <li>• Abstinence</li> <li>• Choose not to have oral, vaginal or anal sex</li> <li>• Choose safer sex practices with lower risk</li> <li>• Using condoms can lower risk, but can't completely prevent HPV because they don't cover all the skin around the genitals</li> <li>• Tell your partner(s) if you have genital warts so you can make choices together to lower the risk of passing the virus</li> <li>• Avoid intimate skin-to-skin contact where the warts are until warts are treated</li> <li>• Get immunized! Ask your health care provider about the HPV vaccine</li> </ul>	<ul style="list-style-type: none"> <li>• Visual exam if warts are present</li> <li>• Regular PAP tests (cervical cancer screening)</li> </ul>	<ul style="list-style-type: none"> <li>• Warts can be treated by health care provider with freezing</li> <li>• Can apply prescription liquids or creams to the wart</li> </ul>
Genital Herpes	<ul style="list-style-type: none"> <li>• Abstinence</li> <li>• Choose not to have oral, vaginal or anal sex</li> <li>• Choose safer sex practices with lower risk</li> <li>• Tell your partner(s) if you have herpes or cold sores so you can make choices together to lower the risk of passing the virus.</li> <li>• Use condoms and/or dental dams between outbreaks to lower the risk of passing the virus – the virus can be transmitted even when symptoms aren't present</li> <li>• Avoid sexual contact while sores are present (during an 'outbreak')</li> </ul>	<ul style="list-style-type: none"> <li>• When sores are present, they can be swabbed to test for the herpes virus</li> </ul>	<ul style="list-style-type: none"> <li>• No cure</li> <li>• Medicine may help shorten or prevent outbreaks</li> </ul>

Infection	Prevention	Testing	Treatment
HIV	<ul style="list-style-type: none"> <li>• Abstinence</li> <li>• Choose not to have oral, vaginal or anal sex</li> <li>• Choose safer sex practices with lower risk</li> <li>• Use condoms for vaginal and anal sex</li> <li>• Use a condom or dental dam for oral sex</li> <li>• Use lubrication to help avoid injury to body tissues</li> <li>• Use condoms on sex toys or avoid sharing them.</li> <li>• Don't share needles or equipment for injecting drugs</li> <li>• Be sure that the instruments for tattoos and body piercing have been sterilized</li> <li>• Pre-Exposure Prophylaxis (PrEP) helps prevent HIV in people who have a very high risk of getting the virus</li> </ul>	<ul style="list-style-type: none"> <li>• Blood test – the most accurate results will be 3 months after a potential exposure</li> </ul>	<ul style="list-style-type: none"> <li>• Anti-retroviral drugs cannot cure HIV but can help people with HIV live long, healthy lives. Treatment also makes it so that people with HIV who are on treatment are less likely to pass the virus to others.</li> </ul>
Syphilis	<ul style="list-style-type: none"> <li>• Abstinence</li> <li>• Abstain from sexual activity until treatment is completed.</li> <li>• Choose not to have oral, vaginal or anal sex</li> <li>• Choose safer sex practices with lower risk</li> <li>• Use condoms and/or dental dams for oral, vaginal, and anal sex.</li> <li>• Limit the number of sexual partners</li> <li>• Regular testing</li> <li>• Discuss STI history and when you were last tested with your partner(s)</li> <li>• Don't have sexual contact if you or your partner(s) have symptoms of an STI or may have been exposed to an STI</li> </ul>	<ul style="list-style-type: none"> <li>• Blood test</li> </ul>	<ul style="list-style-type: none"> <li>• Antibiotic</li> </ul>

# Chlamydia

Chlamydia is a sexually transmitted infection (STI) caused by a bacteria (*Chlamydia trachomatis*).

## How do I get chlamydia?

Chlamydia is passed between people through unprotected sexual contact (oral, vaginal, or anal sex without a condom or other barrier method). You can infect others right after you come in contact with chlamydia. You can spread it to others without knowing it.

## How can I prevent chlamydia?

When you're sexually active, the best way to prevent chlamydia is to use condoms or other barrier method, for oral, vaginal, and anal sex.

Don't have any sexual contact if you or your partner(s) have symptoms of an STI or may have been exposed to an STI. See a doctor or go to an STI clinic for testing.

Get STI testing every 3 to 6 months if you have:

- a new partner
- more than one partner
- anonymous partners
- any symptoms

## How do I know I have chlamydia?

Most people with chlamydia don't have symptoms. The infection can be in the rectum, penis, cervix, throat, and the eye. If you have chlamydia, you may have:

- pain or burning when you urinate (pee)
- discharge, bleeding, or itching from the rectum
- redness or discharge from one or both eyes
- unusual vaginal discharge
- irregular bleeding (often after sex)
- pain in the abdomen, low back, or during sex
- watery or milky discharge from the penis
- irritation or itching inside the penis
- painful or swollen testicles

The best way to find out if you have chlamydia is to get tested. Your nurse or doctor can test you by taking a swab or doing a urine test.

## Is chlamydia harmful?

If not treated, chlamydia can cause serious long-term effects including infertility and arthritis. Other effects include:

- pelvic inflammatory disease (PID)
- a higher risk of having a tubal pregnancy.
- pain/swelling in the testicles (epididymo-orchitis)
- urinary tract problems

These effects can be prevented if you get **early STI testing and treatment**.

**What if I'm pregnant?**

If not treated, chlamydia can cause early delivery or rupture of membranes. If you aren't treated and you have a vaginal delivery, chlamydia can cause serious eye and lung infections for the baby. Get tested and treated before delivery to prevent these problems.

**How is chlamydia treated?**

Chlamydia is treated with antibiotics. Your partner(s) also needs to be tested and treated, even if there are no symptoms.

You can get re-infected if you have unprotected sex with someone before they are treated.

**When can I have sex again?**

It will take 1 week for the antibiotic to get rid of the infection. Don't have unprotected sex (oral, vaginal, or anal sex without a condom or other barrier method) for **7 days** after you and your partner(s) have been treated. The best protection is not to have sex (oral, vaginal, or anal) for at least 7 days.

If you still have symptoms, don't have any sexual contact.

**What if I still have symptoms following treatment?**

Please contact your healthcare provider.

**Where can I find more information?**

If you have questions, need to find a clinic near you, or want more information, call 211 anytime, day or night, to talk to someone who can provide you with additional information.

# Genital herpes

Genital herpes is a sexually transmitted infection caused by 2 types of viruses. The viruses are called herpes simplex type 1 (HSV 1) and herpes simplex type 2 (HSV 2).

Both viruses cause sores on the lips (cold sores) and sores on the genitals. HSV 1 causes cold sores on the mouth more often, but it's common for both types of the virus to cause genital sores.

## How do I get genital herpes?

HSV is spread through intimate skin-to-skin contact and oral, vaginal, or anal sex. It can be spread by people who have oral or genital herpes but don't have sores at the time of contact.

## How do I know I have genital herpes?

Symptoms of genital herpes can range from mild to severe, they can include:

- small blister-like sores can develop in the genital area
- feeling very unwell
- burning in the vaginal area
- a change in vaginal discharge
- burning when you pee
- clear discharge from your penis

The first outbreak is often the most painful. Sores may take weeks to heal. Future outbreaks are often milder. Some people may have mild or no symptoms and not even know they have genital herpes.

You need to see a doctor or nurse to diagnose genital herpes. If you have sores, a swab will be taken and sent to the lab for testing.

## What if I'm pregnant?

If you're pregnant (or planning a pregnancy), talk to your doctor if you or your partner has herpes. Most people can still have vaginal deliveries. But, if you have an outbreak at the time of delivery, you may need a C-section.

## How is genital herpes treated?

There is no cure for genital herpes. It can be treated with prescribed medicine to help decrease symptoms and shorten outbreaks.

## What can I do during an outbreak?

Keep the area clean and dry. Use a clean towel and lightly dab the area dry after bathing. If it hurts to pee, pour water over the genitals while peeing. It also helps to pee in the shower or tub. Don't put creams or lotions on the sores as it can cause them to spread and get irritated.

### **How can I prevent spreading genital herpes to others?**

Tell your partner(s) that you have genital herpes so you can make choices to lower the risk of spreading the virus. Don't have sexual contact (oral, vaginal, or anal) while you have sores or if you have any symptoms that may appear before sores, like tingling, itching, and pain.

Use condoms and dental dams between outbreaks to lower the risk of spreading the virus. Condoms don't cover all of the skin that may be exposed to genital herpes during sexual contact.

The virus can be spread even if you don't have symptoms. This is called **asymptomatic viral shedding**.

Daily medicine can be prescribed by a doctor if you have frequent outbreaks. Taking daily medicine and using condoms and dental dams may help lower the chances of spreading genital herpes to an uninfected partner.

### **Where can I find more information?**

If you have questions, need to find a clinic near you, or want more information, call 211 anytime, day or night, to talk to someone who can provide you with additional information.

# Gonorrhea

Gonorrhea is a sexually transmitted infection (STI) caused by a bacteria (*Neisseria gonorrhoeae*).

## How do I get gonorrhea?

Gonorrhea is passed between people through unprotected sexual contact (oral, vaginal, or anal sex without a condom or other barrier method). You can infect others right after you come in contact with gonorrhea. You can spread it to others without knowing it.

## How do I prevent gonorrhea?

When you're sexually active, the best way to prevent gonorrhea is to use condoms or other barrier method for oral, vaginal, and anal sex.

Don't have any sexual contact if you or your partner(s) have symptoms of an STI or may have been exposed to an STI. See a doctor or go to an STI clinic for testing.

Get STI testing every 3 to 6 months if you have:

- a new partner
- more than one partner
- anonymous partners
- any symptoms

## How do I know if I have gonorrhea?

Up to 4 in 10 people with gonorrhea don't have symptoms. The infection can be in the rectum, penis, cervix, throat, and the eye. If you have gonorrhea, you may have:

- pain or burning when you urinate (pee)
- unusual vaginal discharge
- green or yellow discharge from the penis
- irritation or itching inside the penis

Other symptoms include:

- irregular bleeding (often after sex)
- pain in the abdomen or pain during sex
- painful or swollen testicles
- discharge, bleeding, or itching from the rectum
- redness or discharge from one or both eyes
- swelling, itching, or pain in the genital area

The best way to find out if you have gonorrhea is to get tested. Your nurse or doctor can test you by taking a swab or doing a urine test.

### **Is gonorrhea harmful?**

If not treated, gonorrhea can cause **serious** long-term effects including infertility and arthritis.

Other effects include:

- [pelvic inflammatory disease \(PID\)](#)
- a higher risk of having a tubal pregnancy
- pain/swelling in the testicles ([epididymo-orchitis](#))
- urinary tract problems

These effects can be prevented if you get **early STI testing and treatment**.

### **What if I'm pregnant?**

If not treated, gonorrhea can cause early delivery or rupture of membranes. If you are pregnant, aren't treated, and have a vaginal delivery, gonorrhea can cause serious eye, blood, and joint infections for the baby. Get tested and treated **before** delivery to prevent problems.

### **How is gonorrhea treated?**

Gonorrhea is treated with antibiotics. Your partner(s) needs to be tested and treated, even if there are no symptoms. You can get re-infected if you have unprotected sex with someone before they are treated.

### **When can I have sex again?**

It will take 1 week for the antibiotic to get rid of the infection. Don't have unprotected sex (oral, vaginal, or anal sex without a condom or other barrier method) for **7 days** after you and your partner(s) have been treated. The best protection is **not** to have sex (oral, vaginal, or anal) for at least 7 days.

If you still have symptoms, don't have any sexual contact.

### **What if I still have symptoms following treatment?**

Please contact your healthcare provider.

### **Where can I find more information?**

If you have questions, need to find a clinic near you, or want more information, call 211 anytime, day or night, to talk to someone who can provide you with additional information.

## **What is HIV? What is AIDS?**

HIV (human immunodeficiency virus) is a virus that attacks the [immune system](#), the body's natural defence system. Without a strong immune system, the body has trouble fighting off disease. Both the virus and the infection it causes are called HIV.

[White blood cells](#) are an important part of the immune system. HIV infects and destroys certain white blood cells called CD4+ cells. If too many CD4+ cells are destroyed, the body can no longer defend itself against infection.

The last stage of HIV infection is [AIDS](#) (acquired immunodeficiency syndrome). People with AIDS have a low number of CD4+ cells and get infections or cancers that rarely occur in healthy people. These can be deadly.

But having HIV doesn't mean you have AIDS. Even without treatment, it takes a long time for HIV to progress to AIDS—usually 10 to 12 years.

When HIV is diagnosed before it becomes AIDS, medicines can slow or stop the damage to the immune system. If AIDS does develop, medicines can often help the immune system return to a healthier state.

With treatment, many people with HIV are able to live long and active lives.

There are two types of HIV:

- HIV-1, which causes almost all the cases of AIDS worldwide

## **What causes HIV?**

HIV infection is caused by the human immunodeficiency virus. You can get HIV from contact with infected blood, semen, or vaginal fluids.

- Most people get the virus by having unprotected sex with someone who has HIV.
- Another common way of getting it is by sharing drug needles with someone who is infected with HIV.
- The virus can also be passed from a mother to her baby during pregnancy, birth, or breastfeeding.

HIV doesn't survive well outside the body. So it can't be spread by casual contact like kissing or sharing drinking glasses with an infected person.

## **What are the symptoms?**

HIV may not cause symptoms early on. People who do have symptoms may mistake them for the flu or [mono](#). Common early symptoms include:

- Fever.
- Sore throat.
- Headache.
- Muscle aches and joint pain.

- Swollen glands (swollen [lymph nodes](#)).
- Skin rash.

Symptoms may appear from a few days to several weeks after a person is first infected. The early symptoms usually go away within 2 to 3 weeks.

After the early symptoms go away, an infected person may not have symptoms again for many years. After a certain point, symptoms reappear and then remain. These symptoms usually include:

- Swollen lymph nodes.
- Extreme tiredness.
- Weight loss.
- Fever.
- Night sweats.

### **How is HIV diagnosed?**

A doctor may suspect HIV if symptoms last and no other cause can be found.

If you have been exposed to HIV, your immune system will make [antibodies](#) to try to destroy the virus. Doctors use tests to find these HIV antibodies or [antigens](#) in urine, saliva, or blood.

If a test on urine or saliva shows that you are infected with HIV, you will probably have a blood test to confirm the results.

Most doctors use a blood test to diagnose HIV infection. If the test is positive (meaning that HIV antibodies or antigens are found), a test to detect HIV DNA or RNA will be done to be sure.

HIV antibodies or antigens usually show up in the blood within 3 months. If you think you have been exposed to HIV but you test negative for it:

- Get tested again. A repeat test can be done after a few weeks to be sure you are not infected.
- Meanwhile, take steps to prevent the spread of the virus, in case you do have it.

You can get HIV testing in most doctors' offices, public health units, hospitals, and HIV care clinics.

### **How is it treated?**

The standard treatment for HIV is a combination of medicines called antiretroviral therapy, or ART. Antiretroviral medicines slow the rate at which the virus multiplies.

Taking these medicines can reduce the amount of virus in your body and help you stay healthy.

To monitor the HIV infection and its effect on your immune system, a doctor will regularly do two tests:

- **Viral load**, which shows the amount of virus in your blood
- **CD4+ cell count**, which shows how well your immune system is working

After you start treatment, it's important to take your medicines exactly as directed by your doctor. When treatment doesn't work, it is often because HIV has become [resistant](#) to the medicine. This can happen if you don't take your medicines correctly.

### **How can you prevent HIV?**

HIV is often spread by people who don't know they have it. So it's always important to protect yourself and others by taking these steps:

- **Practice safer sex.** Use a condom every time you have sex (including oral sex) until you are sure that you and your partner aren't infected with HIV or other sexually transmitted infection (STI).
- **Don't have more than one sex partner** at a time. The safest sex is with one partner who has sex only with you.
- **Talk to your partner** before you have sex the first time. Find out if he or she is at risk for HIV. Get tested together. Use condoms in the meantime.
- **Don't drink a lot of alcohol or use illegal drugs before sex.** You might let down your guard and not practice safer sex.
- **Don't share personal items**, such as toothbrushes or razors.
- **Never share needles or syringes** with anyone.

If you are at high risk for getting infected with HIV, you can take antiretroviral medicine to help protect yourself from HIV infection. Experts may recommend this for:

- People whose sexual practices put them at high risk for HIV infection, such as men who have sex with men and people who have many sex partners.
- People who inject illegal drugs, especially if they share needles.
- Adults who have a sex partner with HIV.

To keep your risk low, you still need to practice safer sex even while you are taking the medicine.

### **Where can I find more information?**

If you have questions, need to find a clinic near you, or want more information, call 211 anytime, day or night, to talk to someone who can provide you with additional information.

## **Human papillomavirus (HPV)**

HPV is the most common sexually transmitted infection (STI) in the world. You will likely get some type of HPV in your life and not have any symptoms.

Some strains of HPV can cause genital warts and cancer. There are over 100 different types of HPV. About 40 types can be spread through sexual contact. Most types of HPV are harmless, cause no symptoms, and go away without treatment.

### **How do I get HPV?**

If you have any type of sexual contact (oral, vaginal, or anal), you're at risk for HPV. It can be spread through intimate skin-to-skin contact with a person who has HPV. HPV can be spread even if there are no symptoms or you can't see any warts.

### **How do I know I have HPV?**

Many people with HPV don't have symptoms. Genital warts may be the only sign that someone has HPV. Genital or anal warts may look like tiny bumps or clustered growths on the skin (often a cauliflower-like texture). Most HPV infections go away on their own within 2 to 3 years.

There is no routine test for HPV. You need to see a doctor or nurse to be diagnosed with genital warts.

### **Is HPV harmful?**

Some types of HPV are linked to cervical cancer, other genital cancers, and cancer of the penis, anus, mouth, and throat. Some types of HPV cause genital warts, but most warts aren't harmful.

### **How are genital warts treated?**

Genital warts can be treated by some doctors and in STI clinics with freezing (liquid nitrogen). You may need more than 1 treatment.

Other treatments include prescription creams or liquids that you or your doctor put on. Talk to a nurse or doctor to see which treatment is right for you.

### **Don't:**

- scratch or shave the affected area as it can cause the virus to spread
- use over-the-counter wart treatments for genital warts

### **How can I prevent spreading HPV?**

Tell your partner(s) that you have genital warts so you can make choices to lower the risk of spreading the virus.

Using a condom is good protection against STIs. But condoms don't cover all the skin around the genitals. This means you aren't completely protected from HPV even if you use a condom.

### **Should I get regular Pap tests?**

There is a link between HPV and cervical cancer, so regular cervical cancer screening ( Pap tests) are important. A Pap test is when a doctor checks your cervix and takes a tissue sample. If there are abnormal cells on the cervix, this may lead to cervical cancer. Regular follow-up is needed.

**Is there an HPV Vaccine?**

You can get vaccinated to protect yourself from certain types of HPV. Talk to your parent and nurse or doctor if you're interested.

**What if I still have symptoms following treatment?**

Please contact your healthcare provider.

**Where can I find more information?**

If you have questions, need to find a clinic near you, or want more information, call 211 anytime, day or night, to talk to someone who can provide you with additional information.

# Syphilis

Syphilis is a sexually transmitted infection (STI) caused by a bacteria (*Treponema pallidum*). The infection progresses in stages.

## How do I get syphilis?

Syphilis is passed between people through sexual contact (anal, oral, or vaginal). You can spread it to others without knowing it.

Pregnant people can pass the infection to their unborn baby. Babies can also get infected if they have contact with a lesion or open sore on the birth parent's genitals while they're being born.

## How can I prevent syphilis?

The only sure way to prevent a syphilis infection is to have no sexual contact (abstinence), including anal, oral, or vaginal sex.

When you're sexually active, the best way to prevent syphilis is to use condoms, vaginal condoms, or dental dams for anal, oral, or vaginal sex.

Don't have any sexual contact if you or your partner(s) have symptoms of an STI or may have been exposed to an STI. See a healthcare provider or go to an STI clinic for testing.

Get STI testing if you are at risk or have symptoms.

Get STI testing every 3 to 6 months if you have:

- a new partner
- more than one partner
- anonymous partners
- any symptoms

## How do I know I have syphilis?

Many people with syphilis have no symptoms, while others may have:

- sores on or near the penis or in and around the vagina, mouth, or rectum
- a rash on the palms of the hands, feet, or the whole body

The sores and rash may not be painful.

The best way to find out if you have syphilis is to get tested. Your nurse or doctor will do a blood test and test you for other STIs and HIV.

## Is syphilis harmful?

If not treated, syphilis may cause blindness, paralysis, deafness, brain and heart disease, and mental health problems. These effects can be prevented if you get **early STI testing and treatment**.

## What if I'm pregnant?

If you're pregnant with syphilis and you don't get treated, syphilis can cause:

- late-term miscarriage—your baby dies in your womb
- birth defects—problems with your baby's genes or other health problems

- stillbirth

Syphilis can also:

- damage your baby's bones, teeth, vision, and hearing
- affect how their brain develops
- cause anemia and lung infections

When a pregnant person is treated before delivering their baby, these problems can be prevented. Routine syphilis screening will be performed at the first trimester or prenatal visit as well as when the baby is being delivered.

### **How is syphilis treated?**

Syphilis is treated with antibiotics. Your partner(s) also needs to be tested and treated, even if they have no symptoms. You can get re-infected if you have unprotected sex with someone before they're treated.

Your blood test for syphilis will likely stay positive, even if you've been properly treated. But, you can be re-infected if you're exposed again.

After treatment, you'll have follow-up blood tests at 3, 6, and 12 months to make sure the treatment worked.

### **When can I have sex again?**

If you've been diagnosed with syphilis, then your sexual partner(s) may also have syphilis. It's important that your partner(s) be tested and treated before you have sex with them again.

It will take 1 week for the antibiotic to get rid of the infection. **The best protection is not to have sex (anal, oral, or vaginal) for at least 7 days. If you do choose to have sex**, don't have unprotected sex (anal, oral, or vaginal) for **7 days** after you and your partner(s) have been treated.

If you still have symptoms, don't have any sexual contact until you've seen your healthcare provider.

### **Should I tell my partner(s)?**

Yes. You need to tell your partner(s) so you can stop the infection from spreading. It might be hard or embarrassing, but it's important to have an open and honest conversation with your partner(s), and it's important for them to be tested and treated.

There are a few ways to tell your partner(s). You can tell them yourself or public health can help you. Talk to your healthcare provider about what's right for you.

### **Do I need to tell my partner(s) right away?**

Yes. Make sure you and your partner(s) are treated at the same time, even if they don't have symptoms. You can get infected with syphilis again if you have unprotected sex with a partner who hasn't been treated.

### **Where can I find more information?**

If you have questions, need to find a clinic near you, or want more information, call 211 anytime, day or night, to talk to someone who can provide you with additional information.