НОРЕ	E	Unit 6: I	Reproductiv	e Health Unit	Unit Length: 3 Weeks		
Lesson Topic: Ak	ostinence, Pers	onal and Sexual Health	Lesson Duration: 3 Weeks				
ACAI	DEMIC VOCABUL			FL STANDARDS & BENCHMA			
Abstinence Accurate Alternative Amenorrhea Barrier Benefit Birth Canal Bladder Body Language Cervix Circumcision Clitoris Commitment Consequence Cowper's Glands Decision-Making Discharge Effective Ejaculation Embryo Epididymis Erection	Fallopian Tuber Fertilization Fetus Foreskin Gender Genitals Ineffective Influence Labia Majora Labia Minora Menstruation Mons pubis Ovaries Ovulation Penis Pregnancy Refusal Skills Reproductive Scrotum Self-Exam Semen Seminal Fluid Seminal Vesicle	Sperm Teen Dating Violence Testicles Testosterone Urethra Uterus Vagina Vas deferens Vulva	health status to include HE.912.PHC.1.2 – And teection, and treatm HE.912.PHC.2.6 – Probable health status. HE.912.PHC.3.10 – End that will maintain or including reproductive HE.912.PHC.4.2 – Probable health probable health probable health probable health status.	ropose strategies to reduce or prevent oblems. redict how healthy behaviors can affect tus.	HEALTH SKILL(S) ADDRESSED Personal Health Concepts Decision Making Self-Management Interpersonal Communication		
Estrogen	Sexting		and resources.	•			
LESSON	OBJECTIVES/ S TARGET	AMPLE LEARNING 'S		LESSON CONTENT			
of the male and female Students will be able	ale reproductive sy e to justify why abs	lans and describe the functions /stem. tinence is the safest, most tections from HIV, other STDs		vention (including Contraceptives) Dience Prevention (Healthy vs. Unhealthy Rel	ationships)		
	LESSON RE	SOURCES AND ACTIVITIES		ASSESSMEN [*]	T(S)		
Text Resources Health Smart Abstinence, Personal and Sexual Health Lesson 1: Living a Healthy Life (pg. 1-10) Lesson 7: Review of the Reproductive System (p. 89-102) "Male Reproductive Organs" (Slide 7) "Female Reproductive Organs" (Slide 8-9) Lesson 8: Taking Care of your Sexual Health (p. 103-118) "Breast Self Exam" (Master 6)/"Male Self Exam" (Master "Sexual Health Situations 1-4" (Masters 8A-D) Lesson 9: What's in it for Me? (p.119 – 133) "Definition of Sexual Abstinence" (Slide 10) Lesson 13: Making Decisions to Support Abstinence (p.171 – 184) "Decision-Making Steps" (Slide 12) Lesson 14: Resisting Sexual Pressure (p.187 – 196) "Refusal Skills" (Slide 13)			,	Health Smart Abstinence, Personal and Sex "Assessing my Health Habits" (p.2-3) "Male Reproductive Organs" (p.18) "Female Reproductive Organs" (p.19) "Understanding Human Reproduction" "Taking Care of your Sexual Health" (p. "Keys to Sexual Health" (p.27-28) "Spreading the Word about Sexual He. "Why Choose Abstinence" (p. 30) "Decision Scenario" (p. 38-39) "Turning off Pressure" (p. 42-43) "Saying No" (p.44) Health Smart HIV, STD & Pregnancy Prevel "Birth Control Guided Notes" (p.9-12)	(p. 20) p. 21-26) alth" (p.29)		
 "Birth Birth Health Smart Violence Lesson 8: Prev "Unc "Health 	ding Pregnancy (p th Control: Things h Control Fact She ce and Injury Prev- renting Dating Viol derstanding Dating derstanding Dating	.51 – 64) to think About" (Slide 2) sets (5A-J) ention ence (p.133 - 152 g Violence" (Slide 14) y Dating Relationships" (Slide 15	5)	Health Smart Violence and Injury Prevention "My Guide to Preventing Dating Violen			

Lesson 1 Living a Healthy Life

Overview

This lesson introduces students to the idea of leading a healthy life. The lesson begins with a self-assessment of various health habits. Then students discuss life expectancy and brainstorm factors that contribute to quality of life. They examine health risk factors that could compromise their quality of life or life expectancy, as well as healthy habits that could contribute to quality of life, based on their completed self-assessments.

Time: 45-60 minutes

Lesson Objectives

Students will be able to:

- **1.** Explain the difference between life expectancy and quality of life.
- 2. Describe factors that can affect quality of life.
- **3.** Assess personal health- and wellness-related practices and behaviors that reduce or prevent health risks.

Materials & Preparation

Prepare

- Be sure to send the **Family Letter** (Master 1) home with students prior to teaching this unit.
- Have chart paper and markers.
- Post 5 pieces of chart paper around the room. Title the pieces:
 - Physical Health

- Intellectual Health
- Emotional/Mental Health
- Spiritual Health

— Social Health

National Health Education Standards

Standard 1:

Comprehending Concepts

Performance Indicator 1.12.1: Predict how healthy behaviors can affect health status.

Performance Indicator
1.12.2: Describe the interrelationships of emotional, intellectual, physical and social health.

Standard 6: Goal Setting

Performance Indicator 6.12.1: Assess personal health practices and overall health status.

Review

• Assessing My Health Habits (*Student Workbook* pages 2–3), and Scoring Rubric, page 251.

Health Terms

Review the teaching steps and activity sheet for any terms or concepts your students may not know, and be prepared to explain them. Examples:

- · emotional health
- intellectual health
- · life expectancy
- lifespan
- mental health

- · physical health
- quality
- _quantity
- · social health
- spiritual health

Support for Diverse Learners

To ensure student success with comprehending concepts:

- Pre-teach new concepts and terms. Write new terms on the board. Frequently use verbal checks for comprehension.
- Be aware and considerate of the varied beliefs that may influence personal health choices and behaviors of students and their families. Cultural, spiritual, religious or personal beliefs can affect how, when, where and from whom a person seeks health care treatment or advice. For example, some students might visit a tribal healer instead of a physician, and some families may choose not to immunize their children. In some states, students can attend school without being immunized.
- Create and provide students with a list of factors that may or may not affect a person's quality of life. Have students label each factor with:
 - a plus sign (+) for those things they think would improve or contribute to a good quality of life
 - a minus sign (-) for those things they think could hurt or diminish quality of life
 - —an X for those things that would make no difference to a person's quality of life

Read the list of factors aloud, allowing students time to answer before proceeding to the next item.

Review the Family Letter with students before sending home.

To ensure student success with reading:

 Allow students to complete the Assessing My Health Habits with a class partner. The student with stronger reading skills can interview the other and record his or her answers to the survey questions. Or allow students to complete the survey as homework with the help of a family member.

To ensure student success with writing:

• For the **Exit Ticket**, allow students to explain their responses to the teacher or adult classroom aide.

To challenge accelerated learners:

• Have students explore and report on the public health achievements that have contributed to increased life expectancy: www.cdc.gov/about/history/tengpha.htm.

Introduction

Get students ready for learning

Transition

On a piece of paper, write a few sentences about how old you think you'll live to be and why.

Allow students to focus and work quietly for a minute or two. Call on student volunteers to share what they wrote, and note the range of ages shared on the board.

Motivate

What kinds of things do you think influence how long a person lives?

Allow students to briefly share their ideas. Make a list of suggested factors on the board. Examples include:

- genes/heredity
- lifestyle habits—eating healthy foods, being physically active, getting enough sleep
- exposure to risks or dangerous circumstances
- environment or where a person lives
- · stressors

Which of these factors do you think a person has some control over?

Circle factors as students name them. If students disagree about the degree of control people have over a particular factor, allow them to explain their reasons.

Which of these factors have something to do with a person's health?

Star or underline suggested factors. Highlight those that relate to health and that are within a person's control. These should include lifestyle habits, exposure to certain risks and stressors.

Teaching Steps

Define life expectancy and lifespan

Explain

Life expectancy is defined as the expected number of years of life remaining at any given age for a group of people. It's an estimate or prediction that's based on statistics and the average for that population. It's not an exact calculation, and it doesn't hold true for all of the individuals in that group. A person's *lifespan* is the number of years he or she actually lives.

Survey

To what age do you think someone in the United States who's 15 years old today will live?

Allow several students to guess.

Summarize

According to statistics compiled by the Centers for Disease Control and Prevention, someone living in the United States who's 15 years old right now could expect to live another 64 to 65 years—to an average age of 78.5 years. If you break these statistics down by gender, a 15-year-old male would live to be 76, and a 15-year-old female would live to be 81. (Note: For updates on these statistics, see www.cdc.gov/nchs/fastats/ lifexpec.htm.)

Ask & Discuss

Why do you think the average life expectancy is different for males and females?

Allow students to respond to the question and discuss their ideas.

Summarize

Experts tend to agree that differences in the life expectancy of men and women can be linked to their behavior choices. For example, men are more likely to:

 Participate in risk-taking behaviors, such as driving fast or recklessly, or participating in high-risk sports.

- · Use tobacco and alcohol.
- Not seek medical attention when they need it.

Women, on the other hand, are more likely to:

- · Have support systems to help them handle stress.
- · Seek professional health care when sick or injured.
- Get routine health screenings, such as annual physicals and other tests.

It's important to remember that these are averages. A person of either gender can extend or lower individual life expectancy based on the types of behavior and health choices he or she makes.

Define quality of life

Explain

Life expectancy refers to the number of years a person can be expected to live. It measures the *quantity* or amount of a person's life. Something else to consider is the *quality* of a person's life. Quality of life includes all the things or aspects that make a person's life enjoyable and meaningful.

Ask & Discuss

What do you think contributes to a person's quality of life?

Allow students to respond to the question and discuss their ideas. Write key points on the board. If students are having difficulty coming up with ideas, refer them to the list of factors that can affect life expectancy that they brainstormed at the beginning of class and incorporate any relevant items. Examples include:

- · caring relationships (with family, friends, peers, community)
- · enjoyable and meaningful work
- · leisure activities
- education/learning
- · creative interests and talents
- good physical health and fitness
- good emotional and mental health
- · sense of meaning and worth
- · personal values and beliefs

- · positive connection to culture
- spiritual beliefs
- · well-managed finances
- · safety and security

Summarize

Almost all of the things you've named relate to health in some way. Remember that health isn't just about how your body feels and works. Health includes physical, mental/emotional, intellectual, social and spiritual dimensions. All of these dimensions of health are important, and they all have an effect on the quality of a person's life.

For many people, quality of life is just as important as or even more important than quantity. If a person lives for many years, but can't enjoy life or contribute to the world in some way because of poor health, the quality of his or her life is compromised. Fortunately, many of the things that can improve your health and help you live a long life will also contribute in positive ways to quality of life.

■ Students examine factors that affect health and quality of life

Prepare

Put students into 5 small groups and give each group a marker. Point out the pieces of chart paper posted around the room.

Explain

Clarify the different dimensions of health, as needed:

- Physical health has to do with your body and how well it works. It
 can include all the things you do to take care of your body and keep
 it well, as well as things that either help or hurt your body.
- Emotional/mental health has to do with how a person thinks, feels and acts as he or she copes with life.
- **Social health** has to do with relationships with others, including your family, friends, peers and the wider community.
- Intellectual health has to do with your mind and learning.
- **Spiritual health** has to do with how people find meaning and purpose in their lives.

Complete

Explain the activity to students:

- You'll be working in your groups to think about all the different factors that could affect a person's quality of life. Starting with the chart paper to which your group is assigned, brainstorm a list of things related to this dimension of health that could affect a person's quality of life.
- As you make your list, put a plus sign (+) by those things you think
 would improve or contribute to a good quality of life, and put a
 minus sign (-) by those things you think could hurt or diminish
 quality of life.
- When I tell you to switch, your group should rotate to the next piece
 of chart paper, read what the previous group wrote and add any new
 ideas you have to the list. You'll have a chance to brainstorm factors
 for all 5 dimensions of health.

Follow these steps to complete the activity:

- Assign each group to one of the pieces to start. Give students
 2 minutes to brainstorm factors that affect quality of life related to that dimension of health.
- After 2 minutes, signal groups to stop and move to the next piece of chart paper.
- Continue the process until groups are back at their original chart paper stations.
- Have members from each group read the points from the chart paper and explain how each one can influence quality of life positively or negatively. Allow time for brief discussion of points as needed. Point out factors that were listed under more than one dimension of health, and discuss how a factor can contribute to multiple dimensions.

Ask & Discuss

How are these different factors and dimensions of health related? Do they affect each other? How?

Allow students to respond to the questions and discuss their ideas. Help them understand how the factors can affect each other and contribute to quality of life. For example, having strong and caring relationships can support good emotional health, which can give a person the confidence to pursue his or her interests and talents; or feeling physically healthy and fit can help a person feel safer and more secure.

Students assess health behaviors

Explain

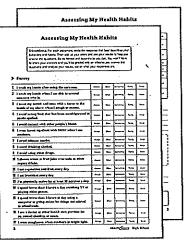
Today, you're going to begin learning about things that affect people's physical health and wellness. You can't control all of the things that have an influence on how long you'll live, but personal behaviors, health habits and lifestyle choices are often within your control. You're going to take a survey that will help you examine your health habits now.

Complete

Direct students to turn to Assessing My Health Habits on page 2 of the Student Workbook.

Answer the survey items to assess your current health habits. Be as honest and accurate as you can. You won't have to share your answers and you won't be graded on your responses.

Allow time for students to complete the activity sheet. Explain that they'll be referring back to this survey in upcoming classes.



Workbook pages 2-3

Assessment & Closure

Students demonstrate learning

Exit Ticket

On a piece of paper:

- Explain the difference between life expectancy and quality of life.
- Give at least 1 specific example that illustrates the difference.
- Describe at least 2 factors that could affect a person's quality of life in positive ways and explain why each would have a positive effect.
- Describe at least 2 factors that could affect a person's quality of life in negative ways and explain why each would have a negative effect.

Be sure to put your name on your paper and hand it in before you leave class.

Write the criteria for completing the Exit Ticket on the board and allow time for students to complete the assignment.

End the lesson

Close

What's more important to you—quality or quantity of life—and why? Allow a number of students to share their answers.

Assess

Collect students' Assessing My Health Habits activity sheets and Exit Tickets, and evaluate their work for this lesson.

Assessment Evidence
Objective 1
Students explained the difference between life expectancy and quality of life by:
☐ Completing the Exit Ticket.
Objective 2
Students described factors that can affect quality of life by:
☐ Completing the Exit Ticket.
Objective 3
Students assessed personal health- and wellness-related practices and behaviors that reduce or prevent health risks by:
\square Completing the Assessing My Health Habits activity sheet.
(Scoring Rubrics, page 251)

Student Journal

Lesson 1: Living a Healthy Life

Health terms

emotional health intellectual health life expectancy lifespan mental health physical health quality quantity social health spiritual health

Journal entry Write a few sentences about how old you think you'll live to be and why. **Class discussion notes**

Assessing My Health Habits

Directions: For each statement, circle the response that best describes your behaviors and habits. Then add up your score and use your results to help you answer the questions. Be as honest and accurate as you can. You won't have to share your answers and you'll be graded only on whether you answer the questions and analyze your results, not on what your responses are.

Survey

					<u> </u>	
1	I wash my hands after using the restroom.	Always	Often	Sometimes	Rarely	Never
	I wash my hands when I am sick or around someone who is.	Always	Often	Sometimes	Rarely	Never
3	I cover my mouth and nose with a tissue or the inside of my elbow when I cough or sneeze.	Always	Often	Sometimes	Rarely	Never
4	I avoid eating food that has been unrefrigerated or smells spoiled.	Always	Often	Sometimes	Rarely	Never
5	I avoid contact with other people's blood.	Always	Often	Sometimes	Rarely	Never
6	I wear insect repellant with DEET when I am outdoors.	Always	Often	Sometimes	Rarely	Never
7	I avoid tobacco smoke.	Always	Often	Sometimes	Rarely	Never
8	I avoid drinking alcohol.	Always	Often	Sometimes	Rarely	Never
9	I avoid using other drugs.	Always	Often	Sometimes	Rarely	Never
10	I choose water or fruit juice over soda or other sugary drinks.	Always	Often	Sometimes	Rarely	Never
11	I eat vegetables and fruit every day.	Always	Often	Sometimes	Rarely	Never
12	I eat breakfast every day.	Always	Often	Sometimes	Rarely	Never
13	I'm physically active for at least 30 minutes a day.	Always	Often	Sometimes	Rarely	Never
14	I spend fewer than 2 hours a day watching TV or playing video games.	Always	Often	Sometimes	Rarely	Never
15	I spend fewer than 2 hours at day using a computer or going online for things not related to schoolwork.	Always	Often	Sometime	s Rarely	Never
16	I see a doctor or other health care provider for an annual checkup or exam.	Always	Often	Sometime	s Rarely	Never
17	I wear sunglasses when outdoors in bright light.	Always	Often	Sometime	s Rarely	Never

Assessing My Health Habits

(continued)

9 I	nlav mv	music system at a low volume.	Always	Often	Sometimes	Rarely	Never
		plugs if I'll be around loud music or	Always	Often	Sometimes	Rarely	Never
-		nscreen with an SPF of at least 15 when doors for more than an hour.	Always	Often	Sometimes	Rarely	Never
?1 I	get 8 or	more hours of sleep at night.	Always	Often	Sometimes	Rarely	Never
22 1	I brush ar	nd floss my teeth at least once a day.	Always	Often	Sometimes	Rarely	Never
23	I drink wa	ater throughout the day.	Always	Often	Sometimes	Rarely	Never
		nelmet when I ride a bicycle, motorcycle, rd or rollerblade.	Always	Often	Sometimes	Rarely	Never
	I wear a s vehicle.	safety belt when I ride in a car or other	Always	Often	Sometimes	Rarely	Never
	erinda dinga til sekkilik kilonomida elem de mog	Healthy Habits Score:					
		Number of "Always" answers:	:		x 4	=	
		Number of "Often" answers:			x 3	=	
		Number of "Sometimes" answ	vers:		х 2	=	
		Number of "Rarely" answers:			х 1	=	
					Tota	l:	
,== = i		प्रदा रहता है कि	2004 2004 NOVE NO	oy sest teed ###A		i puna, mana kand	Prints break ferms
[:	How D	id You Score?					
1		Congratulations! You're doing lots of things that v					
i •	50 to 75	You have quite a few healthy habits. Can you see					∍?
	25 to 50	You're doing some things to help keep yourself h improvement.	ealthy, bu	t there's	also room	for	
1	0 to 25	You can definitely use what you'll be learning in the	his class t	to improv	e your hea	lth habits	S.
1	to be not built dominion, doe with the realisting in the state of improve years.						

Improving My Health Habits

Directions: Use the results from your **Assessing My Health Habits** activity sheet to answer the questions. Review the items to which you answered "Rarely" or "Never" and choose one you'd like to or think you can change.

	What's the specific behavior you want or need to change?
	How could your quality of life be affected in the future if you don't change this health behavior?
)	Describe at least 3 ways that changing this behavior could benefit you. Think about physical, mental/emotional and social benefits.
	·

Improving My Health Habits

(continued)

_	How could you change this behavior? Describe at least 2 s you'd have to do to make the change.	steps you could take or things
- -		
\smile	Jidentify 1 or 2 people who could help you accomplish this how they could help.	s behavior change and explain
6	6 Write 1 thing you intend to do in the next week to help ir	mprove this health habit.
	Colf C	=
		heck Indicate the definition of the health behavior I want to change. Indicate the definition of the definition of the health behavior I want to change.
	don't cha	ange this behavior. ed at least 3 ways changing this behavior could
	benefit m	ne. ed at least 2 steps I could take or things I'd do to
		d 1 or 2 people who could help me.
	☐ I wrote 1 timprove t	thing I intend to do in the next week to help this habit.

Lesson 7 Review of the Reproductive System

Overview

This lesson reviews reproductive anatomy and physiology, including how pregnancy happens. After taking a pretest to assess their current knowledge, students review the organs and functions of the male and female reproductive systems.

Time: 45-60 minutes

Note: Instruction can be expanded or the material quickly reviewed, depending on students' current level of knowledge and understanding.

If time is limited, the assessment activity sheet may be completed as homework.

Lesson Objectives

Students will be able to:

- 1. Identify the organs of the male and female reproductive systems.
- **2.** Describe the functions of the male and female reproductive systems.
- **3.** Summarize the relationship between the menstrual cycle and becoming pregnant.

Materials & Preparation

Prepare

- Have Male Reproductive Organs (Slide 7), Female Reproductive Organs—External (Slide 8) and Female Reproductive Organs— Internal (Slide 9), or make transparencies, if needed.
- Have blank index cards for each student.

National Health Education Standards

Standard 1: Comprehending Concepts Performance Indicator 1.12.1: Predict how healthy behaviors can affect health status.

Review

- Tips on Answering Questions About Sexuality, page 101.
- Male Reproductive Organs (Student Workbook page 18) and Female Reproductive Organs (Student Workbook page 19).
- Understanding Human Reproduction (*Student Workbook* page 20), Understanding Human Reproduction *Key*, page 102, and Scoring Rubric, page 257.

Health Terms

Review the teaching steps, slides, teacher pages and activity sheets for any terms or concepts your students may not know, and be prepared to explain them. Examples:

- birth canal
- bladder
- cervix
- clitoris
- Cowper's glands
- ejaculation
- embryo
- epididymis
- erection
- estrogen
- fallopian tubes
- fertile
- fertilization
- fetus
- labia majora
- labia minora
- menstruation
- mons pubis
- ovaries
- ovulation

- penis
- pre-ejaculate fluid
- pregnancy
- progesterone
- · prostate gland
- reproductive
- scrotum
- semen
- seminal fluid
- · seminal vesicles
- sperm
- testicles
- testosterone
- urinary opening
- urethra
- uterus
- vagina
- · vaginal opening
- · vas deferens
- vulva

Support for Diverse Learners

To ensure student success with comprehending concepts:

- Pre-teach new concepts and terms. Write new terms on the board. Frequently use verbal checks for comprehension.
- Before teaching the lesson, assess knowledge of anatomy and physiology, and teach a mini-lesson on male and female reproductive anatomy, if needed.
- On cards, post-its or slips of paper, write each function of the organs
 of the male and female reproductive systems. Then display the
 Male Reproductive Organs and 2 Female Reproductive Organs slides
 one at a time on a white board and have students post the correct
 function next to the name of the body part.
- Have students use colored markers to code the organ with the function on the Reproductive Organs activity sheets.

To ensure student success with writing:

- Pair students with stronger writing skills or peer tutors with students who may need help with reading and responding to the Understanding Human Reproduction activity sheet. One student can review/read the questions on the quiz, while the other student responds and records the answer. Then review the answers for accuracy and discuss.
- Allow students to complete the Understanding Human Reproduction activity sheet as homework.

Introduction

Get students ready for learning

Transition

In the last class, you learned about different aspects and dimensions of sexual health. On a piece of paper, write a few sentences to describe which dimension is most important or relevant to you in your life right now, and explain why.

Allow students to focus and work quietly for a minute or two. Call on student volunteers to share what they wrote.

Motivate

One important part of the physical dimension of sexual health is a person's reproductive system. What does it mean to reproduce?

Allow students to respond to the question and discuss their ideas.

Human reproduction is the physical process of producing children. You probably already know things about the female and male reproductive organs and how they work. You'll have a chance to test your knowledge today.

Teaching Steps

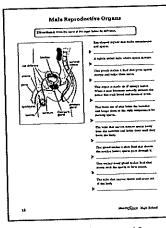
Review the male reproductive system

Complete & Share

Direct students to turn to Male Reproductive Organs on page 18 of the Student Workbook.

You're going to work alone for a minute or two to see what you remember about the male reproductive system. Look at the picture and read the definitions, then name as many organs as you can.

Allow students 1–2 minutes to complete as much of the activity sheet as they can.



Workbook page 18

Have students mark their answers in pencil, so they can change any incorrect responses during the discussion.

Now find a partner and compare your answers. Help each other complete as many answers as you can.

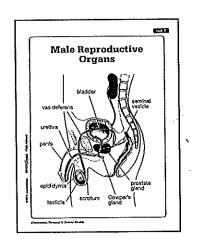
Pair students or allow them to select partners, and give them time to confer on their answers. Tell them they can correct any wrong answers as the class reviews the parts of the male reproductive system.

Prepare

Show the Male Reproductive Organs slide.

Explain

Review each organ and its functions, asking students to share what they know. Correct any misinformation, as needed, using the notes below to guide the discussion. Tell students they can correct their answers on the activity sheet, as needed.



Slide 7

The male reproductive system includes the penis, testicles, scrotum, epididymis, vas deferens, prostate gland, seminal vesicles, urethra and Cowper's glands.

- The penis is made up of spongy tissue. Most of the time it's soft and limp. But when a man becomes sexually excited, the tissue of the penis fills with blood and it becomes larger and firmer. This is called an *erection*. It happens before sexual intercourse. It can happen when a man has feelings of sexual attraction or thoughts about sex. It can happen when a man feels excited or nervous, or for no reason at all. It can also happen during sleep.
- The 2 testicles are about the size and shape of small plums. They make the hormone testosterone and produce sperm, the microscopic male reproductive cells. Every day, a healthy male produces several hundred million sperm. The testicles make sperm best at a few degrees cooler than normal body temperature. This is why they hang outside the body in the scrotum.
- The *scrotum* is a loose sac of skin that hangs behind the penis. It holds the testicles. If the testicles get cold, the scrotum hugs the body to warm them up to the best temperature for making sperm. If the testicles get too warm, the scrotum hangs low to cool them down.

- The *epididymis* is a tightly coiled tube that curves over the top of each testicle. After sperm are made they move into the epididymis for up to 6 weeks. There they mature and develop the ability to swim.
- The vas deferens is the tube that leads out of the epididymis. There are 2 of them, one from each testicle. Each vas is about 17 inches long. Mature sperm move from the epididymis into the vas deferens, where they are stored until they leave the body. Unused sperm break down and get absorbed by the body.
- The prostate gland is about the size and shape of a walnut. The
 prostate makes a thin, milky fluid that helps the sperm move. The
 prostate grows larger at puberty.
- The seminal vesicles are pouches that connect to each vas deferens before it reaches the prostate gland. They make a sticky yellow liquid called seminal fluid that gives sperm energy and helps them move. Together, the fluid from the seminal vesicles and prostate gland make semen—the milky white liquid containing sperm that leaves the penis when a man ejaculates. Ejaculation is when the muscles of the reproductive organs contract and push the semen out of the man's body.
- The *urethra* is a tube that starts at the *bladder* and runs through the penis to its end. It carries both urine and semen out of the body, but never at the same time. When a man is sexually excited, a valve closes off the bladder, so urine can't pass through the urethra.
- The Cowper's glands are 2 small glands along the urethra. They make a clear fluid that passes through the urethra before a man ejaculates to flush out any traces of urine. This fluid is called *pre-ejaculate*. Sometimes this fluid can contain sperm that have been left in the urethra from earlier ejaculations.

Review the female reproductive system

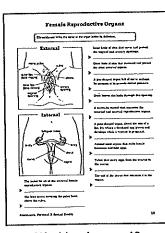
Complete & Share

Directs students to turn to Female

Reproductive Organs on page 19 of the

Student Workbook.

Now you're going to work alone for a minute or two to see what you remember about the



Workbook page 19

female reproductive system. Look at the picture and read the definitions, then name as many organs as you can.

Allow students 1–2 minutes to complete as much of the activity sheet as they can. Have students mark their answers in pencil, so they can change any incorrect responses during the discussion.

Now find a different partner and compare your answers. Help each other complete as many answers as you can.

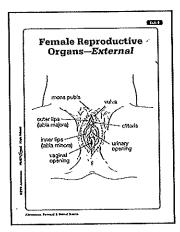
Pair students or allow them to select partners and give them time to confer on their answers. Tell them they can correct any wrong answers as the class reviews the parts of the female reproductive system.

Prepare

Show the Female Reproductive Organs— External slide.

Explain

Review each organ and its functions, asking students to share what they know. Correct any misinformation, as needed, using the notes below to guide the discussion. Tell students they can correct their answers on the activity sheet, as needed.



Slide 8

The external female reproductive organs are the labia majora, labia minora, clitoris, urinary opening, and vaginal opening. Together with the mons pubis they are called the vulva.

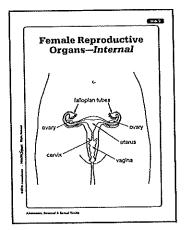
- The *mons pubis* is the area where fat under the skin covers the pubic bone. Hair grows in this area during puberty.
- The *labia majora* (outer lips) and *labia minora* (inner lips) are folds of skin that surround and protect the clitoris, vaginal opening, and urinary opening.
- The *clitoris* is about the size of a pea and is full of sensitive nerve endings. Its purpose is to provide sexual pleasure.
- Below or behind the clitoris is the *urinary opening*. This is where urine leaves the body.
- Below or behind the urinary opening is the *vaginal opening*. This is where menstrual fluid leaves the body, where a man's penis enters the woman's body during vaginal sexual intercourse and where a baby comes out during childbirth.

Prepare

Show the Female Reproductive Organs— Internal slide.

Explain

Review each organ and its functions, asking students to share what they know. Correct any misinformation, as needed, using the notes below to guide the discussion. Tell students they can correct their answers on the activity sheet, a needed.



Slide 9

The internal female reproductive organs include the vagina, uterus, ovaries, fallopian tubes and cervix.

- The vagina is a muscular tunnel about 4 inches long that goes from the vaginal opening to the opening of the uterus. It provides a way for menstrual fluid to leave the body, and receives a man's penis during sexual intercourse. It is also the passage though which a baby is born, so it's sometimes called the birth canal.
- The uterus is a pear-shaped organ, about the size of a fist. It is one of the strongest muscles in the body because it has to be able to push a baby out during childbirth. It's where a fertilized egg grows and develops into a baby when a woman is pregnant. After a girl reaches puberty, the uterus builds up a thick lining of blood and tissue approximately once a month, to support the growth of a fertilized egg. When the egg isn't fertilized this lining isn't needed, so it flows out of the body through the vagina. This is called menstruation or having a period.
- The *ovaries* are almond-shaped organs that make female hormones and hold the female's eggs. When a girl is born, her ovaries contain more than 300,000 unripe egg cells. After puberty, about once a month, an egg ripens in one of the ovaries and is released into the fallopian tube.
- The *fallopian tubes* come out of each side of the uterus. An egg travels from an ovary though a fallopian tube to get to the uterus. Fertilization happens when a male sperm enters the female egg while it is in the fallopian tube.
- The *cervix* is the end of the uterus that opens into the vagina. During pregnancy, it stays tightly closed to help protect the developing fetus.

Review how the menstrual cycle works

Explain

One of the signs that a girl has reached puberty is that she begins to menstruate, or have periods. The menstrual cycle is called a cycle because it happens over and over. It is one way a girl's body becomes physically ready to reproduce.

Ask student volunteers to explain how the menstrual cycle works. Use the slides of the reproductive organs and the notes below, if needed, to reinforce and illustrate the following information.

When a girl's body is going through puberty, about once a month, an egg begins to ripen in one of her ovaries. While this is happening, her uterus begins building up a lining of blood and tissue that could support a fertilized egg. The time this takes can vary from woman to woman.

When the egg is mature or ripe it is released from the ovary into the fallopian tube. This is called *ovulation*. Ovulation happens 13 to 15 days before a woman's next period.

The egg then travels down the fallopian tube to the uterus. It usually takes 3 to 4 days for the egg to reach the uterus. When the egg is in the fallopian tube, it can be fertilized by a male's sperm. If the egg has been fertilized, it attaches to the lining of the uterus and begins to grow. This is the start of a pregnancy. If the egg hasn't been fertilized, the uterus will begin to shed its lining in another 10 days or so. The blood and tissue leave the uterus and flow out the vagina, and the woman has her period.

Allow students to ask questions, and clarify information, as needed.

Review how pregnancy occurs

Explain

Once people reach puberty, anywhere from age 8 to 14, they're physically able to reproduce. Girls can get pregnant, and boys can fertilize an egg. But usually young people are not prepared to raise and support a child until many years after puberty. Unintended pregnancies can create physical, social, emotional and financial hardships for teens and their families. When you know how pregnancy happens, you're better able to protect your reproductive health.

Ask student volunteers to explain how pregnancy occurs. Use the slides of the reproductive organs and the notes below, if needed, to reinforce and illustrate the following information.

When a man and a woman have sexual intercourse and the man ejaculates, semen containing millions of sperm leaves the penis. The sperm travel through the woman's reproductive system. They swim up through the vagina and through the uterus, and some of them reach the fallopian tubes. Sperm can live inside a woman's reproductive system for up to 5 days. If a woman ovulates or has ovulated recently and there is a ripe egg in one of the tubes, a sperm may enter the egg. When the sperm and egg combine, it's called *fertilization*.

Once an egg has been fertilized, changes happen quickly. The egg begins to divide and form new cells even on its way to the uterus. When the fertilized egg reaches the uterus and attaches itself to the lining, the woman becomes pregnant. For the first 8 weeks of pregnancy, the new organism is called an *embryo*. After that it is called a *fetus*. The fetus continues to grow and develop for the next 9 months, until it is ready to be born.

Allow students to ask questions, and clarify information, as needed.

Ask & Discuss

How is the menstrual cycle related to becoming pregnant?

Allow students to respond to the question and discuss their ideas.

Summarize

When a woman ovulates, a ripe egg is released from an ovary into the fallopian tube. The phase of the menstrual cycle when a ripe egg is traveling toward the uterus in the fallopian tube is when fertilization can occur. If a woman has sex with a man and one of his sperm enters the ripe egg, the egg is fertilized and ready to implant in the lining of the uterus. The woman becomes pregnant once the fertilized egg has attached itself to the lining of her uterus and begins to grow and develop. A woman's menstrual periods stop during pregnancy.

Ask & Discuss

Can a woman predict when she can get pregnant?

Allow students to respond to the question and discuss their ideas.

Summarize

Menstrual cycles aren't always the same number of days. So it can be hard to predict when a ripe egg will be in the fallopian tube. This is particularly true for teen girls because their bodies are still maturing and some girls' periods can be irregular at first. Also, remember that sperm can live inside the female reproductive system for days. So it could be possible for a woman to ovulate after having sex and for the egg to be fertilized.

Although it's important to understand how pregnancy occurs, it's not a healthy or a wise choice for teens to become pregnant or get someone pregnant. A pregnancy isn't just a physical thing. It can have far-reaching emotional, intellectual and social consequences for teens as well.

Assessment & Closure

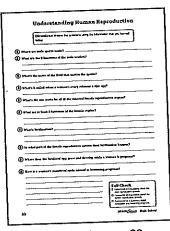
Students demonstrate learning

Complete

Direct student to turn to Understanding Human Reproduction on page 20 of the Student Workbook.

Think about what you learned today as you complete this activity sheet.

Allow time for students to complete the activity sheet.



Workbook page 20

End the lesson

Close

This class is one place you can get accurate information about sex and sexuality. There's a lot to know. So you still may have questions about the reproductive system, pregnancy or other things. You'll have a chance to get some of these questions answered over the next few classes. You can ask your questions anonymously. This means you don't have to put your name on the question and nobody will know who asked what. Remember that no question is a dumb question. Other people in the class may be wondering about the same things you are.

Distribute an index card to each student, and encourage them to write at least 1 question about sex or sexuality that they would like to have answered. Tell students that if they don't have a question they can write "I don't have a question" on the card.

Allow time for students to write their questions, and then collect the cards. Over the next few classes, review the questions and take time to answer those that relate to each lesson. See the **Tips on Answering Questions About Sexuality** teacher page on page 101 for suggestions.

Be sure to follow school and district policies when answering questions.

Assess

Collect students' Understanding Human Reproduction activity sheets, and evaluate their work for this lesson.

Assessment Evidence
Objective 1 Students identified the organs of the male and female reproductive systems by: Completing the Understanding Human Reproduction activity sheet.
Objective 2 Students described the functions of the male and female reproductive systems by: Completing the Understanding Human Reproduction activity sheet.
Objective 3 Students summarized the relationship between the menstrual cycle and becoming pregnant by: Completing the Understanding Human Reproduction activity sheet.
(Scoring Rubric, page 257)

Tips on Answering Questions About Sexuality

Answering questions about sexuality is a challenge. Questions may cover an astonishingly wide range of topics, be personal, veer toward subjects that are difficult to discuss because of school policy (such as restrictions around discussing birth control or condom use), and/or put a teacher in the uncomfortable role of having to say, "I don't know." Yet answering student questions also allows teachers to demonstrate many of the skills and values discussed in the activities, such as getting accurate information and having open, comfortable discussions.

The following guidelines can help teachers offer clear, relevant answers to students' questions about sexuality:

- Welcome the question. Let students know that you are interested in their questions as well as their thoughts and experiences. Demonstrate openness and acceptance with not only your words but also your tone and facial expressions.
- Provide a prevention message. Help students assess risks and consequences. Emphasize how they can get support from family and friends or information from trusted sources.
- Focus on positive behaviors and norms. Whenever possible, emphasize positive norms and responsible behaviors (instead of dwelling on failures and terrible consequences).
- Respect your students. Their questions are serious and it takes courage
 to ask them. Be aware that a question about a "friend's" predicament may
 well be about the student who asked the question; respond accordingly.
- **Discuss skills.** Most questions offer opportunities to make suggestions about choices and skills that students can practice. For example, explain how goal-setting, decision-making or communication skills can help students protect their sexual health.
- Keep the discussion interactive. Other students may have ideas about how to respond to pressure, where to go for accurate information, and so on. Give them opportunities to share their beliefs and knowledge.
- **Take school policies into account.** Even if school policies prohibit frank discussions on certain topics, every question is an opportunity to praise a student for asking and refer him or her to accurate, trusted sources of information outside of class (such as parents or a doctor).

Teacher Page

Understanding Human Reproduction *Key*

Directions: Answer the questions using the information that you learned today.

1	Where are male sperm made?Testicles					
(2)	What are the 2 functions of the male urethra?					
	To carry urine out of the body; to carry sperm out of the	e body				
		ŧ				
3	What's the name of the fluid that carries the sperm? Semen					
4	What's it called when a woman's ovary releases a ripe egg? Ovulation					
5	What's the one name for all of the external female reproduc Vulva	ctive organs?				
6	What are at least 2 functions of the female vagina? Way that menstrual fluid leaves the body; receives the	male penis durina sexual				
	intercourse; passage through which a baby is born					
7	What's fertilization? When a sperm enters a ripe egg a egg combine	nd the sperm and				
8	In what part of the female reproductive system does fertili Fallopian tube	zation happen?				
9	Where does the fertilized egg grow and develop while a w	oman is pregnant?				
10	How is a woman's menstrual cycle related to becoming pregnant? When the woman ovulates, a ripe egg is released from an ovary into the fallopian tube.					
	The phase of the menstrual cycle when a ripe egg is					
	traveling toward the uterus in the fallopian tube is when	Self-Check				
	fertilization can occur. If a woman has sex with a man	☐ I answered all 3 questions about the male reproductive system.				
	and one of his sperm enters the ripe egg, the egg is	☐ I answered all 3 questions about the female reproductive system.				
	fertilized. A woman is pregnant once the fertilized egg	☐ I answered all 4 questions about fertilization and becoming pregnant.				
	attaches itself to the lining of the uterus and begins					

to grow and develop.

Student Journal

Lesson 7: Review of the Reproductive Systems

Health terms

birth canal bladder cervix clitoris Cowper's glands ejaculation embryo epididymis erection estrogen fallopian tubes fertile fertilization fetus labia majora labia minora menstruation mons pubis ovaries ovulation penis pre-ejaculate fluid pregnancy progesterone prostate gland

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Student Journal

Lesson 7: Review of the Reproductive Systems

(continued)

(continued)

Health terms

(continued) reproductive scrotum semen seminal fluid seminal vesicles sperm testicles testosterone urinary opening urethra uterus vagina vaginal opening vas deferens vulva

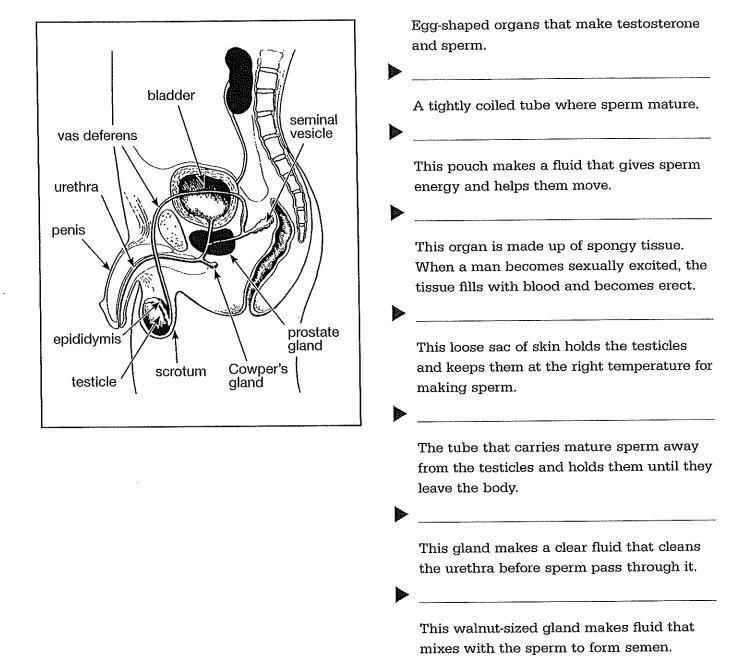
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Male Reproductive Organs bladder seminal vesicle vas deferens urethra penis prostate gland epididymis Cowper's gland scrotum testicle

Female Reproductive Organs—External mons pubis vulva outer lips (labia majora) clitoris inner lips urinary (labia minora) opening vaginal opening

Male Reproductive Organs

Directions: Write the name of the organ below its definition.

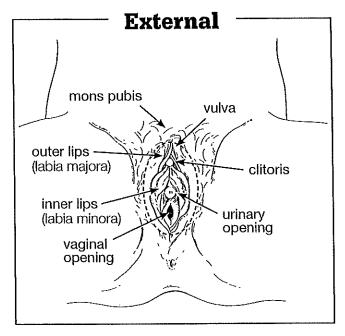


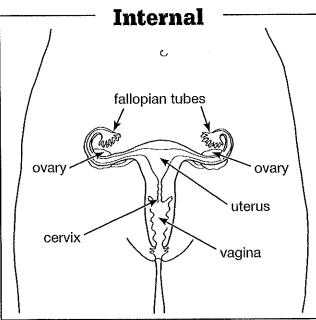
The tube that carries sperm and urine out

of the body.

Female Reproductive Organs

Directions: Write the name of the organ below its definition.





The name for all of the external female reproductive organs.

The fatty tissue covering the pubic bone, above the vulva.

Inner folds of skin that cover and protect the vaginal and urinary openings.

Outer folds of skin that surround and protect the other external organs.

A pea-shaped organ full of nerve endings. Its purpose is to provide sexual pleasure.

Urine leaves the body through this opening.

A muscular tunnel that connects the external and internal reproductive organs.

A pear-shaped organ, about the size of a fist. It's where a fertilized egg grows and develops while a woman is pregnant.

Almond-sized organs that make female hormones and hold eggs.

Tubes that carry eggs from the ovaries to the uterus.

The end of the uterus that connects it to the vagina.

Understanding Human Reproduction

Directions: Answer the questions using the information that you learned today.

(1)	Where are male sperm made?
2	What are the 2 functions of the male urethra?
3	What's the name of the fluid that carries the sperm?
4	What's it called when a woman's ovary releases a ripe egg?
5	What's the one name for all of the external female reproductive organs?
6	What are at least 2 functions of the female vagina?
7	What's fertilization?
8	In what part of the female reproductive system does fertilization happen?
9	Where does the fertilized egg grow and develop while a woman is pregnant?
How is a woman's menstrual cycle related to becoming pregnant?	
	Self-Check
	☐ I answered all 3 questions about the male reproductive system. ☐ I answered all 3 questions about the female reproductive system. ☐ I answered all 4 questions about fertilization and becoming pregnant.

Lesson 8 Taking Care of Your Sexual Health

Overview

In this lesson students read about taking care of sexual health and discuss what they have read. They learn about male self-exams and breast self-exams. They brainstorm reliable sources of information about sexuality. They assess various sexual health situations and then create a sexual health action plan for themselves.

Time: 60-90 minutes

Note: If time is limited, the assessment activity sheet may be completed as homework.

Lesson Objectives

Students will be able to:

- **1.** Explain the importance of vaccines, checkups and examinations to maintain sexual and reproductive health.
- **2.** Summarize the importance of talking with parents and other trusted adults about issues related to sexual health.
- **3.** Identify reliable resources for accurate information about sexual health.
- 4. Analyze the role of individual responsibility for sexual health.

National Health Education Standards

Standard 1: Comprehending Concepts

Performance Indicator 1.12.1: Predict how healthy behaviors can affect health status.

Performance Indicator
1.12.6: Analyze the
relationship between access
to health care and health
status.

Standard 3: Accessing Resources

Performance Indicator 3.12.1: Evaluate the validity of health information, products and services.

Performance Indicator 3.12.4: Determine when professional health services may be required.

Standard 7:
Practicing HealthEnhancing Behaviors
Performance Indicator
7.12.1: Analyze the role of individual responsibility for enhancing health.

Materials & Preparation

Prepare

- Review the anonymous questions and prepare to answer any that relate to sexual health that aren't covered in the teaching steps for this lesson.
- · Have blank index cards for each student.
- Optional: Make slides or transparencies of the Breast Self-Exam and Male Self-Exam masters to show to students.
- Optional: Arrange to show a video about self-exam.

Copy

- Breast Self-Exam (Master 6) (optional) and Time to Talk: Your
 Daughter's Sexual Health (Master 9), for each female student.
- Male Self-Exam (Master 7) (optional) and Time to Talk: Your Son's Sexual Health (Master 10), for each male student.
- **Sexual Health Situations** (Masters 8A–D), one for each pair or group of 3 students.

Review

- Taking Care of Your Sexual Health (Student Workbook pages 21-26).
- Keys to Sexual Health (Student Workbook pages 27-28).
- Spreading the Word About Sexual Health (*Student Workbook* page 29), and Scoring Rubric, page 258.

Health Terms

Review the teaching steps, masters and activity sheets for any terms or concepts your students may not know, and be prepared to explain them. Examples:

- amenorrhea
- circumcision
- discharge
- douche
- erection
- foreskin
- genitals
- HPV (human papillomavirus)
- · over the counter
- Pap test
- pelvic exam

- PMDD (premenstrual dysphoric disorder)
- PMS (premenstrual syndrome)
- prostatitis
- self-exam
- speculum
- STD (sexually transmitted disease)
- · testicular cancer
- testicular torsion
- vaginitis

Support for Diverse Learners

To ensure student success with comprehending concepts:

- Pre-teach new concepts and terms related to health screenings, checkups and examinations, and vaccines. Write new terms on the board. Frequently use verbal checks for understanding.
- Make a slide or transparency of the Breast Self-Exam and Male Self-Exam masters to review with students. Highlight key points to help students recall the steps of self-exam.
- Review the Time to Talk family sheets separately with male and female students, so they understand what they are taking home to family members to discuss. Have students practice communicating with family members using the masters.

To challenge accelerated students:

• Have students research and obtain brochures describing breast selfexam and male self-exam from community resources (e.g., American Cancer Society, local hospital, clinic), then create their own brochures or pamphlets (or posters), specific to teens. The documents should demonstrate and describe the steps of self-exam, and identify local resources for assistance or learning more. Copy and make them available to other students at the school.

Introduction

Get students ready for learning

Transition

On a piece of paper, write a few sentences about how you think teens can take care of their bodies to maintain and promote their sexual health.

Allow students to focus and work quietly for a minute or two.

Motivate

How people take care of their bodies in relation to their sexuality is an important part of sexual health. It includes taking care of your reproductive system so that you stay healthy and will be able to have children one day, if you choose. It also includes protecting your body from diseases and other health problems connected with sex and the reproductive organs.

What are some sexual health problems you may have heard about?

Allow time for students to share their responses, and make a list on the board. Examples may include:

- Breast cancer, testicular cancer, or other cancers of the reproductive organs
- Trouble getting an erection
- Sexually transmitted diseases
- Cramps or other menstrual symptoms
- Complications during pregnancy
- Getting hit or struck or other injuries to the reproductive organs

Explain that they'll learn about some of these sexual health problems in class. As the lesson continues, relate the information to the concerns students listed.

(Note: If students share some sexual health problems that are easily covered when discussing the **Taking Care of Your Sexual Health** reading sheet, write these down and be sure to discuss them after the group reading or at the beginning of the next class.)

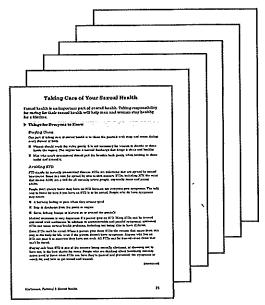
Teaching Steps

Students read about taking care of sexual health

Read & Share

Put students into small groups of 3, and direct them to turn to Taking Care of Your Sexual Health on page 21 of the Student Workbook.

Each person in your group will read about and take notes on one part of this reading sheet about taking care of your sexual health. Decide which person in your group will study each section: Things for Everyone to Know, Things for Men to Know, and Things for Women to Know. After each of you has finished the assigned reading, share the key points of what you



Workbook pages 21-26

learned with the other members of your group. You can use the note-taking sections to write down key points about the sections you didn't personally study.

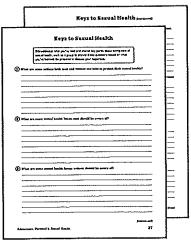
Have students work in their groups to read their assigned information and share key points with each other.

Complete

Direct students to turn to **Keys to Sexual Health** on page 27 of the Student Workbook.

Now that you've read and shared key points about taking care of sexual health, work as a group to answer these questions. Be prepared to discuss your responses.

Allow time for groups to complete the activity sheet.



Workbook pages 27-28

Review

Ask students the following questions from the activity sheet to review their work and ensure that all important points have been covered.

- What are some actions both men and women can take to protect their sexual health?
- What are some sexual health issues men should be aware of?
- What are some sexual health issues women should be aware of?
- How can seeing a doctor or other health care provider for regular checkups help a person stay healthy?
- Why is it important to see a doctor or other health care provider if you're having symptoms of STD or another infection?
- When should a man see a health care provider?
- · When should a woman see a health care provider?

■ Teach procedures for self-exam

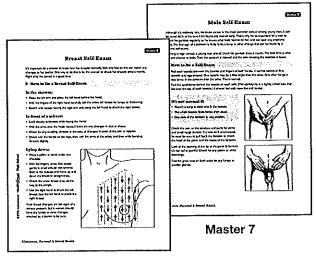
(Note: Self-exam is particularly important for teen boys, because testicular cancer is the most common cancer among young men.)

Explain

One of the important things young men and women can do to protect their sexual health is to learn to do a *self-exam*. This is a way to check your own genitals or breasts to find any potential problems or concerns early. Knowing what's normal for your own body will help you notice any changes that should be examined by a health care provider.

Read

Distribute a copy of Male Self-Exam to each of the male students, and a copy of Breast Self-Exam to each of the female students, and allow time for students to review the material.



Master 6

Demonstrate

Optional: Show slides or transparencies of the Breast Self-Exam and Male Self-Exam masters and briefly discuss to help clarify the procedures for students. Or show students a video that illustrates how to do self-exam.

Community Connection

Arrange for a demonstration of self-exams to same-sex groups by the school nurse, clinician or other health care provider.

Discuss reliable sources of information

Ask & Discuss

Where do you think most young people get their information about sexual health?

Allow students to respond to the question and discuss their ideas.

Summarize

Teens might talk to a doctor or other health care provider or take a health class. They might hear things from parents, friends, brothers and sisters, or other family members. Some teens read about sexuality in books or articles in popular magazines. Many teens search the Internet for answers to questions or information about concerns they might have. Teens might also see things that relate to sexual health when watching movies or TV shows.

Explain

There's a lot of information out there that relates to sex and sexual health. Some of it is true, and some of it isn't. Because you may hear myths and misinformation, it's very important to identify reliable resources where you can get valid and accurate information based on facts.

Review

What were some of the questions you learned to ask that will help you evaluate a health website when you're searching for information about personal health?

Allow students to share what they remember. Use the How to Evaluate a Health Website slide to review the criteria, as needed.



Slide 5

It's just as important to find reliable and valid websites when you're looking for information on sexual health. In fact, this is an area in which you often have to be extra cautious. Potential dangers of looking up sexual health information on the Internet include:

- Getting inaccurate information that could hurt your sexual health
- · Winding up on a pornography website
- Finding websites that want to sell you something
- Being linked to websites you didn't plan to see that may try to access your personal information or put you on a "spam" list

Look for information on sexual health at websites sponsored by government agencies or medical or health-related organizations to find out what you want to know without risking some of these problems.

Create & Share

Put students into small groups of 3 or 4.

Can you think of other people and places, besides the Internet, where teens could get information about sexual health? Work in your group to brainstorm as many other resources as you can think of.

Allow time for students to brainstorm in their groups.

Once you have your list, discuss whether or not these are reliable resources that will provide valid and accurate information based on facts. Put a star by the ones your group thinks meet the criteria for being a reliable and valid resource.

Allow time for groups to review and evaluate the resources on their lists. Then ask groups to share their ideas. Create a master list of reliable resources on the board, discussing as needed. If students list family members or friends as reliable resources, leave them on the list for now, but revisit in the later discussion.

Summarize

Some good sources of accurate information about sexual health may include:

- · Doctors and other health care providers
- School nurse
- Library

- · Community clinics or other health agencies
- · Health teachers
- · Magazine articles in recognized medical journals
- Televised medical programs

Ask & Discuss

What about friends? Do you think they are reliable sources of information about sexual health? Why or why not?

What about things you might read in popular magazines, either in print or online? Are these reliable sources of information about sexual health? Why or why not?

Allow students to respond to the questions and discuss their ideas.

Summarize

Things you hear from friends or read in magazines or online may or may not be accurate. It's always best to check out this information with a reliable source, such as a health care provider, health teacher or government, medical or national health agency website.

Ask & Discuss

What about parents and other adult family members? Do you think they are reliable sources of information about sexual health? Why or why not?

Why is it important to be able to talk to your parents or other trusted adults about your sexual health concerns?

Allow students to respond to the questions and discuss their ideas.

Summarize

Some parents may know a lot about sexual health. Others may not be as well informed. But regardless of how accurate their information is, your parents, guardians and other trusted adults who care about you want you to stay healthy. Even if they don't know the answers to your questions or concerns, they can help you find accurate information or help you reach a health care provider to get medical help if you need it.

Discuss taking individual responsibility for sexual health

Ask & Discuss

Whose job is it to protect your sexual health?

What are some ways you can take responsibility for your own sexual health?

Allow students to respond to the questions and discuss their ideas.

Summarize

Each person needs to take individual responsibility for protecting his or her own sexual health. You can't assume that someone else will take care of you. You're in the best position to know your own body and recognize when something could be a problem.

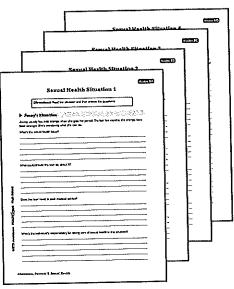
Getting regular health checkups, doing self-exams, and seeking medical attention when you have symptoms or notice changes in how your body looks, feels or works are things every young person can do to take responsibility for his or her own sexual health.

Students practice assessing sexual health situations

Read & Complete

Put students into pairs or groups of 3. Distribute a Sexual Health Situation activity sheet to each pair or small group. Instruct students to read the situation and answer the following questions about it:

- What's the sexual health issue?
- What could/should the teen do about it?
- Why might it be important for this teen to talk to a parent or other trusted adult about this situation?
- Does this teen need to seek medical advice?



Masters 8A-D

· What's the individual's responsibility for taking care of sexual health in this situation?

Allow time for students to complete the activity sheet.

Review

Review each of the situations, asking the pairs or groups with that situation to respond to the questions, using the notes below to guide the discussion.

Situation 1:

Jenny usually has mild cramps when she gets her period. The last few months, the cramps have been stronger. She's wondering what she can do.

Issue:

Cramps/painful periods.

What to do:

Exercise, get enough rest and eat healthy. Try a heating pad or take an over-the-counter pain reliever.

Talk to adult:

Jenny could get support from her mom or an older sister. They might have had cramps too and know some good ways to help relieve them. A parent can also help her make an appointment with a health care provider if the cramps continue to get worse.

Medical advice:

If the cramps continue to get worse each period, or begin to interfere with Jenny's daily life, she might want to ask her doctor about them.

Responsibility:

Jenny can take positive steps to handle the cramps on her own. She may want to tell a parent or other trusted adult about them. She also needs to think about whether she needs professional help and be willing to ask for it if the cramps get worse or

continue to cause problems.

Situation 2:

Tyrone just happened to feel a lump in his testicle while he was in the shower. It didn't hurt, so he decided not to worry about it.

Issue:

Lump in testicle.

What to do:

Self-exam to notice any other changes.

Lesson 8 • Taking Care of Your Sexual Health

Talk to adult: A parent or other adult could help Tyrone make an

appointment with a health care provider to get the

lump checked out.

Medical advice: Tyrone should have the lump checked out by his

doctor.

Responsibility: Tyrone is not being responsible by ignoring the

lump. He should get more information to help him realize that the lump could be potentially serious and should be checked out by a health care provider. He can also learn how to do self-exam to help him notice any changes in his body that might need

medical attention.

Situation 3:

Serena has been feeling tired lately, so she looked online to see what might be causing it. There was a website that said it could be a sign of lots of different diseases. The website was selling vitamin supplements that it said would give you lots of energy. Serena is thinking about ordering some.

Issue: Feeling tired, getting potentially inaccurate

information.

What to do: Serena should seek out a reliable source to find out

more about the symptom. She could talk to her parents or the school nurse or look on a reliable government or health website for suggestions about

how to relieve the tiredness.

Talk to adult: Serena's parents could help her find reliable

resources. They could also help remind her to get

enough rest and take care of herself.

Medical advice: If the symptom persists and starts to interfere with

daily life, Serena should talk to a doctor or other

health care provider about it.

Responsibility: Serena needs to educate herself about how to find

reliable information online, and then she can seek out some better sources of information. She also needs to be willing to get help from a trusted adult or medical professional if the tiredness starts causing

problems in her life.

Situation 4:

Noah has started having pain when he urinates. He knows this can be a symptom of STD, but he's never had sex with anyone. He's embarrassed to discuss this with anyone, but he also feels worried and confused.

Issue:

Pain when urinating.

What to do:

Noah could have prostatitis or some other infection.

Talk to adult:

Talking to a parent or other trusted adult could help Noah be less worried and feel supported. An adult could help him make an appointment with a health care provider to get checked out.

Telling an adult will give Noah practice in talking to

a health care provider.

Medical advice:

Noah should go see a doctor.

Responsibility:

Noah would take responsibility for his sexual health by getting the symptom checked out by a health care provider. He needs to overcome his embarrassment and talk to a parent or other trusted adult who can help him get the help he needs, or go to a clinic or

doctor's office on his own.

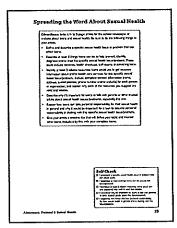
Assessment & Closure

Students demonstrate learning

Complete

Direct students to turn to Spreading the Word About Sexual Health on page 29 of the Student Workbook.

Think about everything you learned today about taking care of your sexual health. Then write a 1- to 2-page article for the school newspaper or website about a specific sexual health issue or problem that can affect teens. Be sure your article does all the things listed in the directions on the activity sheet.



Workbook page 29

Review criteria for the article, then allow time for students to complete the activity sheet.

End the lesson

Send Home

Distribute a Time to Talk: Your Daughter's/ Son's Sexual Health family sheet to each student.

You'll take this sheet home and talk to a parent or older family member about sexual health. You'll have a chance to talk about the experience at the beginning of the next class.

Review

Allow time at the end of class to read and answer students' anonymous questions related to sexual health. Use the questions as a way to review key concepts taught in the lesson, and provide answers for any relevant questions that weren't covered.

Close

Your sexual health is an important part of your overall health. Taking care of your sexual health can lead to a lifetime of healthy habits.

Name one thing you'll do as a result of learning more about protecting your sexual health.

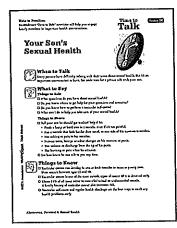
Call on students to share one action step they do or intend to do around protecting sexual health.

Assess

Collect students' **Spreading the Word About Sexual Health** activity sheets, and their completed articles, and evaluate their work for this lesson.



Master 9



Master 10

Assessment Evidence
Objective 1
Students explained the importance of vaccines, checkups and examinations to maintain sexual and reproductive health by:
☐ Completing the Spreading the Word About Sexual Health activity sheet.
Objective 2
Students summarized the importance of talking with parents and other trusted adults about issues related to sexual health by: Completing the Spreading the Word About Sexual Health activity sheet.
Objective 3
Students identified reliable resources for accurate information about sexual health by:
□ Completing the Spreading the Word About Sexual Health activity sheet.
Objective 4
Students analyzed the role of individual responsibility for sexual health
by: Completing the Spreading the Word About Sexual Health activity sheet.
(Scoring Rubric, page 258)

Student Journal

Lesson 8: Taking Care of Your Sexual Health

Health terms

amenorrhea

circumcision

discharge

douche

erection

foreskin

genitals

HPV (human papillomavirus)

over the counter

Pap test

pelvic exam

PMDD (premenstrual dysphoric disorder)

PMS

(premenstrual syndrome)

prostatitis

self-exam

speculum

STD (sexually transmitted disease)

testicular cancer

testicular torsion

vaginitis

Journal	entry	
Write a few	sentences about how you think teens can take care of their	
	aintain and promote their sexual health	
	AND	
	A Landson Company of the Company of	
01 15		
Class di	scussion notes	
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Class di	scussion notes	

Student Journal

Lesson 8: Taking Care of Your Sexual Health

(continued) Class discussion notes (continued)

Breast Self-Exam

It's important for a woman to know how her breasts normally look and feel so she can report any changes to her doctor. One way to do this is for the woman to check her breasts once a month. Right after her period is a good time.

How to Do a Breast Self-Exam

In the shower:

- Raise the left arm and place the left hand behind the head.
- · With the fingers of the right hand carefully feel the entire left breast for lumps or thickening.
- Switch and repeat, raising the right arm and using the left hand to check the right breast.

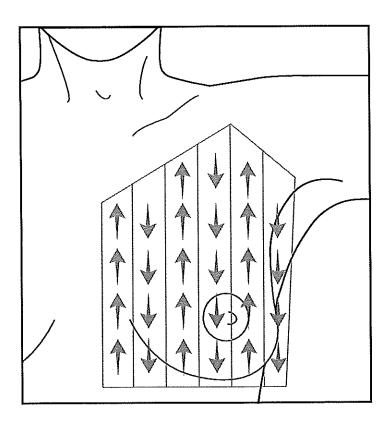
In front of a mirror:

- · Look closely at breasts while facing the mirror.
- · With the arms over the head, notice if there are any changes in size or shape.
- · Check for any swelling, dimples in the skin, or changes in color of the skin or nipples.
- Check with the hands on the hips, then with the arms at the sides, and then while bending forward slightly.

Lying down:

- Place a pillow or towel under one shoulder.
- With flat fingers, press that breast gently in small circular movements.
 Start at the outside and move up and down the breast in straight lines.
- Check the entire breast area, all the way to the armpit.
- Use the right hand to check the left breast. Use the left hand to check the right breast.

Most breast changes are not signs of a serious problem, but a woman should have any lumps or other changes checked by a doctor to be sure.



Male Self-Exam

Although it's relatively rare, testicular cancer is the most common cancer among young men. It can be cured 90% of the time if it's found and treated early. That's why it's so important for a man to check his genitals regularly so he knows what feels normal for him and can spot any problems early. The first sign of a problem is likely to be a lump or other change that can be found by a routine self-exam.

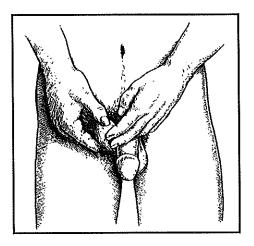
Starting in high school, a young man should check his genitals once a month. The best time is after a warm shower or bath. Then the scrotum is relaxed and the skin covering the testicles is loose.

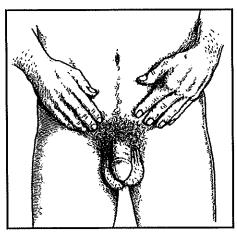
How to Do a Self-Exam

- 1. Roll each testicle between the thumbs and fingers of both hands. A normal testicle is firm, smooth and egg-shaped. One testicle may be a little larger than the other. One often hangs a little lower in the scrotum than the other. This is normal.
- 2. Feel the epididymis behind the testicle on each side. (The epididymis is a tightly coiled tube that lies over the top of each testicle.) It should feel soft, rope-like and tender.

It's not normal if:

- · There's a lump or hard area in the testicle.
- · The whole testicle feels harder than usual.
- · One side of the scrotum is very swollen.
- 3. Check the skin on the scrotum and penis for sores and small rough bumps. If a man isn't circumcised, he must be sure to pull back the foreskin to check the head of the penis and the inside of the foreskin.
- Look at the opening at the tip of the penis to be sure it's not red or painful. Check for any yellow or white discharge.
- **5.** Feel the groin area on both sides for any lumps or swollen glands.







Sexual Health Situation 1

Jenny	y's Situation
	ally has mild cramps when she gets her period. The last few months, the cramps ha ger. She's wondering what she can do.
What's the s	sexual health issue?
What could	/should the teen do about it?
Does this te	een need to seek medical advice?
· · ·	
What's the	individual's responsibility for taking care of sexual health in this situation?

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Sexual Health Situation 2

> T	yrone's Situation
	e just happened to feel a lump in his testicle while he was in the shower. It didn't hurt, so he ed not to worry about it.
What's	s the sexual health issue?
What	could/should the teen do about it?
Does	this teen need to seek medical advice?
	's the individual's responsibility for taking care of sexual health in this situation?



Sexual Health Situation 3

10000011110000000000000000000000000000	
There was a web	n feeling tired lately, so she looked online to see what might be causing it. site that said it could be a sign of lots of different diseases. The website was applements that it said would give you lots of energy. Serena is thinking about
What's the sexua	ıl health issue?
- ANN AN	
What could/shou	ald the teen do about it?
Does this teen n	eed to seek medical advice?
1800-007	
MANAGEM FLOOR	
What's the indivi	idual's responsibility for taking care of sexual health in this situation?

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Sexual Health Situation 4

▶ Noah's Situation	
	e urinates. He knows this can be a symptom of STD, but he's arrassed to discuss this with anyone, but he also feels worried
What's the sexual health issue?	
What could/should the teen do about	it?
Market	
Does this teen need to seek medical a	advice?

What's the individual's responsibility for	or taking care of sexual health in this situation?

Sexual health is an important part of overall health. Taking responsibility for caring for their sexual health will help men and women stay healthy for a lifetime.

► Things for Everyone to Know

Staying Clean

One part of taking care of sexual health is to clean the *genitals* with soap and water during every shower or bath.

- Women should wash the vulva gently. It is not necessary for women to douche or clean inside the vagina. The vagina has a natural discharge that keeps it clean and healthy.
- Men who aren't circumcised should pull the foreskin back gently when bathing to clean under and around it.

Avoiding STD

STD stands for sexually transmitted disease. STDs are infections that are spread by sexual intercourse. Some can also be spread by skin-to-skin contact. STDs, including HIV, the virus that causes AIDS, are a risk for all sexually active people, especially teens and young adults.

People don't always know they have an STD because not everyone gets symptoms. The only way to know for sure if you have an STD is to be tested. People who do have symptoms may notice:

- A burning feeling or pain when they urinate (pee)
- Drip or discharge from the penis or vagina
- Sores, itching, bumps or blisters on or around the genitals

Medical treatment is very important if a person gets an STD. Many STDs can be treated and cured with antibiotics. In addition to uncomfortable and painful symptoms, untreated STDs can cause serious health problems, including not being able to have children.

Some STDs can't be cured. When a person gets these STDs the viruses that cause them can stay in the body for life, even if the person doesn't have symptoms. Anyone who has an STD can pass it to someone they have sex with. All STDs can be treated—even those that can't be cured.

Staying safe from STD is one of the reasons being sexually abstinent, or choosing not to have sex, is the best choice for teens. People who are thinking about becoming sexually active need to know what STDs are, how they're passed and prevented, the symptoms to watch for, and how to get tested and treated.

(continued)

HPV Vaccine

HPV stands for human papillomavirus. It can be passed through sexual activity, which makes it an STD. There are many different types of HPV. Some cause genital warts. Others can cause cell changes in the cervix or other reproductive organs that can lead to cancer.

There is a vaccine that protects against many of the types of HPV that have been linked to genital warts and cancer. The vaccine is given in 3 shots over a 6-month period.

Experts recommend that girls and boys get the vaccine at age 11 or 12. The vaccine can also be given to people ages 13 to 26 who haven't had it yet. The vaccine works best if people get it before they begin to have sex. But it can also help protect someone who has already had sex.

Health Checkups

Seeing a doctor or other health care provider for a health exam is another way young people can protect their sexual health. An annual or regular checkup is a good time to talk about any concerns or questions you may have, as well as get more information about your body and how to keep it healthy.

Get to know your body and what's normal for you so you can notice any changes that should be checked out. Anyone who is experiencing symptoms of an STD or other infection should be sure to go to the doctor to get tested and treated if needed.

Key Points	
	·

(continued)

► Things for Men to Know

Circumcision

In newborn boys, a flap of skin, called the *foreskin*, surrounds the tip of the penis. This flap is sometimes surgically removed in a procedure called *circumcision*. About half of all males around the world are circumcised. The procedure is more common in the U. S. than in many other places. Circumcision is performed for religious or cultural reasons. It has no effect on penis size or function.

Testicular Torsion

If one testicle gets injured, a man may experience a condition called *testicular torsion*. This happens when the testicle twists out of its normal position, which causes a kink in the vas deferens and the blood vessels that run alongside it. (Imagine a straw bent so that liquids can no longer flow through it.) If blood flow is interrupted, the scrotum swells, becoming extremely tender and painful.

If this happens, a man needs to get treated immediately. The condition is not only painful, but can cause permanent damage to the sperm-producing parts of the testicle if it isn't treated.

Erections

When a man becomes sexually aroused, blood fills the spongy tissue in the penis, which causes it to grow larger and firmer. This is called an *erection*. Erections happen when the penis is rubbed during masturbation or sex with a partner. Many men also have erections when they just think about sex. This is normal.

Sometimes riding a bicycle or motorcycle can cause an erection. It's also normal for erections to happen for no apparent reason. Most men have erections at night while sleeping, and it's common for a man to wake up in the morning with an erection.

Most men experience problems with getting or maintaining an erection sometime in their lives. Chances are good this is temporary. It's usually caused by stress, being tired, or feeling anxious or worried.

Prostate Health

Younger men may get an infection or inflammation of the prostate gland called *prostatitis*. Symptoms include an ache or pain behind the testicles or in the lower back, pain when urinating (peeing) and having to urinate more often. Prostatitis can be treated with antibiotics.

Aı	man should see a doctor if
	He finds a lump or hard area in a testicle—even if it isn't painful.
	The whole testicle feels harder than usual.
	His testicles ache or feel painful.
	One side of the scrotum is very swollen.
	He notices sores, bumps or other changes on the skin of the scrotum or penis.
	He has redness or discharge from the tip of the penis.
	He has burning or pain when he urinates.
K	ey Points
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(continued)

▶ Things for Women to Know

Menstruation

For most girls, sometime between ages 9 and 16, periods become a routine part of life. The menstrual flow may be heavy or light. Some women's periods last 2 or 3 days, others last longer. Some women usually know when their periods will start and end, while others' periods may be less regular, especially in the first few years after a girl starts menstruating. It's important for a woman to learn what's normal for her.

Having a period is a normal, healthy process, but once in a while there are problems:

- Painful periods are the most common concern. Symptoms can include cramps, headaches, backaches, nausea or a bloated feeling. Being active (walking, stretching, moving the body), getting plenty of sleep and eating healthy foods can sometimes help. Over-the-counter pain relievers can help with cramps, headaches and other aches. Resting with a heating pad on the abdomen can also help. If cramps or headaches are severe, a doctor can prescribe a stronger medicine.
- Premenstrual syndrome (PMS) includes emotional changes that happen 2 to 10 days before a woman's period begins. It can include feeling tense, irritable, depressed, anxious or angry and having trouble sleeping. There are many possible treatments, including physical activity, diet changes, counseling or medicines. For some women, PMS symptoms are severe enough to interfere with daily life. A severe form of PMS called PMDD (premenstrual dysphoric disorder) may need to be treated by a doctor.
- Amenorrhea is a condition in which a girl or woman stops having periods. This can be caused by illness, stress or too much weight loss due to overexercise or an eating disorder.

Pelvic Exams & Pap Tests

Many women start getting regular *pelvic exams* as teens. The pelvic exam is done by a doctor or other health care provider to check that a woman's reproductive organs are healthy. A pelvic exam may be a bit uncomfortable, but it doesn't hurt.

The exam has several steps:

- The woman lies down and spreads her knees and legs apart so the doctor can examine her external reproductive organs.
- Then the doctor uses a tool called a *speculum* to gently spread the walls of the vagina and examine the cervix.
- Finally, the doctor puts on a sterile glove and uses 1 or 2 fingers to feel the cervix from inside the vagina. She or he gently presses on the woman's belly with the other hand to check the uterus, ovaries and fallopian tubes.

(continued)

A Pap test is a painless screening test done as part of a pelvic exam. The doctor gently removes some cell tissue from the woman's cervix with a brush or cotton swab. Then the cells are examined for cancer or other problems. A woman should start having regular pelvic exams and Pap tests by age 21, or when she begins having sex.

Vaginitis

It's normal for the vagina to have a discharge. But if a woman notices itching, pain, burning or a smelly discharge from her vagina, she may have an inflammation called *vaginitis*. A woman who has any of these symptoms should see a doctor. Vaginitis can be treated with antibiotics. Women can help prevent vaginitis by keeping the vaginal area clean and dry, wearing cotton underwear, and avoiding douching or using strong soap, deodorants or sprays in the vaginal area.

A	woman	should	see	a	doctor	if
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- She finds a new lump in her breast that doesn't go away after her period.
- She has very heavy bleeding during her period, or bleeding that lasts more than 10 days.
- Menstrual cramps cause her to miss school or work.
- She has had regular periods for 4 to 6 months but then no periods for more than 4 months.
- She has pain in the pelvic area, or bleeding from the vagina that is not part of a regular period.
- She has itching, pain, burning or a smelly discharge from her vagina.
- She notices sores on her vagina or vulva.
- She thinks she might be pregnant.

Key Points	

Keys to Sexual Health

Directions: After you've read and shared key points about taking care of sexual health, work as a group to answer these questions based on what you've learned. Be prepared to discuss your responses.

W	That are some actions both men and women can take to protect their sexual health?

) V	What are some sexual health issues men should be aware of?
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7 (What are some sexual health issues women should be aware of?
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Keys to Sexual Health (continued)

4	How can seeing a doctor or other health care provider for regular checkups help a person stay healthy?
⑤	Why is it important to see a doctor or other health care provider if you're having symptoms of STD or another infection?
	,
6	When should a man see a health care provider?
7	When should a woman see a health care provider?

Spreading the Word About Sexual Health

Directions: Write a 1- to 2-page article for the school newspaper or website about teens and sexual health. Be sure to do the following things in your article.

- Define and describe a specific sexual health issue or problem that can affect teens.
- Describe at least 2 things teens can do to help prevent, identify, diagnose and/or treat the specific sexual health issue/problem. These could include vaccines, health checkups, self-exams or screening tests.
- Identify at least 3 reliable resources teens could use to get accurate
 information about and/or health care services for this specific sexual
 health issue/problem. Include complete contact information (name,
 address, e-mail address, phone number and/or website) for each person
 or organization, and explain why each of the resources you suggest are
 valid and reliable.
- Describe why it's important for teens to talk with parents or other trusted adults about sexual health issues/problems, especially this one.
- Explain how teens can take personal responsibility for their sexual health in general and why it would be important for a teen to assume personal responsibility in dealing with this specific sexual health issue/problem.
- Give your article a creative title that will define your topic and interest other teens. Include a by-line with your complete name.

Self-Check

- ☐ I described a specific sexual health issue or problem that can affect teens.
- ☐ I described at least 2 things teens can do around this issue/problem.
- ☐ I identified at least 3 reliable resources teens could use and explained why each is valid and reliable.
- ☐ I described why it's important for teens to talk with parents or other trusted adults about this issue/problem.
- I explained how teens can take personal responsibility for their sexual health in general and in dealing with this issue/problem.

Lesson 9 **Abstinence: What's in It**for Me?

Overview

In this lesson, students begin to define and explore the concept of sexual abstinence and consider how it can apply to their lives. After discussing the various choices people can make, they examine the potential negative consequences of becoming sexually active. They work in pairs to brainstorm benefits of being abstinent, and to come up with solutions for challenges to an abstinence choice. Then they consider a variety of ways teens can express feelings of sexual attraction toward others and evaluate which of these ways are safe and healthy and support the choice to be abstinent.

Time: 60-90 minutes

Note: If time is limited, the assessment activity sheet may be completed as homework, along with the survey assignment.

Lesson Objectives

Students will be able to:

- 1. Describe benefits of sexual abstinence.
- 2. Summarize safe ways to express feelings of sexual attraction.
- **3.** Justify why sexual abstinence is the safest, most effective risk avoidance method of protection from HIV, other STDs and pregnancy.

National Health Education Standards

Standard 1:
Comprehending Concepts
Performance Indicator
1.12.1: Predict how healthy
behaviors can affect health

Performance Indicator
1.12.7: Compare and
contrast the benefits of
and barriers to practicing a
variety of healthy behaviors.
Performance Indicator
1.12.9: Analyze the potential
severity of injury or illness

if engaging in unhealthy

behaviors.

Materials & Preparation

Prepare

- Have pencils or pens and paper—enough for each pair of students to have 3 sheets.
- Have Definition of Sexual Abstinence (Slide 10), or make a transparency, if needed.

Review

- Sexual Abstinence/Sexual Activity Continuum Example, page 134.
- Why Choose Abstinence? (Student Wörkbook page 30), and Scoring Rubric, page 259.
- Attitudes About Abstinence (Student Workbook pages 31–32).

Health Terms

Review the teaching steps, slide, teacher page and activity sheets for any terms or concepts your students may not know, and be prepared to explain them. Examples:

abstinence

peers

barrier

sexting

• benefit

• sexual abstinence

consequence

sexually active

Support for Diverse Learners

To ensure student success with comprehending concepts:

- Pre-teach new concepts and terms. Write new terms on the board. Frequently use verbal checks for comprehension.
- Before teaching the lesson, assess what students know about sexual abstinence to define what it means to them.
- Consider students' cultures and family backgrounds when discussing
 the family sheet and other questions about teens and sexual activity.
 Don't assume that parents/families have values similar to those
 expressed in the lessons, or that they either condone or don't
 condone any type of sexual activity.

To ensure student success with reading and writing:

- For the Attitudes About Abstinence survey, allow students to survey only one family member (adult) or one other teen and record the responses.
- Pair students to conduct the interviews/surveys, so that one student asks the questions and the other records the responses.

Introduction

Get students ready for learning

Transition

On a piece of paper, write a few sentences about how you think the choices a person makes about sex can affect his or her sexual health.

Allow students to focus and work quietly for a minute or two. Call on student volunteers to share what they wrote. Explain that they'll be thinking and talking more about this later in the class.

Debrief

Your assignment from the last class was to go home and discuss the Time to Talk: Your Daughter's/Son's Sexual Health with your parents or an older family member.

What were some positive outcomes of your discussion?

Allow students to share their experiences. If students don't have positive outcomes to discuss, help them explore why they are uncomfortable talking to their parents about their sexual health.

(Note: Consider and be sensitive to the different cultures and religious views of your students and their families when debriefing this assignment. Some students may come from families in which talking about sexuality or sexual health is not seen as appropriate or encouraged.)

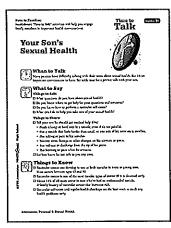
Motivate

The choices people make about sex are one aspect of sexuality. Another aspect is the sexual attractions they feel toward others. Today you'll be thinking about both of these things.

How do you know you're attracted to someone?



Master 9



Master 10

Allow students to share their ideas. List key points on the board. Examples might include wanting to be close to the person, liking how the person looks, thinking about the person a lot, caring what the person thinks or feels about you, sexual desire or thinking sexual thoughts about the person.

What are some of the qualities or things that attract you to another person?

Allow students to share their ideas. Examples might include personality, physical appearance, shared interests, sense of humor, how someone acts or things he/she says.

How do you feel when you're attracted to someone?

Again, allow students to share their ideas, and list key points on the board. Examples might include feeling happy, nervous, excited, curious, turned on or romantic, worried the person won't like you back.

What makes an attraction sexual? Is there a difference between feeling attracted to someone because of his or her personality, sense of humor, intelligence, etc., and feeling sexually attracted? What makes you want to be romantically or sexually involved with someone rather than just being friends?

Allow students to respond to the question and discuss their ideas. Explain that sexual attraction can be a physical impulse in and of itself, but can also grow from all the other ways people can be attracted to each other.

(Note: Be sure discussions of attraction allow for different types of relationships and sexual orientations.)

Teaching Steps

Explore consequences of sexual activity

Explain

Feelings of attraction can be very strong, particularly if you have sexual feelings toward the person to whom you're attracted. Sexual feelings include a physical attraction toward the person. They can include wanting to touch, kiss, hug and possibly engage in other sexual behaviors with the person to whom you're attracted. Sexual feelings can start early and arise throughout a person's lifetime. Having sexual

feelings is a normal part of human sexuality. But the choices people make about how they'll act on those feelings can have many consequences, or outcomes.

Ask & Discuss

What are some ways teens might express their feelings of attraction toward others?

Allow students to respond to the question and discuss their ideas.

Summarize

You can show you're attracted to someone by telling the person you like him or her; flirting in person, connecting online or through text messages; sending a note or birthday card; inviting the person to go out; getting to know the person better; holding hands, hugging or kissing. Sometimes when people are sexually attracted to each other they want to have sexual intercourse or engage in other sexual behaviors together. A person's values, personal or religious beliefs and culture can all influence what he or she does to express attraction toward someone.

Review

When you learned the definition of sexuality, we talked about 2 main choices people can make about sex. Does anyone remember what these were?

Allow students to respond to the question until they have mentioned sexual abstinence and sexual activity.

Many people choose not to have sex at this time in their lives. This is called sexual *abstinence*. Abstinence is the best choice for teens.

Other people choose to be *sexually active*. This means they participate in sexual behaviors with another person. Having sex can be an important and healthy part of adult human sexuality, but it carries certain risks.

Ask & Discuss

What are some risks or negative consequences of becoming sexually active?

Allow students to respond to the question and discuss their ideas. List key points on the board. Be sure the list includes the following risks:

You could get pregnant or get someone pregnant.

- · You could get an STD, including HIV.
- · You might have regrets.
- You might need to manage your sexual reputation.
- You might be sexually active with someone who just wants to use you.
- It could complicate or change your relationship in a negative way.
- A partner might put more demands on you, either emotionally or physically.
- Breaking up with someone you've had sex with might be more difficult emotionally.
- Your parents or other trusted adults might be disappointed or disapprove.
- · Your friends might disapprove.

It's probably not news to you that one of the most serious consequences of being sexually active is the risk of getting pregnant, getting someone pregnant, or getting an STD, such as HIV. These consequences could change your life, and a partner's life, in many negative ways. Abstinence is the safest, most effective way to protect yourself from HIV, other STDs and pregnancy.

Having sex before you're ready can also have emotional consequences, such as guilt, worry, loss of self-respect, and feeling hurt or sad if a relationship doesn't work out. Avoiding all of these negative consequences is one of the main reasons abstinence is the best choice for teens.

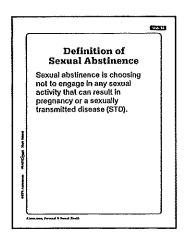
Define abstinence

Prepare

Show the **Definition of Sexual Abstinence** slide.

Explain

The word *abstinence* means choosing to do without something. In terms of sexuality, it means choosing not to have sex.



Slide 10

People may define sexual abstinence in different ways. Some people who are abstinent may decide not to participate in any sexual behaviors at all. Others may set limits so that they avoid any sexual behaviors that pose a risk of negative consequences. The most important thing to know is that sexual abstinence means choosing not to engage in any sexual activity that can result in pregnancy or a sexually transmitted disease (STD).

Following this definition of sexual abstinence protects your sexual health. Being abstinent doesn't mean you can't express your love or affection for someone you care about. But it does mean you say NO to any type of sexual behavior that could result in pregnancy or an STD, including those STDs that can be passed by skin-to-skin contact with body parts such as the fingers, mouth, or genitals.

Create

Let's explore what abstinence means in more detail.

Draw a horizontal line on the board. Label the left-hand side of the line "Abstinent" and the far right-hand side "Sexually Active." Then write "No sexual behavior at all" at the very end of the left-hand side of the line. (See the Sexual Abstinence/Sexual Activity Continuum Example, page 134, as an example.)

This is how some people define sexual abstinence. For them, it means not participating in any behavior that might be considered sexual. Other people believe that abstinence doesn't have to be an all or nothing thing.

Draw a vertical line across the horizontal one to separate the Abstinent and Sexually Active sides.

This is the line between behaviors that could still be considered abstinent and the behaviors that put a person at risk for pregnancy and STD. People who choose to be abstinent need to be sure they set limits so they don't cross this line.

What behaviors could someone participate in and still be considered abstinent according to the definition we're working with?

As students suggest behaviors write them along the left-hand side of the horizontal line. As best you can, put those that are less sexual closer to the left side and those that are more sexual closer to the right side and the line dividing Abstinent from Sexually Active.

If students suggest any behaviors that could pose a risk of pregnancy or STD (e.g., oral sex, genital touching, mutual masturbation), remind them that, while some people's definition of abstinence can include activities other people might consider sexual, abstinence cannot include any behaviors that could put a person at risk for pregnancy or STD, including those STDs that can spread through skin-to-skin contact.

Note: Students may disagree about whether certain behaviors can be considered abstinent. Find some way to indicate this disagreement; for example, circle the behavior or write it on the vertical line with a question mark. Help students analyze the pregnancy/STD risk of any disputed behavior to decide on which side of the line it truly belongs. Use any disagreements as an opportunity to explain that people may define abstinence differently and to emphasize the importance of setting sexual limits that will help them stick to their particular choice. Reinforce the idea that knowing yourself and your values is part of healthy sexuality.

Explain

Each person has to decide what abstinence will mean for him or her. Your choice will be based on your own values and experiences. But, no matter what, people who choose abstinence need to learn how to set sexual limits that will help them stick with their choice.

For example, a person who wants to be abstinent might decide to set limits around behaviors that feel too sexual to him or her, or around behaviors that could lead to other, more risky sexual activities. One example might be sexting, or sending sexual text messages or pictures. Technically speaking, you can't get pregnant, cause a pregnancy or get an STD by sexting, but it might lead to other sexual activities later, be against someone's values, or be something a person who is choosing to be abstinent just doesn't want to do.

Use the following questions and summaries to guide discussion of the activity.

Ask & Discuss

What determines whether a person is abstinent or sexually active?

Allow students to respond to the question and discuss their ideas.

People are abstinent or sexually active based on the decisions they make and the limits they set around what kinds of sexual behaviors they'll participate in.

Ask & Discuss

Why do you think teens choose abstinence?

Allow students to respond to the question and discuss their ideas.

Summarize

Teens choose abstinence for a variety of reasons. They may not be ready for sex. They may want to avoid the negative consequences of sexual activity. They may have other priorities that don't include dating or being sexually active. They may not feel sexually attracted to anyone. They may have values or religious beliefs that guide their choices.

Ask & Discuss

Does a person have the right to choose not to have sex? Why or why not?

Allow students to respond to the questions and discuss their ideas. Probe student thinking if any students suggest that someone doesn't have the right to say NO to sex, and stress that it's wrong and illegal to force any kind of sexual contact on another person.

Summarize

Participating in sexual behaviors should always be a matter of choice. Every person has the right to choose sexual abstinence and to say NO to sex. This is true both for people who have never had sex and for people who have had sex before. A person always has the right to choose sexual abstinence. And nobody has the right to pressure or force someone else to have sex.

Ask & Discuss

Why do you think some teens choose to be sexually active?

Allow students to respond to the question and discuss their ideas.

Sometimes teens participate in sexual behaviors because they think it's what other teens are doing or because someone pressures them into it. They may do it because it seems like a way of fitting in. For some it might be seen as a way to rebel or assert their independence. Teens may also engage in sexual activity because they're under the influence of alcohol or other drugs and aren't making the choices they would make if they were sober.

Remember that if a person is forced to do something sexual, that's not a choice. No one should ever be forced or pressured to engage in sexual behavior.

Students examine benefits of abstinence

Create & Share

Work with a partner to brainstorm and write a list of the *benefits* or positive things teens get from being abstinent. List as many as you can think of in 1 minute and let's see which team comes up with the most.

Pair students or allow them to select partners, and give them a minute or two to compile their lists. Take a quick survey of how many each pair came up with. Then call on pairs to each share something from their list, and make a master list on the board. Be sure the list includes:

- · Not having to worry about pregnancy
- · Not having to worry about getting an STD, including HIV
- Feeling proud of your choice
- Having time and energy for school and other interests
- Not having regrets about having had sex if you break up with someone
- Not getting a reputation or being the object of sexual rumors
- Not having to worry about getting caught or disappointing parents
- Feeling good about following your own or your family's values
- Being a role model for friends or younger siblings

Community Connection

Invite a teen parent (or someone who had a baby or fathered a baby as a teen but is now older) to talk about how having a baby at a young age affected her or his life.

As you can see, abstinence has a lot of benefits for teens.

Survey

Which of these benefits do you think would be the most important for teens and why?

Allow students to share their ideas.

Students solve barriers to being abstinent

Complete & Share

Can you think of some things that might be difficult or challenging about being abstinent? What are some of the things that could get in the `way of being abstinent? Work with your partner again to write a list of potential barriers to abstinence. Come up with at least 3.

Allow time for pairs to compile their lists. Call on each pair to share one of the barriers they listed, and create a master list on the board. Examples might include:

- · Feeling left out.
- Sexual pressure from a boyfriend or girlfriend.
- Sexual pressure from friends.
- Sticking with your sexual limits might be difficult.
- Other people might not understand your choice.
- Other people might make fun of or tease you about your choice.
- Worry about losing a boyfriend or girlfriend.
- Someone you like might not be interested in you if you won't have sex.

Part of being abstinent is finding ways to overcome or deal with potential barriers to your choice. Trade your list with another team. This team's job is to suggest ways a person could deal with each of these potential barriers to abstinence. Write at least 1 suggestion for at least 3 of the barriers on the list you receive.

Have pairs trade lists, and allow time for them to brainstorm solutions to the barriers on the list.

Then read the master list of barriers on the board one at a time, and allow pairs who had that barrier on their list to share their solutions. Write the possible solutions next to the barrier. If there are any barriers that aren't covered by the suggested solutions, have the class brainstorm solutions. Examples:

- Feeling left out—Find friends who are also abstinent; share your thoughts on abstinence and get support through a group, blog or other means.
- Sexual pressure from a boyfriend or girlfriend—Talk to your partner and explain why abstinence is important to you; be firm about your limits; consider whether you really want to be in a relationship with someone who doesn't respect your choice.
- Sexual pressure from friends—Explain your reasons for being abstinent; find new friends who share your values; ask your friends to respect your choice.
- Sticking with your sexual limits might be difficult—Learn skills to defend your choice; practice with friends ahead of time; don't put yourself in situations where sexual activity could be an option; don't drink or use other drugs.
- Other people might not understand your choice—Explain your reasons and the benefits you get from being abstinent; know that you're doing what's right for you, so don't worry about it; get support from people who do understand.
- Other people might make fun of or tease you about your choice— Explain your reasons and the benefits you get from being abstinent; avoid those people; use humor to redirect the conversation.
- Worry about losing a boyfriend or girlfriend—Talk to your partner and explain why abstinence is important to you; consider whether you would want to be in a relationship with someone who doesn't respect your choice.
- Someone you like might not be interested in you if you won't have sex—Believe in yourself and your choices; know that finding someone who shares your values is more important; consider whether you would want to be in a relationship with someone who doesn't respect your choice or share your values.

Students examine safe ways to express sexual attraction

Explain

You have your best chance of staying abstinent if you are clear about what it means and can express feelings of sexual attraction in appropriate and safe ways. A behavior would be safe and appropriate if it did not cross the line a person who has chosen to be abstinent has set for himself or herself and if it did not pose any risk of pregnancy or STD.

Complete & Share

Work with a new partner and brainstorm at least 5 safe and appropriate ways for high school students to remain abstinent and express sexual attraction toward another person without engaging in sexual behaviors that carry a risk of pregnancy or STD.

Pair students or allow them to select partners. Allow 3–4 minutes for pairs to create their lists. Ask each pair to share one item from their list until all examples have been shared. Examples could include:

- · Talking to a friend about your feelings
- · Writing about your feelings in a journal
- Getting to know the person you're attracted to
- Going to the movies, for a walk or out for dinner
- Holding hands, hugging or kissing, if the other person also chooses to do this

Summarize

Teens can express and share their feelings of sexual attraction in many ways besides having sex. Remember that being abstinent means choosing not to participate in any sexual activity that can result in pregnancy or an STD. Abstinence is the best and safest choice for high school students because it protects their health and their future.

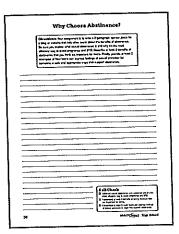
Assessment & Closure

Students demonstrate learning

Complete & Share

Direct students to turn to Why Choose Abstinence? on page 30 of the Student Workbook.

Your assignment is to write a 2-paragraph opinion piece for a blog or website that tells other students about the benefits of abstinence. Be sure you explain what sexual abstinence is and why it's the most effective way to avoid pregnancy and STD. Describe at least 3 benefits of abstinence that you think are important for teens. Finally, provide at least 2 examples of



Workbook page 30

how teens can express feelings of sexual attraction for someone in safe and appropriate ways that support abstinence.

Allow time for students to complete the activity sheet.

End the lesson

Close

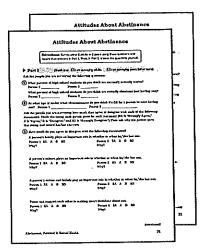
If you had a friend who wanted to be abstinent, what would you say to support him or her?

Call on students to share their ideas. Use the discussion to review key points about the definition of abstinence, benefits of abstinence and how teens can express sexual feelings in safe and appropriate ways.

Assign

You may be wondering what other people think about abstinence. For homework, your assignment is either to survey 2 peers, or people your age, about abstinence, or to survey 2 adults. Be prepared to share your results in the next class.

Abstinence on page 31 of the Student
Workbook and review the directions for
completing the activity sheet. You can allow
students to choose whether they'll survey peers
or adults, or, to ensure a balanced number of
survey responses from each group, you can
have students number off 1-2-1-2, and have all
of the ones survey peers, while the twos survey
adults. Remind students that this assignment
will be used in the next lesson, so they should
be sure to complete the survey and bring it to
class.



Workbook pages 31-32

Assess

Collect students' Why Choose Abstinence? activity sheets, and evaluate their work for this lesson. If possible, arrange for students' essays to be published in the school paper or on the school website or blog, if students wish.

Assessment Evidence
Objective 1
Students described benefits of sexual abstinence by:
☐ Completing the Why Choose Abstinence? activity sheet.
Objective 2
Students summarized safe ways to express feelings of sexual
attraction by: ☐ Completing the Why Choose Abstinence? activity sheet.
Objective 3
Students justified why sexual abstinence is the safest, most effective risk avoidance method of protection from HIV, other STDs and pregnancy by:
☐ Completing the Why Choose Abstinence? activity sheet.
(Scoring Rubric, page 259)

Student Journal

Lesson 9:

Abstinence: What's in It for Me?

Health terms

abstinence barrier benefit consequence peers sexting sexual abstinence sexually active

Journal ent	ry
Write a few sent	ences about how you think the choices a person makes
	fect his or her sexual health.
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Definition o	of Sexual Abstinence
Sexual abstinent	ce is
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Class discu	ssion notes
	

(continued)

Student Journal Lesson 9: Abstinence: What's in It for Me? (continued) Class discussion notes (continued)

Definition of Sexual Abstinence

Sexual abstinence is choosing not to engage in any sexual activity that can result in pregnancy or a sexually transmitted disease (STD).

Why Choose Abstinence?

Directions: Your assignment is to write a 2-paragraph opinion piece for a blog or website that tells other teens about the benefits of abstinence. Be sure you explain what sexual abstinence is and why it's the most effective way to avoid pregnancy and STD. Describe at least 3 benefits of abstinence that you think are important for teens. Finally, provide at least 3 examples of how teens can express feelings of sexual attraction for someone in safe and appropriate ways that support abstinence.

C 15 CT
Self-Check ☐ I defined sexual abstinence and explained why it's the most effective way to avoid pregnancy and STD. ☐ I described at least 3 benefits of being abstinent that are important for teens.
 I described at least 3 ways teens can express feelings of sexual attraction in ways that support abstinence.

Lesson 13 Making Decisions to Support Abstinence

Overview

This lesson focuses on using decision-making skills to support abstinence and setting personal limits for sexual behaviors. Students learn decision-making steps and see them modeled for a decision about going to a party with a date. They work in pairs to read a sample scenario and use the steps to recommend a healthy and safe decision that will support abstinence. Then they consider situations that could affect their own sexual choices and follow the decision-making steps to set sexual limits that help them remain abstinent.

Time: 60–90 minutes

Note: If time is limited, the assessment activity sheet may be completed as homework.

Lesson Objectives

Students will be able to:

- **1.** Use decision-making skills to set personal limits regarding sexual behaviors.
- **2.** Examine barriers to making decisions about sexual limits or being sexually abstinent.

National Health Education Standards

Standard 5:
Making Decisions
Performance Indicator
5.12.1: Examine barriers
that can hinder healthy

decision making.

Performance Indicator 5.12.2: Determine the value of applying a thoughtful decision-making process in health-related situations.

Performance Indicator 5.12.3: Justify when individual or collaborative decision making is appropriate.

Performance Indicator 5.12.4: Generate alternatives to health-related issues or problems.

Performance Indicator 5.12.5: Predict the potential short-term and long-term impact of each alternative on self and others.

Performance Indicator 5.12.6: Defend the healthy choice when making decisions.

Performance Indicator 5.12.7: Evaluate the effectiveness of health-related decisions.

Materials & Preparation

Prepare

• Have **Decision-Making Steps** (Slide 12), or make a transparency, if needed.

Review

- Decision Scenario (Student Workbook pages 38-39).
- **Deciding on My Limits** (*Student Workbook* pages 40–41), and Scoring Rubric, page 263.

Health Terms

Review the teaching steps, slide and activity sheets for any terms or concepts your students may not know, and be prepared to explain them. Examples:

- · decision making
- impulse
- self-control

Support for Diverse Learners

To ensure student success with comprehending concepts:

- Pre-teach new concepts and terms. Write new terms on the board. Frequently use verbal checks for comprehension.
- Review decision-making steps, allowing students to share other decision-making models they may have learned or know about.
- Make and distribute copies of the Decision-Making Steps slide for students to use for review. Allow students to discuss each step with a specific example about a sexual situation.
- Create a handout that includes the decision-making steps and the sample scenario with Casey. Have student pairs discuss and write or record what they think Casey should do at each step. Or allow students to create a poem or song about the sample scenario and what Casey should or might do.

To ensure student success with writing:

- Allow students to discuss and complete the Deciding on My Limits activity sheet with a parent or trusted adult.
- Allow students to record their practice decision-making steps using the scenario, or draw a storyboard to show their responses to the scenario.

Introduction

Get students ready for learning

Transition

On a piece of paper, describe a time you had to make a decision that was important to you. Write about what you needed to decide, the steps you followed to make your decision, and what the results were.

Allow students to focus and work quietly for a minute or two.

Debrief

How many of you were able to talk with your parent or another family member about abstinence? What are some ways your family member offered to support you in being abstinent?

Take a few minutes to follow up on students' experiences with taking the Time to Talk: Supporting Abstinence family sheet home and the talks they had with their parents or other family members. (Note: Some families may not want students to share details from private conversations in class. It's best to keep the discussion focused on how the experience of talking to their parents or other adults was for students in general terms, versus sharing specific things that were said.)

Motivate

You make decisions or choices every day. Some decisions are simple, such as what to wear that day. Other decisions are more complex. Even decisions that seem simple at first can have important consequences. For example, choosing what to eat for one meal can be a simple decision. But, over time, the choices you make about what food to eat can have a big effect on your health.

Would anyone like to share the decision you wrote about?

Call on a few students to briefly share their experiences. If the decision named lends itself to further discussion, follow up by asking how the student made the decision—What kinds of things did he or she think about? Did someone help?—and what the outcome was—Would he or she make the same decision again?

Today you're going to think about different ways teens can support a choice to be abstinent. One of the first steps, of course, is to decide that abstinence is the best choice. Once you know you want to protect your sexual health by being abstinent, you have to make decisions about limits and behaviors that will support and protect that choice.

Teaching Steps

Teach about decision making

Explain

Making a good decision takes thought and planning. Today you're going to learn steps that will help you make good decisions in general, and then apply these steps for *decision making* to situations that could challenge a choice to be abstinent.

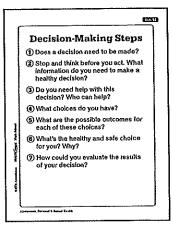
Prepare

Show the Decision-Making Steps slide.

Explain

These steps can help you make the best decision in any situation.

- 1. The first step is to recognize that a decision needs to be made.
- 2. Then you need to stop and think. What do you need to know to make a healthy and safe decision? Do you have the information you need? If not, how can you find it?



Slide 12

- 3. Sometimes you can make a decision on your own. Sometimes you many need help from someone else. So the next step is to decide if you need help, and who can help if you need it.
- 4. Once you have the information you need and know who can help, it's time to look at your choices, or options. What are all the possible choices you have in this situation?
- 5. Then, you need to think about what the possible outcomes, or consequences, of each choice could be. Think about what positive things could come from this choice. Then think about what negative or risky things could happen.

- 6. After you've thought about all the possible choices and their outcomes, it's time to make your decision. Use the work you've done so far to make the best, healthiest or safest choice for you.
- 7. Later you can evaluate your decision. Are you happy with the results? Would you make the same choice again? What would you change the next time?

Every situation and decision is different for each person. Teens come from different families, cultures and backgrounds. They have different maturity levels, values and experiences. Not everyone will make the same decision in every situation. The key is to stop and think it through before you act so you can protect yourself and others. These steps can help.

Model the decision–making process

Model

Let's go through the decision-making steps for a sample situation that could relate to abstinence.

Read the following scenario to students.

Casey wants to stay abstinent at least until he or she graduates from high school. Someone Casey really likes but doesn't know very well yet has invited Casey to go to a party on Saturday night. Casey has heard that there may be alcohol at the party and that the parents of the teen who's hosting it might be out of town. What should Casey decide to do?

Show the **Decision-Making Steps** slide again and go through the steps, using the sample scenario to show students how to apply them.

- Does a decision need to be made?
 Yes. Casey needs to decide about going to the party.
- 2. Stop and think before acting. What information could help Casey make a healthy decision?
 - Will there be alcohol at the party?
 - Will there be adults there to supervise the party?
 - How will Casey get to the party? Will it be possible for Casey to leave if necessary?
 - Would going to the party pose a risk to Casey's abstinence choice?
 - Does going to the party fit within the sexual limits Casey has set for himself or herself?

- Does Casey's date know about and support Casey's abstinence choice?
- 3. Does Casey need help with this decision? Who can help?

 Casey could make this decision alone, but might want to talk to parents, another trusted adult, or a friend who's also abstinent to get advice.
- 4. What choices does Casey have?
 - Say NO to the date.
 - Suggest another activity besides the party that won't put the choice to be abstinent at risk.
 - · Go to the party.
 - Go to the party, but leave right away if there's alcohol or if the host's parents aren't home.
- 5. What are the possible outcomes for each of these choices? Say NO to the date.
 - Possible positive outcomes:
 - Casey avoids a potentially risky situation.
 - Casey won't have to deal with pressure from his/her date about sexual activity.
 - —It will protect the choice to be abstinent.
 - Possible negative outcomes:
 - The person may not ask Casey out again.
 - Casey will miss out on a chance to get to know the person he/she likes.
 - Casey will feel left out.

Suggest another activity besides the party.

- Possible positive outcomes:
 - Casey and the date might enjoy that activity just as much as the party.
 - Casey will have a chance to get to know this person.
 - Casey will protect the abstinence choice, depending on what other activity they decide to do.
- Possible negative outcomes:
 - The other activity might not be as fun as the party.
 - Casey's date might not want to do something else.

 Casey still might have to deal with sexual pressure from the other person.

Go to the party.

- Possible positive outcomes:
 - Casey might have fun.
 - Casey will have a chance to get to know the person he/she likes.
 - Casey will get to practice sticking with his/her limits.
- Possible negative outcomes:
 - Casey might have to deal with pressure to drink.
 - Casey might have to deal with sexual pressure.
 - Casey might not be able to stick with his/her limits.

Go to the party but leave right away if there's alcohol or if the host's parents aren't home.

- Possible positive outcomes:
 - Casey will protect the abstinence choice.
 - Casey's date might respect Casey for that decision.
 - Casey and the date could find something else to do that would also be fun but wouldn't threaten an abstinence choice.
- Possible negative outcomes:
 - Casey's date might be offended or upset if Casey leaves the party.
 - Peers might tease Casey about leaving early.
 - Casey might have to find another way home if the date wants to stay.
 - The person might not ask Casey out again.
- 6. What's the healthy and safe choice for Casey and why?

Assuming Casey wants to go on a date with this person, the best choice is to suggest another activity that would better support an abstinence choice. Casey could also go to the party and plan to leave if there's alcohol or the party is unsupervised; but he/she would have to be very clear about that decision and carry through on it no matter what.

7. How could Casey evaluate the results of this decision?

Casey would be happy with the decision if he/she got to go out with the person without putting the abstinence choice at risk.

Ask & Discuss

Why is it valuable to know how to make thoughtful decisions in situations related to your sexual health?

Allow students to respond to the question and discuss their ideas.

Summarize

At some time, nearly everyone is tempted to act on impulse without thinking things through. That's why it's good to know these steps. Using decision-making skills can help you make smart and healthy choices. This is especially important when you have to make decisions about abstinence and sexual activity, which can affect your sexual health and your future.

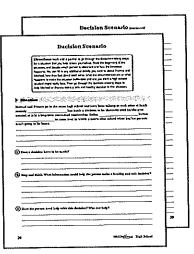
Students practice decision-making skills

Practice

Direct students to turn to the **Decision Scenario** on page 38 of the Student

Workbook.

Now you'll work with a partner to go through the decision-making steps for another sample situation that you help create yourselves. The characters in the situation are Michael and Yvonne. They go to the same high school and have been talking to each other at lunch recently. One of them—you can decide which one—has made a decision to be abstinent until he or



Workbook pages 38-39

she gets married or is in a long-term committed relationship. Today, one of them invites the other to come over to watch a movie after school when his/her parents aren't going to be home.

Start with those facts, and fill in additional details about Yvonne and Michael, how they feel about each other, what the circumstances are and what happens to make the situation believable and one you think a high school student might really face. Then go through the decision-making steps to help Michael or Yvonne make a safe and health decision in this situation.

Pair students or allow them to select partners, then allow time for pairs to complete the activity sheet.

When students have finished, review the decision-making steps. Go through the process, allowing pairs to share their situations and answers to the questions. Encourage discussion of the different scenarios and how the given circumstances affect the decision-making process. The guide below offers some possible decision points.

- 1. Does a decision need to be made?
 - Yes, Michael/Yvonne may need to decide whether to accept the invitation, or what activities to agree to or engage in if he/she does accept the invitation.
- 2. Stop and think. What information could help the person make a healthy and safe decision?

Michael/Yvonne may need to know:

- That abstinence is the best and safest choice for teens
- Personal and family rules and values about dating, sexual activity or having people over
- What the other person is thinking/feeling about spending time together
- Whether the other person understands and will respect a choice to be abstinent
- How to set limits to avoid participating in any sexual activity that could cause a pregnancy or transmit an STD
- 3. Does the person need help with this decision? Who can help? Michael/Yvonne can make the decision alone. But he/she might want to ask parents or another trusted adult for advice on what to do.
- 4. What choices does Michael/Yvonne have?
 - Tell the other person no.
 - Go over to watch the movie.
 - Invite some other friends over to see the movie too.
 - Ask to come over another time when at least one parent will be home.
- 5. What are the possible outcomes for each of these choices?

If he/she tells the other person no:

 Possible positive outcomes—Won't have to make a decision about sexual activity. Can feel good about following personal and family values and beliefs. The other person might be relieved if he/she was worried about the invitation too.

 Possible negative outcomes—Other person might get angry. They'll miss a chance to spend time together.

If he/she goes over to watch the movie:

- Possible positive outcomes—Might have fun together. Could get closer and keep spending time together.
- Possible negative outcomes—Might feel pressure about sexual activity. Parents might be angry if they find out later. Might wind up engaging in a sexual activity that could put them at risk for pregnancy or STD. Might wind up going against personal or family values and beliefs.

If he/she invites some other friends over to watch the movie too:

- Possible positive outcomes—Won't feel pressure about sexual activity if other friends are there. Get to spend time together. Might have fun. Could get to know each other better and keep spending time together.
- Possible negative outcomes—Other friends might not be welcome. Other person might be upset. Parents might be angry if a group comes over when they're not there. If the other friends are couples, it might add more pressure to engage in sexual behaviors. Won't get to know each other as well if other people are there.

If he/she asks to come over another time when at least one parent will be home:

- Possible positive outcomes—Won't feel pressure about sexual
 activity if the parents are there. Will know the parents are OK with
 him/her coming over. Might have fun together. Could get to know
 each other better and keep spending time together.
- Possible negative outcomes—Other person might not want to wait and might get angry. Parents might say he/she can't come over.
 Won't get to spend time with each other now.
- 6. What's the healthy and safe choice? Why?

The healthiest and safest decision is to wait to come over until the parents are home. (Note: Answers may vary. Allow students to justify their recommendations. You might want to have the class vote with a thumbs-up or thumbs-down on whether recommended decisions are healthy and safe.)

7. What could help Michael/Yvonne evaluate the results of the decision?

Would be happy with his/her decision if the other person agreed to wait and wanted to keep seeing each other. Would feel good about following personal values and beliefs and making a decision that protected the choice to be abstinent.

Ask & Discuss

What are some other situations in which teens might need to make a decision related to abstinence or sexual activity?

Allow students to respond to the question and discuss their ideas. List their responses on the board.

Summarize

Situations related to abstinence or sexual activity in which a decision may need to be made include:

- · Deciding what to do on a date
- Deciding how to express your feelings of sexual attraction for someone
- Deciding what your sexual limits should be
- Deciding how to communicate your limits if you're being pressured about sex

Teach about importance of self-control

Explain

In the examples you've worked through, the person has some time to make the decision and respond. But what do you do if you're already in a situation and suddenly facing sexual pressure? This is where Step 2—Stop and think—becomes very important. Especially in situations where you're having strong feelings of sexual attraction, an important skill that will help you make good decisions is self-control.

Ask & Discuss

How would you define self-control? What are some examples?

Allow students to respond to the questions and discuss their ideas.

Summarize

Self-control is the ability to control your own behavior, especially in terms of reactions and impulses. Using self-control can help you stop or

counter your desire to engage in sexual behaviors. Self-control is part of making healthy decisions on the spot.

Examples could include taking a "time-out" to think before you act, so you have a chance to consider the consequences of your options. If you are facing sexual pressure, you may need to stop what you're doing and remove yourself from the situation. This isn't always easy to do, but it's important. Self-control can also help you delay taking action until you've had a chance to work through the decision-making steps for yourself, consider realistically what you should do, and come up with a healthy plan.

Brainstorm barriers to making good decisions

Ask & Discuss

What could get in the way of making good decisions about sexual limits or abstinence?

Allow students to respond to the question and discuss their ideas. Make a list of potential barriers on the board. Be sure the list includes:

- · Pressure from others
- Your own feelings of sexual attraction
- Not deciding on your sexual limits ahead of time
- Perceived norms around sexual activity
- · Differing values and beliefs about sexual activity
- Using alcohol or other drugs

What are some ways you could overcome each of these barriers?

Allow students to respond to the question and discuss their ideas. Write possible solutions next to each of the barriers listed on the board. Examples include:

- Pressure from others—Avoid people who don't respect your beliefs and choices; learn skills to communicate your limits clearly; get support from friends who are abstinent too.
- Your own feelings of sexual attraction—Remember your reasons for being abstinent; use self-control to stop what you're doing and take a break to give yourself time to think; decide ahead of time to avoid situations where these feelings could be strong.

- Not deciding on your sexual limits ahead of time—Take time to think about your limits; write them down and carry the list with you; be sure a boyfriend/girlfriend knows your limits before you are alone together.
- Perceived norms around sexual activity—Spend time with friends who are abstinent; get the facts about how many teens are abstinent; don't believe what you see and hear in the media; question your perceptions.
- Differing values and beliefs about sexual activity—Remember that
 each individual is responsible for his or her sexual health; take time to
 think about your values and beliefs; examine family and cultural values
 and beliefs; spend time with peers or friends who share values and
 beliefs about remaining abstinent.
- Using alcohol or other drugs—Make one of your limits be not using alcohol or other drugs; don't use alcohol or other drugs if there's a possibility of sexual activity happening; don't go to parties or other situations where alcohol or other drugs are being used; always plan an alternate way to get home if you're going somewhere alcohol and other drugs may be used.

Thinking ahead about things that could get in the way of or influence your decisions is important. If you anticipate the barriers ahead of time, you can take steps to avoid them or deal with them when they come up. This is part of the process for making good decisions that will protect your sexual health.

Working through these decision-making steps may seem obvious or even awkward at first. But sometimes it helps to overemphasize a process when you're learning it so that you really understand it and can apply it quickly later when you need to. Going through each of the steps in the decision-making process can help you see important information, concepts and influences that are often ignored.

It can help you really consider all the factors that go into the choices that affect your sexual health. You can use this decision-making process in the moment when faced with unexpected sexual pressures. You can also use it to help you plan ahead and set limits to avoid those kinds of pressures.

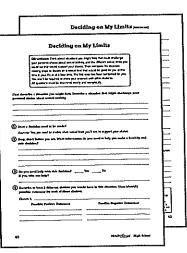
Assessment & Closure

Students demonstrate learning

Complete

Direct students to turn to **Deciding on My Limits** on page 40 of the Student Workbook.

Think about situations you might face that could affect your choices about sexual activity, and the different sexual limits you could set that would support being abstinent. Then complete the decision-making steps to decide on one of these limits that would be good for you at this time in your life. The first step has been completed for you. You won't be required to share your answers with other students.



Workbook pages 40-41

Allow time for students to complete the activity sheet. Circulate as students work to offer guidance and corrective feedback, as needed.

End the lesson

Close

Imagine you have to make a decision about staying abstinent. Which decision-making step would be most important to you, or most difficult, when making the decision and why?

Call on students to share their responses until all or most of the decision-making steps have been mentioned.

Assess

Collect students' Deciding on My Limits activity sheets and evaluate their work for this lesson.

Assessment Evidence
Objective 1
Students used decision-making skills to set personal limits regarding sexual behaviors by:
\square Completing the Deciding on My Limits activity sheet.
Objective 2
Students examined barriers to making decisions about sexual limits or being sexually abstinent by:
\square Completing the Deciding on My Limits activity sheet.
(Scoring Rubric, page 263)

Student Journal

Lesson 13: Making Decisions to Support Abstinence

Health terms

decision making impulse self-control

Journal entry
Describe a time you had to make a decision that was important to you. Write about what you needed to decide, the steps you followed to make your decision, and what the results were.
Decision-Making Steps
1. Does a decision need to be made?
2. Stop and think before you act.
3. Do you need help? Who can help?
(continued

Student Journal

Lesson 13: Making Decisions to Support Abstinence (continued)

Decision-N	aking Ste	ps (continu	ed)		
4. What choice	do you have?		, and the s	A AMERICAN CO.	
5. What are the	possible outco	mes for eac	n of these ch	noices?	
6. What's the h	althy and safe	choice for y	ou? Why?		
7. How could y	ou evaluate the	results of ye	our decision	?	Address of the second
Class disc	ıssion not	es			
Class disc	ission not	es			
Class disc	ission not	es			
Class disc	ission not	es			
Class disc	ission not	es			
Class disc	ission not	es			
Class disc	ission not	es			

Teens & Sex: The Facts

According to a national survey by the Centers for Disease Control and Prevention:

- Only 33.7% of high school students are currently sexually active.
- This means that 66.3% of high school students are sexually abstinent.

Decision-Making Steps

- (1) Does a decision need to be made?
- 2 Stop and think before you act. What information do you need to make a healthy decision?
- 3 Do you need help with this decision? Who can help?
- 4 What choices do you have?
- (5) What are the possible outcomes for each of these choices?
- 6 What's the healthy and safe choice for you? Why?
- 7 How could you evaluate the results of your decision?

Decision Scenario

Directions: Work with a partner to go through the decision-making steps for a situation that you help create yourselves. Read the beginning of the situation, and decide which person is abstinent and how the invitation happens. You can fill in any additional details you want to about Yvonne and Michael, how they feel about each other, what the circumstances are or what happens to make the situation believable and one you think a high school student might really face. Then go through the decision-making steps to help Michael or Yvonne make a safe and healthy decision in this situation.

> Situation	Market Commencer	and the profit of the second o	
Michael and Yvonne go to t	ne same high school and h	ave been talking to each other	at lunch
recently.	has made a decis	sion to be abstinent until he/sh	
-		oday,	
	to come over to watch a n	novie after school when his/he	r parents
aren't going to be home.			
1 Does a decision have to	be made?		
2) Stop and think. What in	nformation could help the	person make a healthy and sai	fe decision
3 Does the person need h	elp with this decision? W	ho can help?	

Decision Scenario (continued)

Choice 1:		
Choice 2:		
Choice 3:		
What are the	possible outcomes for each of th	ese choices?
Choice 1	Possible Positive Outcomes	Possible Negative Outcomes
Choice 2	Possible Positive Outcomes	Possible Negative Outcomes
Choice 3	Possible Positive Outcomes	Possible Negative Outcomes
What's the l	nealthy and safe choice? Why?	
How could	Michael/Yvonne evaluate the res	rults of the decision?

Deciding on My Limits

Directions: Think about situations you might face that could challenge your personal choice about sexual activity, and the different sexual limits you could set that would support your choice. Then complete the decision-making steps to decide on a sexual limit that would be good for you at this time in your life or at a later time. The first step has been completed for you. You won't be required to share your answers with other students.

All questions must be answered clearly and completely.

First describe a situation you might face. Describ personal choice about sexual activity.	e a situation that might challenge your
1 Does a decision need to be made?	
Answer: Yes, you need to decide what sexual limi	t you'll set to support your choice.
2 Stop, think before you act. What information safe decision?	do you need to help you make a healthy and
Do you need help with this decision? If yes, who can help?	Yes No
Describe at least 2 different choices you wou possible outcomes for each of these choices.	ld have in this situation. Then identify
Choice 1:	
Possible Positive Outcomes	Possible Negative Outcomes

Deciding on My Limits (continued)

Choice 2:Possible Positive Outcomes	Possible Negative Outcomes			
Choice 3:				
Possible Positive Outcomes	Possible Negative Outcomes			
What's the healthy and safe choice for you ar	nd why?			
How could you evaluate the results of your c				
How could you evaluate the results of your c				
w at least 4 however that gould get in the	way of following through on your sexual limi			
Name at least 1 barrier that could get in the and explain what you could do to overcome	it.			
	Self-Check			
	☐ I described a situation that could challenge my personal choice. ☐ I completed all 6 decision-making steps.			
	I named at least 1 barrier that could get in the way of following through on my limit ar explained what I could do to overcome it.			

Lesson 14 Resisting Sexual **Pressure**

Overview

Students learn about refusal skills that will help them stick to their personal limits and resist pressure to engage in sexual behaviors. After brainstorming pressure lines and other things someone might say or do to convince another person to have sex, students study the techniques being used in each one. They learn about refusal skills, including clear NO statements, alternative actions and delay tactics. They see these

National Health Education Standards

Standard 4: Communication Performance Indicators 4.12.1: Use skills for communicating effectively with family, peers and others to enhance health.

Time: 45-60 minutes

pairs to resist different pressure lines.

Note: If time is limited, the assessment activity sheet may be completed as homework.

refusal skills modeled by the teacher, then practice using them in

Lesson Objectives

Students will be able to:

- 1. Summarize why individuals have the right to refuse sexual contact.
- 2. Demonstrate effective communication skills for setting sexual limits and resisting sexual pressure.

Materials & Preparation

Prepare

• Have Refusal Skills (Slide 13), or make a transparency, if needed.

Review

• Turning Off the Pressure (Student Workbook pages 42-43), and Scoring Rubric, page 264.

Health Terms

Review the teaching steps, slide and activity sheet for any terms or concepts your students may not know, and be prepared to explain them. Examples:

- alternative
- body language
- delay tactic
- effective

- nonverbal
- pressure line
- refusal skills

Support for Diverse Learners

To ensure student success with comprehending concepts:

- Pre-teach new concepts and terms. Write new terms on the board, particularly words that may have other interpretations (e.g., pressure line). Frequently use verbal checks for comprehension.
- Make and distribute copies of the **Refusal Skills** slide for students to review and take notes on.
- Discuss how culture and family guidance affect applying refusal skills. For example, in some cultures, youth are expected to be compliant and not refuse elders if asked to do something. Discuss how sexual situations are different and why learning and applying refusal skills is necessary.
- Create an interactive game to help students become familiar and comfortable with refusal skills. Make three signs to be posted around the room: (1) Clear NO statement, (2) Alternative Actions, and (3) Delay Tactics. Make cards that list one technique per card (e.g., "Use the word NO," "Suggest an activity that gets you out of the situation"). Distribute the technique cards to students. Have them place the techniques under the appropriate refusal skill and discuss. Ask students to give an appropriate example of how to apply the refusal technique as they place their cards.
- Allow students to practice refusal skills with a peer outside the classroom until they feel comfortable demonstrating the skill in front of the class.

To ensure student success with writing:

- Allow students to record their practice sessions.
- Allow students to complete the Turning Off the Pressure activity sheet as homework.

Introduction

Get students ready for learning

Transition

On a piece of paper, describe at least 1 sexual limit a person could set and explain how this limit will help protect the person's sexual health.

Allow students to focus and work quietly for a minute or two. Call on student volunteers to share what they wrote.

Motivate

Setting personal limits will help you avoid situations that might threaten your choice to be abstinent. But there may be a time when you find yourself facing pressure to have sex or participate in behaviors that go beyond the limits you've set for yourself. It's important to think about and practice what you can say and do to stay abstinent in those situations.

Have you ever been in another type of situation in which you were being pressured to do something you didn't want to do, or something that wasn't healthy or safe for you?

Allow a few students to share their experiences. Examples might include a friend asking to borrow clothes or possessions, making fun of someone, riding in a car with a driver who'd been drinking or taking a dare.

The skills you're going to practice today could also be used in those situations.

Teaching Steps

Examine pressure lines and techniques

Survey

What's an example of a *pressure* line someone might say to push a person's limits or try to get him or her to have sex?

What's an example of something someone might do to push a person's limits or try to get him or her to have sex?

Call on a few students to provide examples. If students are having trouble coming up with a pressure line, share this one with them: "If you loved me you would show me." Write the lines students suggest on the board.

Explain

There are many different ways people might pressure another person to have sex. They might use their relationship with the person they're pressuring in some way. They might suggest that everyone has sex so it's not a big deal, or that the person who's refusing is missing out on something. They might talk about how sex will feel, or suggest that there's something wrong with the person who doesn't want to have sex. There are as many different ways to pressure someone as there are different people and relationships.

Complete

Can you think of some additional things someone might say (pressure lines) or things someone might do (pressure actions) to get another person to agree to have sex?

Allow students to make additional suggestions, and add these to the list on the board. If students need help, ask them to think about things they may have seen or heard in movies or TV shows.

Now let's look at these examples and identify what kind of strategy each one is using.

Review the example pressure lines and actions written on the board and help students identify the strategies or approaches being used in each one.

Ask & Discuss

Which of these pressure lines or other pressure actions do you think would be the most difficult to resist? Why?

Allow students to respond to the questions and discuss their ideas.

Summarize

Pressure around sexual activity can be hard to resist, especially if the person is someone you like or feel very attracted to, or if the person knows ways to persuade you. The best way to protect your choice to be sexually abstinent is to learn ways to say NO that will be *effective*, or work well every time.

■ Teach about refusal skills

Ask & Discuss

Does a person have the right to choose not to have sex or refuse to participate in sexual behaviors? Why or why not?

Allow students to respond to the questions and discuss their ideas. Probe student thinking if any students suggest that someone doesn't have the right to say NO to sex, and stress that it's wrong and illegal to force sexual contact on another person.

Summarize

Sexual activity should always be a matter of choice. Every person has the right to choose sexual abstinence and to say NO to sex. This is true both for people who have never had sex and for people who've had sex before, but want to return to being abstinent. A person always has the right to choose sexual abstinence. And nobody has the right to pressure or force someone else to have sex.

Explain

Sticking to a choice to remain abstinent can be difficult when you feel pressured by another person or a situation. Today you're going to learn and practice some *refusal skills*. These are techniques that can help you resist pressure, communicate your personal limits and say NO to sexual activity.

Prepare

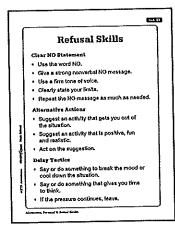
Show the Refusal Skills slide.

Explain

Review the refusal skills, asking students to share what they may already know and/or give examples of each one. Use the notes below to guide the discussion, as needed.

The first step is to say NO clearly. To make a clear NO statement you need to:

Use the word NO. There is no substitute.
 You always have the right to say NO to things you don't want to do.



Slide 13

- You also want to give a strong nonverbal NO. This means you use actions or body language that support and reinforce the NO message.
 These are ways to say NO without words. Examples include crossing your arms or legs, using your hands for emphasis, making eye contact as you say NO firmly, and walking away.
- Use a firm tone of voice. Don't laugh or let your tone of voice undermine your refusal.
- Clearly state your limits. You don't always have to do this, but it can
 be a way to explain and make your refusal even clearer.
- Repeat the NO message as much as needed. If the pressure continues, you may have to say NO more than once to get your point across.
 Continue to say NO until the person gets it.

If the person pressuring you is someone you still want to have a relationship with, you can suggest an *alternative* action. This is something you can do instead. Be sure to:

- Suggest an activity that gets you out of the situation. Think of something you could do besides being sexual. Be sure it's something that will take you out of the pressure situation.
- Suggest an activity that is positive, fun and realistic. Think of something you could actually do and that would appeal to the other person. Be sure that what you propose is something you can act on then and there.
- Act on the suggestion. For example, if you say, "Let's go for a walk instead," grab the person's hand and start walking. Don't allow room for the pressure to start again.

You can also use *delay tactics* to help get you out of the pressure situation. You can:

- Say or do something to break the mood or cool down the situation.
 For example, change what you're doing, leave the room temporarily, or take some other action that could shift what's happening.
- Say or do something that gives you time to think. Stalling, making an
 excuse or asking a question aren't the same as saying NO, but they
 can buy you time to make a decision and prepare your clear NO
 statement.
- If the pressure continues, you can leave the situation.

■ Model refusal skills

Model

Demonstrate each of the refusal skills for students, incorporating appropriate body language, such as crossing your arms and turning away, shaking your head, and standing up tall and making eye contact as you say NO firmly.

Clear NO statements:

- NO, I don't want to do that.
- I could get pregnant. So, NO, I'm not going to risk it.
- · NO, my limit is kissing. I'm not going to have sex with you.
- I said NO already, and I mean it.

Alternative actions:

- NO, I don't want to do that. Let's go see a movie instead.
- I'd much rather go get something to eat. What's your favorite restaurant?
- I want to talk to you instead. Tell me what you want to do this weekend.

Delay tactics:

- I'm not prepared to think about that right now.
- I don't feel well, so I'm going home.
- I need to get some fresh air. I'm going outside.
- You're joking, right?

Students practice refusal skills

Practice

Now you'll have a chance to work with a partner to practice some of these refusal skills for resisting sexual pressure.

Pair students or allow them to select partners. Emphasize that it doesn't matter if students have a partner of the same or opposite gender. They are simply practicing the skill of resisting pressure. Keep the **Refusal Skills** slide displayed as students practice.

Let's start with practicing clear NO statements. One of you should say one of the pressure lines from the board, and the other will use a clear NO statement to resist the pressure. Be sure you follow the techniques you've learned about—say the word NO, use body language to send a nonverbal NO message, and use a firm tone of voice. Then switch roles so you both have a chance to practice.

As pairs are practicing, circulate around the room to offer corrective feedback and reinforcement as needed.

Now you're going to practice suggesting an alternative action. Again, one of you will say a pressure line, and the other will suggest a positive and realistic alternative action that will get you out of the situation. Then switch roles so you both have a chance to practice.

As pairs are practicing, circulate around the room to offer corrective feedback and reinforcement as needed.

Now try using a delay tactic. One of you will say a pressure line, and the other will use a delay tactic that would break the mood or cool down the situation. Then, again, switch roles so you both have a chance to practice.

As pairs are practicing, circulate around the room to offer corrective feedback and reinforcement as needed.

Demonstrate

After all students have had an opportunity to practice, ask for volunteers to demonstrate each of the refusal skills. Allow as many pairs as possible to demonstrate their learning. After each demonstration, use the Refusal Skills slide to review how well the techniques were used to resist the sexual pressure.

Assessment & Closure

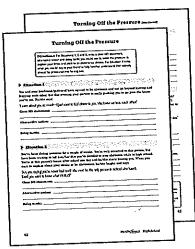
Students demonstrate learning

Complete

Direct students to turn to Turning Off the Pressure on page 42 of the Student Workbook.

Now you'll have a chance to apply the refusal skills you've learned to different pressure situations.

Allow time for students to complete the activity sheet.



Workbook pages 42-43

End the lesson

Close

Which of the refusal skills you learned today do you think would be easiest for you to use and why?

Call on students to share their ideas. Use the discussion to reinforce how to use each of the techniques.

Assess

Collect students' Turning Off the Pressure activity sheets and evaluate their work for this lesson.

Assessment Evidence
Objective 1 Students summarized why individuals have the right to refuse sexual contact by:
Completing the Turning Off the Pressure activity sheet. Objective 3 Students demonstrated effective communication skills for setting sexual limits and resisting sexual pressure by:
☐ Completing the Turning Off the Pressure activity sheet. (Scoring Rubric, page 264)

Student Journal

Journal entry

Lesson 14: Resisting Sexual Pressure

Health terms

alternative body language delay tactic effective nonverbal pressure line refusal skills

•	
Describe at least 1 sexual limit a person could set and explain how this	limit
will help protect the person's sexual health.	

Refusal Skills Clear NO Statement: Alternative Actions: Delay Tactics:

(continued)

Student Journal	
Lesson 14: Resisting Sexual Pressure (continued	d)
Class discussion notes	
	water to the
	New York
	-

Refusal Skills

Clear NO Statement

- Use the word NO.
- Give a strong nonverbal NO message.
- Use a firm tone of voice.
- Clearly state your limits.
- Repeat the NO message as much as needed.

Alternative Actions

- Suggest an activity that gets you out of the situation.
- Suggest an activity that is positive, fun and realistic.
- Act on the suggestion.

Delay Tactics

- Say or do something to break the mood or cool down the situation.
- Say or do something that gives you time to think.
- If the pressure continues, leave.

Turning Off the Pressure

Directions: For Situations 1, 2 and 3, write a clear NO statement, alternative action and delay tactic you could use to resist the pressure or explain your limits and stick to an abstinence choice. For Situation 4 write what you would say to your friend to help him/her understand that nobody should be pressured into having sex.

		or	
			L

You and your boyfriend/girlfriend have agreed to be abstinent and not go beyond kissing and hugging each other. But this evening your partner is really pushing you to go past the limits you've set. He/she says:

"I care about you so much—I just want to feel closer to you. You know we love each other:"
Clear NO statement:
Alternative action:
Delay tactic:
> Situation 2
You've been dating someone for a couple of weeks. You're very attracted to this person, but have been waiting to tell him/her that you've decided to stay abstinent while in high school. You're at this person's house after school one day and he/she starts kissing you. When you start to explain about your choice to be abstinence, he/she laughs and says:
"Are you saying you've never had sex? You must be the only person in school who hasn't. Don't you want to know what it's like?"
Clear NO statement:
Alternative action:
Delay tactic:

Turning Off the Pressure (continued)

▶ Situation 3

You're at a party when someone you really like upstairs to one of the bedrooms to be alone to	e, but don't know very well, asks you to go ogether. He/she says:
"Don't be afraid, nothing bad will happen."	
Clear NO statement:	
Alternative action:	
Delay tactic:	
▶ Situation 4	
girlfriend about it. Your friend says that the leads to stop touching and kissing, and said find somebody else who would. Your friend of He/she says:	t, but is facing a lot of pressure from a boyfriend/ last time they were alone his/her partner didn't that if your friend wouldn't have sex it was time to doesn't want to lose the boyfriend/girlfriend.
	if we broke up. Maybe I owe it to my partner to have sex."
What would you say to help your friend und pressured into having sex? What refusal skills would help your friend so 2 refusal skills and give a specific example of the second s	stick to an abstinence choice? Identify at least of how each one could be applied to this situation.
	Self-Check ☐ I gave an example of all 3 refusal skills for each situation. ☐ I clearly explained why nobody should be pressured into having sex. ☐ I identified at least 2 refusal skills that would help a friend stick to an abstinence choice and gave an example of how each one could be applied to the situation.

Saying NO

Directions: Fill in the "You" lines, using clear NO statements, alternative actions and delay tactics. Use at least 1 of each type of refusal skill.

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You and your partner have been going out for more than 6 months. You like him/her a lot. You're in love, but you know you're not ready to have sex. After a date, you begin kissing. You sit up and move away.

Your Partner: "What's the matter?"
You:
Your Partner: "What do you mean? If you really love me, show me." You:
Your Partner: "We can stop before anything happens." You:
Your Partner: "We've been going out for 6 months. Everyone expects it." You:

Lesson 4 **Avoiding Pregnancy**

Overview

In this lesson, students learn about using birth control to avoid unintended pregnancy. After examining the potential negative consequences of becoming a teen parent, they work in small groups to research and learn about particular methods of birth control. Students convene in larger groups to teach each other about the

National Health Education Standards

Standard 1:
Comprehending Concepts
Performance Indicator
1.12.1: Predict how healthy
behaviors can affect health
status.

various methods, and then participate in a class discussion to review main points. To summarize and assess their knowledge, students read several scenarios about sexually active couples and suggest the best birth control method(s) for each one.

Time: 60–90 minutes

Note: If time is limited, the assessment activity sheet may be completed as homework.

Lesson Objectives

Students will be able to:

- **1.** Analyze the emotional, social, physical and financial effects of being a teen parent.
- 2. Analyze different birth control options.
- **3.** Explain the importance of using contraceptives correctly and consistently to reduce risk of pregnancy.
- **4.** Explain the importance of contraceptive counseling and services if sexually active.

Materials & Preparation

Prepare

• Review the questions in the Anonymous Question Box that relate to teen parenthood and birth control, and prepare to answer any that aren't covered in the Teaching Steps for this lesson.

- Have **Birth Control: Things to Think About** (Slide 2), or make a transparency, if needed.
- Review your school and district guidelines around discussing birth control in the classroom and the Birth Control Fact Sheets
 (Masters 5A–J) to select the methods you'll cover in this lesson.
 (Note: A fact sheet is included on emergency contraception. If you decide to use this sheet, be sure to emphasize that emergency contraception is not to be used as a regular birth control method, but should be used only when another method fails or rape is involved.)
- Hang 4 sheets of chart paper around the room. Title them "Emotional," "Social," "Physical" and "Financial."
- Decide if you'll allow students to conduct independent research into their assigned birth control methods through using the Internet or calling a clinic or pharmacy, and prepare a list of approved websites or phone numbers as appropriate.

Copy

• **Birth Control Fact Sheets** (Masters 5A–J), enough for each student to have a sheet on one of the methods to be covered.

Review

- Consequences of Becoming a Teen Parent, page 62.
- Birth Control Guided Notes (Student Workbook page, 9-12).
- Birth Control Choices (*Student Workbook* pages 13–14), Birth Control Choices *Key*, pages 63–64, and Scoring Rubric, page 216.

Health Terms

Review the teaching steps, slide, masters and activity sheets for any terms or concepts your students may not know, and be prepared to explain them. Examples:

- abstinence
- birth control
- cervix
- condom
- consistent
- contraception
- Depo-Provera

- ejaculate
- endometrial cancer
- HIV (human immunodeficiency virus)
- hormone
- Implanon
- IUD (intrauterine device)

Health Terms (continued)

- ovaries
- · over-the-counter
- PID (pelvic inflammatory disease)
- prescription
- semen
- sexual intercourse
- sperm

- spermicide
- STD (sexually transmitted disease)
- suppository
- torso
- uterus
- vagina

Support for Diverse Learners

To ensure student success with comprehending concepts:

- Pre-teach new concepts and terms. Write new terms on the board.
 Frequently use verbal checks for comprehension.
- Reinforce the concept of consequences in relation to sexual activity.
- Teach a mini-lesson using visual aids of male and female anatomy to discuss anatomy and birth control methods.

To ensure student success with reading:

 Allow students to work in small groups to read about each of the 10 birth control methods. Use index cards to make a matching game for students to identify the effectiveness, function and application of each method.

To ensure student success with writing:

- Have students create "consequence" cards. They should write each
 consequence on a separate card, tape the consequence on the
 appropriate chart (Emotional, Social, etc.) and justify why it's related
 to that influence.
- Allow students to complete the Exit Ticket by discussing their answers with you, a classroom aide or a peer.

Introduction

Note: Some teen parents may have very positive feelings about being a mother or father, and even feel that their child is the best thing that ever happened to them. If you have a student who's already a teen parent, talk privately before teaching this lesson to see if this student would be willing to share during the lesson some of the difficulties he or she has experienced from being a teen parent. Be sure to acknowledge any positive elements of his/her experience, but explain that the goal of the lesson is to help encourage other students to keep from getting pregnant or fathering a child.

Get students ready for learning

Transition

In the last lesson, you learned about some of the risks or consequences of becoming sexually active. On a piece of paper, list as many of those consequences as you can in 1 minute.

Allow students to focus and work quietly. Call time after 1 minute and have students each read one of the consequences they described until there are no new ideas to share.

Debrief

How many of you were able to talk with a parent or another family member about sexual responsibility? Why do you think it's important for people to take responsibility for their sexual behavior?

Take a few minutes to follow up on students' experiences with taking the Time to Talk: Sexual Responsibility family sheet home and the talks they had with their parents or other family members.

Motivate

One of the potential consequences when a man and woman have sexual intercourse is becoming pregnant or getting someone pregnant. Form a group with 2 or 3 other people and share at least 3 ways someone's life would change if she got pregnant, or he fathered a child, and became a teen parent in the next year.

Put students into small groups of 3 or 4 to share. Circulate as groups work to be sure the sharing is appropriate. Then call on groups to report one change they identified. Make a list on the board, including both positive and negative changes, as students share.

Teaching Steps

Note: Throughout this lesson, be prepared to respond to student comments that minimize the effects of teen pregnancy or parenthood, e.g., "If I got pregnant, I'd get an abortion," "I'd just put the baby up for adoption," or "My life wouldn't change because my mom would take care of the baby." Acknowledge that there are other ways of dealing with a pregnancy, and that support from family and friends can make it easier, but be sure to point out the possible consequences of those other options, including regrets or physical complications, and stress that, even with support, becoming a teen parent can limit options and complicate a teen's life in many ways.

■ Teach about effects of becoming a teen parent

Create

In the last class, one of the things we talked about was responsibility. Some of the changes you mentioned have to do with the responsibilities parents have toward their children. Now work with a partner to list as many responsibilities parents have as you can think of in 1 minute.

Give pairs 1 minute to come up with their lists.

Becoming a parent—no matter when you do it—involves a lot of changes and responsibilities. It can affect many areas of your life. Let's take a look at this in more detail.

Point out the pieces of chart paper and read the titles aloud.

The changes and responsibilities that come with being a parent can affect a teen's life emotionally, socially, physically and financially. With your partner, you'll go to each of these pieces of paper and copy the things from your list that relate to this area. Some ideas might relate to more than one area. For example, if becoming a parent affects a teen's ability to stay in school, this could have emotional, social and financial consequences.

If one of your ideas has already been listed by someone else, just put a star by it. As you go to each station, if you think of additional ways a teen parent's life would change in this area, you can add those ideas to the group list as well.

Assign each of the pairs to one of the sheets of chart paper to start.

Then allow time for pairs to circulate and add the ideas from their lists to

the various group lists. You may want to signal that it's time to move to the next station by clapping your hands or ringing a bell.

After students have finished writing their ideas, review the lists. Note any items that are starred, which means more than one pair came up with that idea. Add any consequences students may not have thought of to the lists, using the Consequences of Becoming a Teen Parent teacher page as a guide.

Ask & Discuss

For each of the areas listed on one of the chart papers—emotional, social, physical and financial—ask students the following questions.

- How would being a parent interfere with this area of a teen's life?
- How would being a parent enhance or improve this area of life?

Allow students to respond to the questions and discuss their ideas.

Summarize

Parenthood is a lifelong commitment. Providing clothing, food, shelter, education and medical care are some of the basic responsibilities parents have toward their children. Parenting can be very fulfilling when people have the maturity, emotional support and financial resources to be ready for it. But parenting is also challenging. Having a baby as a teenager can be emotionally, socially, physically and financially difficult.

Teach about birth control methods

Explain

When a person makes the choice to become sexually active, avoiding unintended pregnancy is a very important responsibility. Even teens who are not currently sexually active need to understand different methods of preventing a pregnancy and consider their birth control options so they'll be ready to prevent pregnancy in the future. You're going to learn about and compare different birth control methods.

Ask & Discuss

What kinds of questions do you think a person needs to consider when choosing a birth control method?

Allow students to respond to the question and discuss their ideas.

Prepare

Show the Birth Control: Things to Think About slide. Review the questions, comparing them to the list students created.

State

When a person is ready to decide on a birth control method, he or she will want to ask these questions:

Questions About Facts

- · How does this method work?
- How effective is it?
- Where do you get it?
- Will it help protect from HIV and other STDs as well as pregnancy?
- Can partners use it together?
- Can a person use it alone if the partner won't help?

Personal Questions

- · How easy will this method be for me to get?
- How easy will this method be for me to use?
- · Does this method fit with my personal or family's values?

 Does this method fit with my religious and moral beliefs?

Complete & Share

Put students into groups with as many members as the number of birth control methods you're covering.

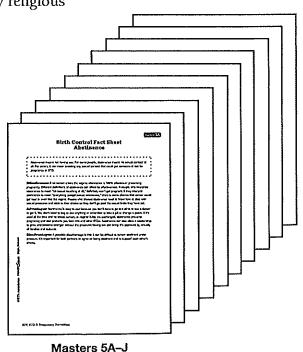
Distribute a set of the Birth

Control Fact Sheets to each group, and assign or allow each member to choose one of the methods and its corresponding Birth Control

Fact Sheet to study.



Slide 2



HIV, STD & Pregnancy Prevention

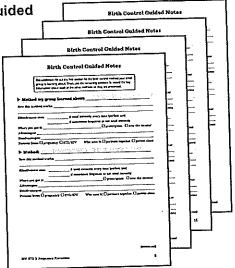
Then direct students to turn to Birth Control Guided

Notes on page 9 of the Student Workbook.

Now you're going to have the chance to become an expert on a particular birth control method. Work on your own to read about your assigned method and find the answers to the questions. Fill in the name of your assigned method in the first section on the Birth Control Guided Notes. Complete the notes for this method as you

learn about it.

Allow time for group members to read about and/or research their birth control method and complete the Guided Notes on it.



Workbook pages 9-12

Then explain that each student will present the information about his or her assigned method to the group, while the group records the information in the remaining sections of the Birth Control Guided Notes.

While students are presenting the methods in their groups, circulate to monitor progress on the completion of the Birth Control Guided Notes.

Review

After each group has recorded notes on all the birth control methods, quickly review key points for each method. Clarify the difference between perfect and typical use and the corresponding effectiveness rates, and be sure students understand which methods can be obtained over the counter and which require a prescription.

Explain

Now that you know the facts about different methods of birth control, you can ask yourself the more personal questions to decide on a method that would work for you once you decide to become sexually active. People have different reasons for preferring one type of birth control over another. For best results, people should choose a method they like, can get and feel comfortable using, and one that fits with their personal values and beliefs. That way, they'll be more likely to use it correctly every single time-and that's the best way to prevent a pregnancy. Even highly effective methods don't work if people don't use them correctly all the time.

Getting professional counseling around birth control and services to obtain birth control is one important responsible action people who choose to be sexually active can take. Going to a doctor or clinic can help ensure that people find the birth control method that will work best for them. Remember that some birth control methods require a prescription or have to be inserted by a health care provider.

Community Connection

Invite a health care provider or counselor to discuss birth control options and show examples of each, as appropriate and allowed by your school policies.

Summarize

The most important thing to remember about birth control is that it needs to be used correctly and *consistently*. This means using it every time a man and woman engage in sexual intercourse. You can use what you've learned today, along with professional counseling and services from a health care provider, to make an informed choice about the method that might be right for you.

Assessment & Closure

Students demonstrate learning

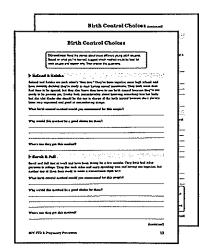
Complete

You're now going to have a chance to put your knowledge about birth control into practice.

Direct students to turn to Birth Control
Choices on page 13 of the Student Workbook.
Review the directions and allow time for
students to complete the activity sheet. (Note:
It may be assigned as homework, if needed.)

Exit Ticket

On a piece of paper, write about how becoming a teen parent would affect your life emotionally,



Workbook pages 13-14

socially, physically and financially. Be sure to describe at least 1 effect in each of those areas. Then explain which effect would be most difficult for you and why. Be specific. Be sure to put your name on your paper and hand it in before you leave class.

Write the criteria for completing the Exit Ticket on the board and allow time for students to complete the assignment.

End the lesson

Review

Allow time at the end of class to read and answer questions from the Anonymous Question Box that relate to teen parenthood and birth control. Use the questions as a way to review key concepts taught in the lesson, and provide answers for any relevant questions that weren't covered.

Close

Remember, there's no single method of birth control that works equally well for everyone. It's important to make an informed choice about the method that's right for you so that you can protect yourself when and if you decide to become sexually active.

What's the only birth control method that's 100% effective?

Allow students to respond until someone says "abstinence."

Assess

Collect students' Birth Control Choices activity sheets and Exit Tickets and evaluate their work for this lesson.

Assessment Evidence
Objective 1 Students analyzed the emotional, social, physical and financial effects of being a teen parent by: Completing the Exit Ticket.
Objective 2 Students analyzed different birth control options by: Completing the Birth Control Choices activity sheet.
Objective 3 Students explained the importance of using contraceptives correctly and consistently to reduce the risk of pregnancy by: Completing the Birth Control Choices activity sheet.
Objective 4 Students explained the importance of contraceptive counseling and services if sexually active by: Completing the Birth Control Choices activity sheet. (Scoring Rubrics, page 216)

Student Journal

Lesson 4: Avoiding Pregnancy

Health terms

abstinence
birth control
cervix
condom
consistent
contraception
Depo-Provera

ejaculate

endometrial cancer

HIV (human immunodeficiency virus)

hormone

Implanon

IUD (intrauterine device)

ovaries

over-the-counter

PID (pelvic inflammatory disease)

prescription

semen

sexual intercourse

sperm

spermicide

STD (sexually transmitted disease)

suppository

torso

uterus

vagina

Journal entry	
List as many risks or consequences of b	ecoming sexually active as you can
in 1 minute.	
Birth Control: Things to Thi	nk About
Questions about facts:	
Questions about facts:	
Add and the second seco	
Personal questions:	

(continued)

Student Journal Lesson 4: Avoiding Pregnancy (continued) Class discussion notes

Teacher Page

Consequences of Becoming a Teen Parent

Emotional

- More likely to experience stress.
- · Less likely to stay together as a couple.
- May feel sad or upset about missing out on things their friends are doing.

Social

- Less time to spend with friends.
- Less in common with their friends, which may cause them to drift apart.

Physical

- More likely to have babies with health problems.
- May have more complications during the pregnancy and birth.
- Feel tired from caring for the baby.

Financial

- Less likely to finish high school.
- May have fewer opportunities in the future because of less education.
- Can find it hard to earn enough money to provide care for the child.
- More likely to lose financial support from their parents.

Teacher Page

Birth Control Choices *Key*

Directions: Read the stories about these different young adult couples. Based on what you've learned, suggest which method would be best for each couple and explain why. Then answer the questions.

▶ Roland & Keisha

Roland and Keisha are each other's "first love." They've been together since high school, and have recently decided they're ready to start having sexual intercourse. They both want their first time to be special, but they also know they have to use birth control because they're not ready to be parents yet. Keisha feels uncomfortable about inserting something into her body, but she also thinks she should be the one in charge of the birth control because she's always been very organized and good at remembering things.

What birth control method would you recommend for this couple?

Birth control pills (Patch might also be a good choice.)

Why would this method be a good choice for them?

They don't need to worry about STD since neither of them has had other partners. Keisha is motivated and disciplined enough to remember to take a pill at the same time every day.

Where can they get this method?

<u>Keisha will have to see a health care provider to get a prescription for the pills (patch).</u>

Sarah & Jeff

Sarah and Jeff met at work and have been dating for a few months. They both had other partners in college. They like each other and enjoy spending time and having sex together, but neither one of them feels ready to make a commitment right now.

What birth control method would you recommend for this couple? Condoms

Why would this method be a good choice for them?

They both have had other partners and aren't in a committed relationship, so STD/HIV is a risk for them. Condoms are the only method besides abstinence that will also protect them from STD.

Where can they get this method?

Either of them can buy condoms at a drug store. They may be able to get low-cost or free condoms from a clinic or family planning agency.

(continued)

Teacher Page

Birth Control Choices Key

(continued)

▶ Mei & Jason

Mei and Jason are in their early 20s. They've both been in other relationships before, so they got tested for HIV and other STD when they started dating. Once they knew that neither of them had HIV or another STD, they felt ready to start a sexual relationship with each other. They both like being able to be spontaneous. Mei doesn't want to have to worry about taking a pill every day, and Jason told Mei he doesn't really like using a condom.

They both like being able to be spontaneous. Mei doesn pill every day, and Jason told Mei he doesn't really like	n't want to have to worry about taking a using a condom.
What birth control method would you recommend for IUD or Implanon	this couple?
Why would this method be a good choice for them? As long as they are faithful to each other they don'	t need to worry about STD since they've
been tested. Neither of them wants to have to plan method that's always in place and doesn't need to	
Where can they get this method? Mei will have to see a health care provider to have the Questions	ne IUD or Implanon inserted.
What would you say to convince all these couples correctly and consistently (every time)? You need to use whatever method you choose the want to avoid pregnancy. If you're careless or so likely to get pregnant.	e right way and use it every time if you
Why is it important for people who are thinking or counseling and services around birth control? An unintended pregnancy can change a person's	life in many ways. There can be
emotional, social, physical and financial conseques sexually active need to find out about different i	
choose one that will be easy for them to use and that they'll use every time.	Self-Check ☐ I recommended the best birth control method for all 3 couples and explained why it's a good choice. ☐ I explained the importance of using birth control correctly and consistently. ☐ I explained the importance of getting counseling and services around birth control.

Birth Control: Things to Think About

When a person is ready to decide on a birth control method, he or she will want to ask these questions:

Questions About Facts

- How does this method work?
- How effective is it?
- Where do you get it?
- Will it help protect from HIV and other STDs as well as pregnancy?
- · Can partners use it together?
- Can a person use it alone if the partner won't help?

Personal Questions

- · How easy will this method be for me to get?
- · How easy will this method be for me to use?
- Does this method fit with my personal or family's values?
- Does this method fit with my religious and moral beliefs?

Student Journal

Lesson 4: Avoiding Pregnancy

Health terms

abstinence birth control

cervix

condom

consistent

contraception

Depo-Provera

ejaculate

endometrial

cancer

HIV (human immunodeficiency

virus)

hormone

Implanon

IUD (intrauterine

device)

ovaries

over-the-counter

PID (pelvic inflammatory disease)

prescription

semen

sexual intercourse

sperm

spermicide

STD (sexually transmitted

disease)

suppository

torso

uterus

vagina

Journal e	entry
List as many in 1 minute.	risks or consequences of becoming sexually active as you can

Birth Co	ntrol: Things to Think About
Questions at	oout facts:
Personal que	estions:

Ctudent lournel
Student Journal
Lesson 4: Avoiding Pregnancy (continued)
Class discussion notes

Birth Control Fact Sheet Abstinence

Abstinence means not having sex. For some people, abstinence means no sexual contact at all. For others, it can mean avoiding any sexual contact that could put someone at risk for pregnancy or STD.

Effectiveness: If no semen enters the vagina, abstinence is 100% effective in preventing pregnancy. Different definitions of abstinence can affect its effectiveness. A couple who interprets abstinence to mean "no sexual touching at all," definitely won't get pregnant. If they interpret abstinence to mean "everything except sexual intercourse," there is some chance that semen could get near or even into the vagina. People who choose abstinence need to know how to deal with sexual pressures and stick to their choice so they don't go past the sexual limits they have set.

Advantages: Abstinence is easy to use because you don't have to go to a clinic or see a doctor to get it. You don't need to buy or use anything or remember to take a pill or change a patch. If it's used all the time and no blood, semen, or vaginal fluids are exchanged, abstinence prevents pregnancy and also protects you from HIV and other STDs. Abstinence can also allow a relationship to grow and become stronger without the pressures having sex can bring. It's approved by virtually all families and cultures.

Disadvantages: A possible disadvantage is that it can be difficult to remain abstinent under pressure. It's important for both partners to agree on being abstinent and to support each other's choice.

Birth Control Fact Sheet Condoms

A condom is a thin latex or plastic sheath that fits over an erect penis to catch the semen when the man ejaculates (comes). It keeps the sperm from entering the woman's body.



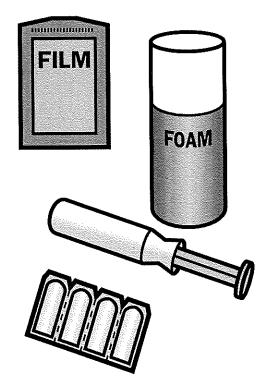
Effectiveness: If condoms are used very carefully every time a person has sex, they are 98% effective in preventing pregnancy. But if people aren't very careful every time, the effectiveness drops to 85%.

Advantages: Condoms can be bought in drugstores. Sometimes people can get them for free at family planning clinics. Anyone can buy them. They're easy to use and carry, so they can be readily available when needed. Partners can put the condom on together. Condoms help protect people from HIV and other STDs. Condoms come in different styles, so people can find one they like.

Disadvantages: Condoms must be put on during sex, and some couples find this difficult to do every time. Couples need to use a new condom every time they have sex. Some say a condom reduces sexual feelings. Some people are allergic to latex and should use a plastic condom. Condoms are easiest to use with a partner's cooperation.

Birth Control Fact Sheet Foam, Suppositories & Film

These materials contain spermicides, chemicals that kill sperm. They are put into the vagina before having sex.



Effectiveness: If they are used carefully every time, they are 85% effective in preventing pregnancy. If they are not used carefully every time, they are only 71% effective.

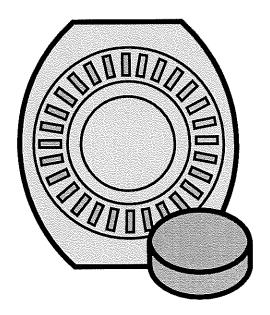
Advantages: Like condoms, foam, suppositories and film can be bought in drugstores or at clinics. Anyone can buy them. They're easy to use and carry. They can be used only when needed. A woman can insert them on her own or with help from her partner just before having sex.

Disadvantages: The material must be placed in the vagina just before sex. If too much time goes by before the couple has sex, more will have to be inserted. Foam can be messy, and the chemicals may irritate the vagina or penis. They don't protect people from HIV or other STDs.

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Birth Control Fact Sheet The Pill

Birth control pills are small tablets made of artificial hormones. They prevent pregnancy by stopping the ovaries from releasing an egg each month, and/or thickening the mucus in the cervix (the opening to the womb) so it's hard for sperm to enter the woman's uterus. They must be prescribed by a health care provider.



Effectiveness: Birth control pills are more than 99% effective in preventing pregnancy if they're used correctly. This means the woman has to remember to take a pill regularly and not miss any days. If the pills are forgotten or not used correctly, the effectiveness drops to 92%.

Advantages: Birth control pills are simple and easy to use, as long the woman remembers to take them daily. They don't interfere with sex. They can lessen the bleeding and cramping of heavy or painful menstrual periods and reduce the chances of pelvic inflammatory disease (PID), ovarian cancer and endometrial cancer (cancer of the lining of the uterus). A woman can use birth control pills without needing cooperation from her partner.

Disadvantages: Birth control pills must be taken every day whether the woman is having sex or not. A woman needs to be on the pill for about a month before she's protected. The pill causes few serious problems in young women, but its use is associated with a small chance of high blood pressure, blood clots, heart attack, and stroke, especially for women who smoke, so women who use the pill should get regular checkups. In some women use of the pill can lead to weight changes, moodiness and spotting between periods. The pill doesn't protect people from HIV or other STDs.

Birth Control Fact Sheet The Patch

The birth control patch is a thin plastic square that slowly releases artificial hormones into the body. The patch can be worn on the skin of the buttocks, stomach, upper outer arm or upper torso (but not on the breasts). A new patch is applied each week. It prevents pregnancy by stopping the ovaries from releasing an egg each month, and/or thickening the mucus in the cervix (the opening to the womb) so it's hard for sperm to enter the woman's uterus. It must be prescribed by a health care provider.



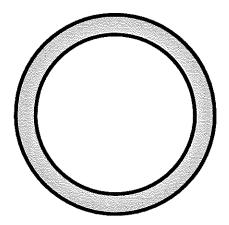
Effectiveness: The patch is more than 99% effective in preventing pregnancy when it's used correctly. This means the woman has to remember to wear the patch and to change it each week. If the patch is forgotten or not used correctly, the effectiveness drops to 92%.

Advantages: The patch is simple and easy to use, as long as the woman remembers to wear it and change it weekly. It doesn't interfere with sex. It can lessen the bleeding and cramping of heavy or painful menstrual periods. A woman can use the patch without needing cooperation from her partner.

Disadvantages: The patch must be worn every day, whether the woman is having sex or not. A woman needs to use the patch for about a month before she's protected. Like the pill, the patch causes few serious health risks for young women, but its use may be associated with a small chance of high blood pressure, blood clots, heart attack and stroke, especially for women who smoke, so women who use the patch should get regular checkups. In some women, use of the patch can lead to weight changes, moodiness and spotting between periods. The patch doesn't protect people from HIV or other STDs.

Birth Control Fact Sheet The Ring

The vaginal ring is a soft, flexible ring inserted into the vagina that slowly releases artificial hormones into the body. The ring is changed once a month. It prevents pregnancy by stopping the ovaries from releasing an egg each month, and/or thickening the mucus in the cervix (the opening to the womb) so it's hard for sperm to enter the woman's uterus. It must be prescribed by a health care provider.



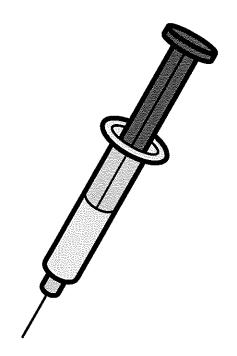
Effectiveness: The ring is more than 99% effective in preventing pregnancy when it's used correctly. This means the woman has to remember to insert the ring and to change it each month. If the ring is forgotten or not used correctly, the effectiveness drops to 92%.

Advantages: The ring is simple and easy to use, as long as the woman remembers to insert it and change it monthly. It doesn't interfere with sex. It can lessen the bleeding and cramping of heavy or painful menstrual periods. A woman can use the ring without needing cooperation from her partner.

Disadvantages: The ring must remain in the vagina all the time, whether the woman is having sex or not. A woman needs to use the ring for about a month before she's protected. Like the pill and the patch, the ring causes few serious health risks for young women, but its use may be associated with a small chance of high blood pressure, blood clots, heart attack and stroke, especially for women who smoke, so women who use the ring should get regular checkups. In some women, use of the ring can lead to weight changes, moodiness and spotting between periods. The ring doesn't protect people from HIV or other STDs.

Birth Control Fact Sheet Depo-Provera

Depo-Provera is a shot of artificial hormones that must be injected by a health care provider. Like the hormones in birth control pills, the hormones in the shot stop the ovaries from releasing an egg each month and thicken the mucus in the cervix (the opening to the womb) so it's hard for sperm to enter the woman's uterus.



Effectiveness: Depo-Provera is more than 99% effective in preventing pregnancy.

Advantages: Each Depo-Provera shot lasts 3 months. This method doesn't interfere with sex and often lessens the bleeding and cramping associated with periods. Depo-Provera is safe to use while breastfeeding and may reduce the chance of endometrial cancer (cancer of the lining of the uterus). A woman can get the shot without needing cooperation from her partner.

Disadvantages: A woman must see her health care provider regularly for shots. The shot causes few serious problems for most women. It may lead to weight changes or moodiness. It may cause heavy, light or irregular periods. Long-term use may temporarily reduce bone density in some women. A woman who wants to get pregnant may not be able to for several months after stopping the shots. The shot doesn't protect people from HIV or other STDs.

Birth Control Fact Sheet Implanon

Implanon is a tiny plastic rod of artificial hormones that is inserted under the skin on the inside of a woman's upper arm. The rod slowly releases hormones into the body. The rod and the scar from its insertion are nearly invisible. Implanon lasts for 3 years. It prevents pregnancy by stopping the ovaries from releasing an egg each month, and/or thickening the mucus in the cervix (the opening to the womb) so it's hard for sperm to enter the woman's uterus. It must be prescribed and inserted by a health care provider.



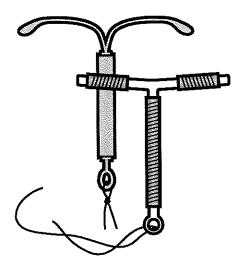
Effectiveness: Implanon is more than 99% effective in preventing pregnancy. Because it's always in place, the woman doesn't need to remember to take a pill or change a patch or ring.

Advantages: Implanon is one of the most effective birth control methods available. It's simple and easy to use, is always in place and lasts for 3 years. It doesn't interfere with sex. A woman can use Implanon without needing cooperation from her partner.

Disadvantages: Minor surgery is required to insert and remove the rod. The hormones are always in the body, whether the woman is having sex or not. Implanon causes few serious health risks for most women, but should not be used by women who have a history of liver disease, blood clots or breast cancer. It may cause spotting between periods, lighter periods, longer periods or no periods at all. Implanon doesn't protect people from HIV or other STDs.

Birth Control Fact Sheet IUD

IUD stands for intrauterine device. It's a small piece of plastic, often shaped like a T, that is inserted into the uterus. Some IUDs are wrapped with copper wire. They prevent pregnancy by affecting the way the sperm move and preventing sperm from fertilizing an egg. Other brands of IUDs release hormones that prevent pregnancy the same way as the pill. An IUD can stay in the uterus for 5 to 10 years. It must be inserted and removed by a health care provider.



Effectiveness: The IUD is more than 99% effective in preventing pregnancy. Because it's always in place, the woman doesn't need to remember to take a pill or change a patch or ring.

Advantages: The IUD is one of the most effective birth control methods available. It's always in place and some types can provide protection against pregnancy for up to 10 years. It doesn't interfere with sex. A woman can use an IUD for birth control without needing cooperation from her partner.

Disadvantages: The copper-T IUD may cause more bleeding and cramping during periods, or spotting between periods. An IUD doesn't protect people from HIV or other STDs. It needs to be removed by a health care provider—a woman can't just stop using it on her own.

Birth Control Fact Sheet Emergency Contraception

Emergency contraception (EC) methods can be used to help prevent a pregnancy after a woman has unprotected sex. EC works best when it's used right away and no later than 3 to

5 days after sex.

EC prevents pregnancy by stopping the egg from being released and/or by changing the lining of the uterus so the egg can't implant and grow. There are 2 types of emergency contraception available in the United States: emergency contraceptive pills, which contain artificial hormones, and the copper-T IUD, a device inserted into the uterus by a health care

nrovider

Emergency contraception is not a regular method of birth control. It should be used only in

an emergency, when a regular method of birth control has failed, or in cases of rape.

Effectiveness: When taken correctly and used no later than 3 to 5 days after sex, emergency contraceptive pills reduce the chances of pregnancy by 75 to 89%. The copper-T IUD reduces the chances of pregnancy by 99%.

Advantages: EC can lessen the chances of pregnancy if it's used within 5 days after having unprotected sex. Even women who can't use birth control pills on a regular basis may be able to use EC pills safely on a one-time, emergency basis. The IUD can be left in place for up to 10 years as a long-term method of birth control. Women age 17 and older can get the pills from a pharmacist without a prescription.

Disadvantages: Some women have nausea and vomiting when they take EC pills. The IUD may cause increased menstrual bleeding, pain and/or cramps at first, and spotting between periods. Neither form of EC protects women from HIV or other STDs. Women younger than age 17 who need EC pills must go to a health care provider for a prescription. EC cannot be used as a regular method of birth control.

Directions: Fill out the first section for the birth control method your small group is learning about. Then, use the remaining sections to record the key information about each of the other methods as they are presented.

► Method my group learned about: How this method works:				
Effectiveness rate:	if used co	orrectly every time (perfect use)		
	if someti	mes forgotten or not used correctly		
Where you get it:		prescription over the counter		
Disadvantages:				
Protects from: \Box pregnanc	y □STD/HIV	Who uses it: \square partners together \square person alone		
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Effectiveness rate:	if used	correctly every time (perfect use)	
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Advantages:			
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	if some	etimes forgotten or not used correctly	
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Disadvantages:			
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(continued)

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Advantages:				
Disadvantages:				
Protects from: pregnancy	□ STD/HIV	Who uses it:	partners toge	ther person alone
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Advantages:				
Disadvantages:				
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Where you get it:			\square prescription	over the counter
Advantages:				
Disadvantages:				
Protects from: pregnanc	y STD/HIV	Who uses it:	\square partners tog	ether \square person alone

► Method:			
How this method works:			
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	if sometir	nes forgotten or not used correctly	7
Where you get it:		\square prescription \square c	ver the counter
Advantages:			
Disadvantages:			
		Who uses it: \square partners together	person alone
▶ Method:			
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Protects from: pregnancy	⊓STD/HIV	Who uses it: \square partners togethe	r 🗆 person alone

Lesson 8 Preventing Dating Violence

Overview

In this lesson, students are introduced to the problem of teen dating violence. They define dating violence and examine causes and motivations for this type of violence, including issues of power and control between partners. They compare and contrast healthy and unhealthy dating relationships and identify acts of dating violence to practice recognizing warning signs. After discussing barriers to getting help, they review for help with dating violence.

Time: 60–90 minutes

Note: If time is limited, the assessment activity sheet may be completed as homework.

Lesson Objectives

Students will be able to:

- **1.** Summarize the qualities of a healthy dating relationship.
- **2.** Describe warning signs of dating violence.
- **3.** Analyze how power and control differences in dating relationships can contribute to violence.
- 4. Explain why it's wrong to coerce another person into having sex.
- **5.** Explain why a person who has been sexually assaulted or raped is not at fault.

National Health Education Standards

Standard 1: Comprehending Concepts

Performance Indicator
1.12.1: Predict how healthy behaviors can predict health status.

Performance Indicator 1.12.5: Propose ways to reduce or prevent injuries and health problems.

Performance Indicator 1.12.7: Compare and contrast the benefits of and barriers to practicing a variety of health behaviors.

Performance Indicator 1.12.9: Analyze the potential severity of injury or illness if engaging in unhealthy behaviors.

Practicing Health-Enhancing Behaviors Performance Indicator 7.12.1: Analyze the role of individual responsibility for enhancing health.

Standard 7:

Materials & Preparation

Prepare

- Make 3 signs that read Green, Yellow, Red, and place them along one
 wall of the classroom with space between. You could use colored
 circles, like those in a traffic light.
- · Have tape.
- Have Understanding Dating Violence (Slide 14) and Healthy Vs.
 Unhealthy Dating Relationships (Slide 15), or make transparencies, if needed.
- Review national and/or local resources for help with dating violence and select one or two to share with students. Examples:
 - National Dating Abuse Helpline: 1-866-331-9474, www.loveisrespect.org
 - National Domestic Violence Hotline: 1-800-799-SAFE (7233)

Copy

• **Dating Scenarios** (Master 6), enough to have at least 1 scenario strip for each pair of students.

Review

- Dating Scenarios Key, pages 150-152.
- My Guide to Preventing Dating Violence (Student Workbook page 18), and Scoring Rubric, page 322.

Health Terms

Review the teaching steps, slides, master, teacher page and activity sheet for any terms or concepts your students may not know, and be prepared to explain them. Examples:

- emotional abuse
- homicide
- physical abuse
- psychological abuse
- rape
- sexual abuse

- · sexual assault
- stalking
- STD (sexually transmitted disease)
- warning sign

Support for Diverse Learners

To ensure student success with comprehending concepts:

- Pre-teach new concepts and terms. Write new terms on the board.
 Frequently use verbal checks for comprehension.
- Make copies of the Understanding Dating Violence and Healthy vs.
 Unhealthy Dating Relationships slides and distribute to students.
- Make copies of the Dating Scenarios master for students and have them use colored markers to code each one as a green-light, yellowlight or red-light situation.

To ensure student success with reading:

Read the Dating Scenarios aloud one at a time to the class, and have students raise a different number of fingers (1 = red; 2 = yellow; 3 = green) to categorize each one.

To ensure student success with writing:

- Pair students with stronger writing skills or peer tutors with students who may need help completing the My Guide to Preventing Dating
 Violence activity sheet, or allow students to complete the activity sheet as homework with a parent or guardian.
- Allow students to record their answers, or draw or use print or digital images to depict their responses.

To extend the learning activities:

- Have student pairs discuss movies, videos or television programs that have depicted dating violence. Ask students to write/draw/record responses to these questions:
 - Who was involved in the dating violence?
 - What happened? What type of dating violence was it?
 - Did anyone else see or know about the violence between the partners?
 - —What could have been done to prevent the violence or to stop it?
- Consider using a PBS "In the Mix" episode and discussion guide to help students safely discuss the issue. The program "Dating Violence: Twisted Love" provides current statistics on dating violence, advice, points of view, legal rights, etc.

Introduction

Get students ready for learning

Transition

On a piece of paper, describe a dating relationship you or someone you know is in or has been in that you think is a healthy relationship. What qualities or things about the relationship make it healthy?

Allow students to focus and work quietly for a minute or two. Call on student volunteers to share what they wrote.

(Note: Throughout this lesson, be aware that some students may be personally involved in abusive dating relationships or have friends who are experiencing dating violence, and be alert to signs of student distress around this issue.)

Motivate

Do you think teens, both males and females, need to be concerned about violence in their dating relationships? Why or why not?

Allow students to respond to the questions and discuss their ideas.

During this lesson you'll learn more about teen dating violence and why you need to know about it. You'll be talking about why this kind of violence happens, how you can recognize warning signs so you can avoid unhealthy relationships and what you can do if the problem happens to you or a friend.

Teaching Steps

Define dating violence

Survey

How would you define dating violence? What might it look like? How could it affect people?

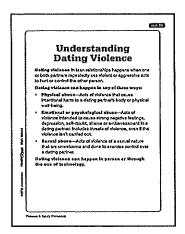
Call on student volunteers to share their definitions and ideas.

Prepare

Show the Understanding Dating Violence slide.

Explain

Dating violence in teen relationships happens when one or both partners repeatedly use violent or aggressive acts to hurt or control the other person. Dating violence can happen in 3 ways. It can be physical, emotional or psychological, and sexual.



Slide 14

- *Physical abuse* consists of acts of violence that cause intentional harm to a dating partner's body or physical well-being.
- *Emotional* or *psychological abuse* consists of acts of violence intended to cause strong negative feelings, depression, self-doubt, shame or embarrassment in a dating partner.
- *Sexual abuse* consists of acts of violence of a sexual nature that are unwelcomed and done to exercise control over a dating partner.

Dating violence can happen in person or through the use of technology. Let's talk about these different forms of dating violence.

Write each type of dating violence on the board as you discuss it: physical abuse, emotional/psychological abuse, sexual abuse. Ask students to identify acts of dating violence that fit each type, including abuse committed through the use of technology. Use the cues below to support and summarize student responses.

Ask & Discuss

In what ways could dating partners **physically** abuse each other? How could someone hurt or control a partner physically?

Allow students to respond to the questions and discuss their ideas. List types of physical abuse on the board. Examples include:

- · Hitting, slapping or beating
- · Shoving, tripping or kicking
- Grabbing, pinching or shaking
- Choking or strangling

Lesson 8 • Preventing Dating Violence

- Injuring with a weapon
- Forcing a partner to use alcohol or other drugs
- Committing homicide (murder)

In what ways could dating partners **emotionally** or **psychologically** abuse each other? How could someone hurt or control a partner emotionally or psychologically?

Allow students to respond to the questions and discuss their ideas. List types of emotional/psychological abuse on the board. Examples include:

- Humiliating, belittling, or demeaning a partner
- Isolating a partner from family or other friends
- Calling names, threatening or spreading rumors
- Stalking or constantly monitoring someone
- Threatening to breaking up with a partner
- Threatening to hurt themselves in order to control a partner
- Threatening to hurt or use a weapon against a partner
- Communicating threats online or via text or e-mail
- Posting hurtful comments online

In what ways could dating partners **sexually** abuse each other? How could someone hurt or control a partner sexually?

Allow students to respond to the questions and discuss their ideas. List types of sexual abuse on the board. Examples include:

- Rape or sexual assault
- Pressuring a date to have sex
- Pressuring a partner to engage in unwanted sexual acts
- Harassing someone verbally with sexual remarks
- Threatening to damage someone's reputation or blackmail someone
- Posting demeaning or sexual images of a partner online

Summarize

All of these forms of dating violence are about controlling or hurting another person. They don't have anything to do with caring, love or sexual desire.

Ask & Discuss

Sgrinsb Do you think people have a right to expect sex from someone they're

If sexual abuse happens, whose fault is it?

Allow students to respond to the questions and discuss their ideas.

Summarize

has been raped or sexually assaulted is never at fault. person to have sex. It's also important to recognize that a person who refuse sexual contact or activities. It's wrong and illegal to force another It's very important to understand that a person always has the right to

səjdwexə | Students analyze dating relationship

Explain

to students. Point out the Green-Yellow-Red continuum on the wall of the classroom

description of a teen relationship. Your job is to decide where this of dating violence in each one. You and a partner will be given a Let's take a look at some examples of relationships and analyze the risk

relationship fits along this spectrum:

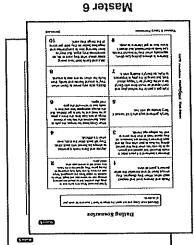
• If the relationship seems to have healthy qualities, give it a Green

• If you think you see strong warning signs or actual dating violence in Light.

 If you think there could be dating violence in the relationship, give it a Red Light.

Light. forward, you can put it under the Yellow both people need to be cautious going the future of this relationship and one or

Complete & Share



to read the descriptions of the relationships, piece of tape to each pair. Allow time for pairs Distribute at least 1 Dating Scenarios strip and Pair students or allow them to select partners. confer about where each belongs on the spectrum, and place their strips along the continuum.

Read the scenarios that have been placed by the Red Light. Ask students if they think any of the scenarios are misplaced, discuss and, if necessary, move the scenario strip to a more appropriate place on the continuum. Repeat the process for the scenarios placed around the Yellow and Green Lights. Use the **Dating Scenarios Key**, page 150, to help guide the placement of the scenarios along the continuum.

Note: If there are extra scenarios, read them aloud at this time and have the class decide where they should go along the continuum.

Contrast healthy and unhealthy dating relationships

Create

Think about the scenario you and your partner placed on the continuum and what qualities of the relationship described in the scenario influenced your placement of it.

Write the heading "Relationships" on the board, and make 2 columns underneath it. Label the left-hand column "Healthy" and the right-hand column "Unhealthy."

If you and your partner placed your scenario under the green light, what qualities about the relationship seemed healthy to you?

Call on student pairs who had a green-light scenario, and write their responses in the column labeled "Healthy."

If you and your partner placed your scenario under the red light, what qualities about the relationship seemed unhealthy or dangerous to you?

Call on student pairs who had a red-light scenario, and write their responses in the column labeled "Unhealthy."

If you and your partner placed your scenario under the yellow light, what qualities of the relationship made you put it there? Would you say these things were unhealthy qualities? Were there other qualities described about the relationship that seemed healthy?

Call on student pairs who had a yellow-light scenario, and write their responses in the appropriate column.

Can you think of any other relationship qualities that should go on these lists?

Allow students to share additional healthy and unhealthy qualities and place these on the lists based on class consensus.

Prepare

Show the Healthy vs. Unhealthy Dating Relationships slide. Review and use the descriptions on the slide to summarize qualities of the two types of relationships.

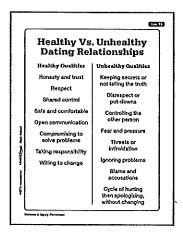
Explain

In healthy dating relationships, both partners:

- · Are honest with and can trust each other.
- Respect and value each other.
- Share control over decisions that affect the relationship.
- Feel safe and comfortable and can be themselves.
- Can communicate openly, even about tough topics.
- · Can compromise and solve problems in healthy ways.
- Take responsibility for their own feelings and actions.
- Are willing to change behaviors that hurt the partner or the relationship.

In unhealthy dating relationships, one or both partners:

- · May keep secrets or not tell the truth.
- Show disrespect or put down the other person.
- May try to control the other person or make all the decisions.
- Feel afraid, pressured or disrespected.
- May use threats or intimidation to get their way.
- Ignore problems until they hit a breaking point.
- Blame, accuse or say the other person is responsible for any problems in the relationship.
- May follow a cycle of hurting the other person physically or emotionally, then apologizing and acting nice, but not changing anything, so the violence happens again.



Slide 15

Summarize

Dating violence is less likely to happen in healthy dating relationships. It's more likely to happen in unhealthy ones.

Ask & Discuss

How do you think issues of power and control relate to healthy and unhealthy relationships? What role do power and control play in dating violence?

Allow students to respond to the questions and discuss their ideas.

Summarize

When partners struggle for power in the relationship or want to control the other person, violence is more likely. In a healthy relationship, the people share the power. They listen to each other, respect the other person's opinions, and make decisions together. If one partner tries to force his or her ideas or desires on the other, wants to make all the decisions, or becomes upset if the other person doesn't do what he or she wants, the relationship may be unhealthy.

Ask & Discuss

Based on the qualities of a healthy dating relationship, why is it wrong to trick, threaten or pressure another person into having sex?

Allow students to respond to the question and discuss their ideas.

Summarize

Sharing control over decisions that affect the relationship means that neither partner will force or pressure the other to do something he or she doesn't want to do. In a healthy relationship, the partners trust and respect each other. It's wrong to violate this trust and respect by tricking or manipulating a partner. Partners can't feel safe or comfortable in their relationship if either one uses threats or force against the other.

Identify warning signs of dating violence

Create

Based on the scenarios the class analyzed and the characteristics of unhealthy dating relationships, what would be some warning signs of potential dating violence? Work with your partner to come up with a list of things teens should look for that could indicate a chance of dating violence in a relationship.

Allow time for student pairs to come up with a list of warning signs. Then call on pairs to share one of the things they wrote. As pairs share, ask the other pairs if they have something similar on their lists. Make a master list of key warning signs on the board. Examples include:

- Keeping secrets or accusing the partner of keeping secrets
- · Being disrespectful or always putting the partner down
- · Trying to control what the partner does
- Feeling jealous of how the partner spends his or her time
- Deliberately saying hurtful things to a partner
- Threatening the partner
- · Blaming a partner for things
- Apologizing or acting nice after saying or doing something hurtful without changing the behavior in the future

Summarize

The presence of any of these characteristics could indicate the potential for dating violence.

Explore causes of teen dating violence

Ask & Discuss

Why do you think some teens resort to violence in their dating relationships?

Why do you think some teens allow themselves to be abused by the person who is supposed to care about them?

Allow students to respond to the questions and discuss their ideas.

Make a list of key points on the board. Help students group their ideas into categories. For example:

- Strong feelings—jealousy, anger, fear of losing a partner
- · Lack of social skills
- Confusion or mixed signals
- Power and control issues
- Desire for a relationship
- · Low self-esteem

- Absence of healthy role models
- Outside influences (e.g., alcohol and other drug use)

Ask students how each of these things can contribute to dating violence. Use the points below to help guide the discussion.

- Strong feelings. The feelings that come with being attracted to someone can be very strong. Good feelings of attraction, pleasure and love can often make people overlook early warning signs. Strong feelings of attraction can sometimes be confusing and lead to misunderstandings and communication problems. Some teens may experience jealousy for the first time. Some may be afraid of losing a partner. Some may have a hard time controlling their anger.
- Lack of social skills. Dating is a new experience for many teens. Teens are still learning to make good choices, communicate feelings appropriately and get help when they need it. Lack of experience and social skills can make violence in teen dating relationships more likely.
- Confusion or mixed signals. Abuse often follows a cycle of violence—an abusive partner may follow acts of violence with apologies, claims of love, and acts of kindness or affection. This can be confusing and make it easier for the abused partner to excuse the violent behavior.
- **Power and control issues.** Some teens want to feel in control or believe they have power over others. This can make a person more likely to be abusive in a dating situation. When there's a difference in power between partners, for example, if one is several years older than the other, dating violence may be more likely.
- **Desire for a relationship.** Liking and wanting to be with someone can be strong motivators to keep a relationship going even when it's not healthy. Some teens feel very protective of their relationships and being allowed to date, so they deny that abuse is happening.
- Low self-esteem. Teens who struggle with self-esteem issues may be more likely to tolerate abuse or even feel they deserve it.
- Absence of healthy role models. Teens may model their relationship on the relationships they see around them. If there's abuse among their family or friends, they may be more likely to accept dating violence or view it as a "normal" part of relationships.
- Outside influences. Violence is always more likely when alcohol or other drugs are being used. Being around others who are violent and having access to weapons can also make dating violence more likely.

Summarize

There are many reasons behind dating violence, for both perpetrators and targets. But it's very important to remember that nobody ever deserves or asks to be a target of dating violence—no matter what the circumstances are.

■ Teach about getting help for dating violence

Explain

Knowing what qualities to look for in a healthy relationship, recognizing the warning signs of an unhealthy or potentially violent relationship, and understanding some of the reasons behind dating violence can help you make healthy choices around dating. But relationships can be complex. Strong feelings of attraction can make it hard to see potential problems before they happen, or sometimes even while they're happening.

Ask & Discuss

Why do you think teens might stay in a violent or abusive dating relationship? What could get in the way of getting help?

Allow students to respond to the questions and discuss their ideas. Make a list of key points on the board. Be sure it includes:

- Fear of losing the partner
- Genuinely loving a partner in spite of the abuse
- Thinking they can fix or change the other person
- Living with the hope that things will change
- · Blaming themselves for the problems
- Feeling embarrassed
- Being afraid of being hurt or punished (or the partner hurting himself or herself) if they try to leave
- · Not knowing where to go for help

Summarize

- The choice to get help for or leave a violent dating relationship can be a hard one to make. The longer an abusive relationship goes on the stronger the barriers to getting help might become.
- Strong emotions can confuse a person and keep him or her from seeing a situation clearly or taking action.
- Often, the abusive partner isn't always abusive, and may apologize, act extra nice or give gifts after the incidents of abuse. This can also be confusing for the victim of the abuse.
- Fear of losing the relationship or the hope that things will change can keep someone in denial about the abuse.
- Sometimes the threat of violence keeps teens from telling others or asking for help.
- Teens who have used alcohol and drugs, become sexually active or have done embarrassing things online may be afraid to share the details of an abusive relationship.
- · Sometimes teens just don't know where to go for help.

Ask & Discuss

Why is it important for teens who are victims of dating violence to get help?

Allow students to respond to the question and discuss their ideas.

Summarize

Dating violence is serious and can have severe consequences. Teens who are emotionally abused in a dating relationship may feel afraid, lose confidence in themselves, or become anxious or depressed. Physical abuse can lead to severe or life-threatening injuries, or even murder. Rape, pregnancy and sexually transmitted disease (STD) can result from sexual abuse. Being in an abusive dating relationship as a teen can set up unhealthy patterns that continue throughout a person's life.

■ Identify sources of help for dating violence

Explain

The first step in getting help is admitting there's a problem that could result in serious consequences. As soon as you realize you feel threatened or afraid, or your partner hurts you in any way, get help. Most often, the safest and smartest thing for the abused partner to do is to end the relationship.

A person who needs to express power over a dating partner in violent ways is usually not someone who will be willing to compromise or share that power. Some violent partners are able to admit they have a problem and get help, but their issues are not easily solved. The safest choice for a teen victim of dating violence is to get help and leave the relationship. Cases of physical or sexual assault should be reported to a trusted adult right away.

Telling a trusted adult is often the best first step. You could talk to your parents, a teacher, counselor or school nurse. There are also agencies that deal with dating and domestic violence that can help. In extreme situations, you may need to go immediately to the police.

Share

Write the name, phone number(s) and/or website(s) of a national and/or local resource on the board. Leave these resources on the board or post in the classroom for students to refer to.

There are reliable resources that can give you more information about teen dating violence and help you if you or someone you know is in an abusive dating relationship.

Assessment & Closure

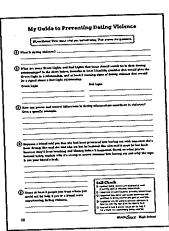
Students demonstrate learning

Complete

Direct students to turn to My Guide to
Preventing Dating Violence on page 18 of the
Student Workbook.

Answer the questions to create a guide for preventing dating violence that you could share with other teens.

Allow time for students to complete the activity sheet.



Workbook page 18

End the lesson

Close

What was the most interesting thing you learned during this lesson?

Allow each student to share something he/she learned from the lesson. As students share, reinforce main points about types of dating violence, qualities of healthy and unhealthy relationships, and resources for help.

Assess

Collect students' My Guide to Preventing Dating Violence activity sheets and evaluate their work for this lesson.

Tech Connection

Assign interested students to research each of the suggested resources and allow them to make a report of their findings to the class in Lesson 10.

Assessment Evidence
Objective 1
Students summarized the qualities of a healthy dating relationship by:
☐ Completing the My Guide to Preventing Dating Violence activity sheet.
Objective 2
Students described warning signs of dating violence by:
☐ Completing the My Guide to Preventing Dating Violence activity sheet.
Objective 3
Students analyzed how power and control differences in dating
relationships can contribute to violence by:
☐ Completing the My Guide to Preventing Dating Violence activity sheet.
Objective 4
Students explained why it's wrong to coerce another person into having sex by:
☐ Completing the My Guide to Preventing Dating Violence activity sheet.
Objective 5
Students explained why a person who has been sexually assaulted or raped is not at fault by:
☐ Completing the My Guide to Preventing Dating Violence activity sheet.
(Scoring Rubric, page 322)

Teacher Page

Dating Scenarios *Key*

Directions: Copy and cut apart the strips to have 1 scenario for each pair of students.

- 1. Paula and Jerome trust and respect each other. When they disagree, they always listen to and consider the other person's point of view.
 - **Green Light.** Partners value each other's opinions and feelings. There's trust and respect in the relationship.
- 2. Ty had promised Tonya he'd come over to study after practice, but he stayed late planning strategy with his teammates and forgot. When he realized, he called Tonya and apologized. Tonya said she knew Ty was really busy preparing for the big game. They agreed that in the future they'd call to remind each other about plans.
 - **Green Light.** Partners take responsibility for their actions and plan ways to avoid problems and improve communication in the future.
- 3. Shannon's boyfriend is four years older. It made Shannon feel special and grown-up to be with him when they first started dating. He likes to plan what they do and says Shannon's friends are immature, so they spend most of their time alone or with his college-age friends.
 - **Red Light.** A significant age difference can lead to power and control issues in teen relationships. An older partner may pressure someone into sexual activity or using alcohol or other drugs.
- 4. Jaycee and Dana made a promise to always be honest with each other. They tell each other the truth, even when it's difficult.
 - **Green Light.** Partners don't manipulate facts or hide information from each other. They're willing to be uncomfortable or do something that's hard for the sake of their relationship.
- 5. Terry's girlfriend says she'll kill herself if Terry breaks up with her.
 - **Red Light.** One or both partners use fear, manipulation or threats of harm to control the other person and keep him/her in the relationship.
- 6. When Cindy loses her temper, she yells at Jake. Sometimes she hits him or throws things at him. Last time, she threw a glass at his head and he had to get stitches. But she always apologizes later and then is really nice to him—until she gets mad again.
 - **Red Light.** One or both partners use a cycle of cruelty and kindness to control the other person. The acts of violence often get worse or more dangerous as the cycle continues.

Dating Scenarios Key (continued)

- 7. Kyle got a part in the school play and can't spend as much time with Darryl for a while. Darryl isn't happy about that, but being in the play is important to Kyle, so Darryl's dealing with it.
 - **Green Light.** Partners are willing to support the things that make each other happy, even if it means accepting things they don't like for a while. Could be a Yellow Light if Kyle isn't willing to do the same for Darryl in the future.
- 8. Bobby acts very sweet to Dawn when they're around friends and family, then hurts her when no one else is around.
 - **Red Light.** One or both partners keep their abusive behaviors secret from others who might notice or report the abuse.
- 9. Marlene is always putting Lee down, especially when they're around friends. Lee feels embarrassed, but doesn't know how to get Marlene to stop.
 - **Yellow Light.** One or both partners consistently use insults or put-downs to hurt the other person's confidence or feel in control. Could be a Red Light if Lee asks Marlene to stop and she refuses.
- 10. Jake and Carrie both have strong ideas about what they want to do, so sometimes they argue. But they've been learning how to compromise and negotiate better so they both get some of the things they want.
 - **Green Light.** Partners are working together to find solutions for problems that are acceptable for both of them. They're learning how to give and take to reach agreement. Could be a Yellow Light if the arguments get worse, or one or both of them stops being willing to compromise.
- 11. Taylor and Chris have physical fights. They sometimes slap, pinch or kick each other when they get angry.
 - **Red Light.** One or both partners use physical violence and hit, slap, shove, pinch or wrestle with the intent to hurt or control the other person.
- 12. Benny got angry at Claudia when she disagreed with him. He threatened her with a knife and told her she'd better do what he says.
 - **Red Light.** One or both partners have used a weapon to control the other person. Serious injury or even murder could result.
- 13. Brian gets upset when Jana wants to spend time with her friends and family. He wants them to spend all of their time together.
 - **Yellow Light.** One or both partners try to dominate the other's time. Could be a Red Light if Brian gets physically or verbally abusive with Jana to keep her away from other friends, family, interests or activities.

Teacher Page

Dating Scenarios Key (continued)

- 14. Lisa and Miguel love talking to each other. They feel as if they could tell each other anything.
 - **Green Light.** Partners have good communication. They're able to comfortably express their thoughts, feelings, wants and needs.
- 15. Anna is constantly texting Gil to keep an eye on him. She wants to know where he is, what he's doing and who he's with all the time. She gets angry when he doesn't text her back right away.
 - **Red Light.** One partner constantly monitors or even stalks the other. Could be a Yellow Light if Anna is willing to give Gil his privacy, talk about why she's doing this and stop the behavior.
- 16. Keisha's boyfriend keeps pressuring her to have sex with him, even though she's told him she isn't ready for that. She's starting to feel afraid to be alone with him.
 - **Red Light.** One partner puts unwanted sexual pressure on the other and refuses to respect the partner's limits.
- 17. Drew's boyfriend wanted to break up because Drew wouldn't share the answers to the history quiz with him. But a few days later he brought Drew a present and said he wanted to get back together.
 - **Red Light.** One partner wants the other to do things that are against his/ her values, beliefs or wishes and threatens to leave the relationship over it. Could be a Yellow Light if Drew's boyfriend was genuinely sorry and this was a one-time event.
- 18. Alex feels jealous a lot, especially when Jess talks to other guys. Alex decided to tell Jess about the jealous feelings because Alex didn't want those feelings to hurt their relationship.
 - **Green Light.** Partners can admit to strong feelings such as anger or jealousy and work through these feelings in ways that don't hurt either one of them. Could be a Yellow Light if Alex's jealousy gets worse instead of better, or if Jess is trying to make Alex jealous on purpose by talking to other guys.
- 19. Lenny feels like he can be himself around Eva. She listens to him and is interested in what he has to say. He tries to do the same for her.
 - **Green Light.** Partners accept each other and want to learn about each other's thoughts and feelings.
- 20. Bev and Anthony are always joking and like to tease each other. Sometimes Bev takes it too far and hurts Anthony's feelings, but she always says she's sorry afterward.
 - **Green Light.** Joking and teasing can be OK, as long as neither of the partners feels disrespected or put down. Could be a Yellow Light if Bev apologizes but never makes an effort to change her teasing so she won't hurt Anthony's feelings again.

My Guide to Preventing Dating Violence

Directions: Think about what you learned today. Then answer the questions.

1) What is dating violence?	<u> </u>	
relationships? In the cha	art below, describe at le nship, and at least 3 wa	nat teens should watch for in their dating least 3 healthy qualities that would give the arning signs of dating violence that would
Green Light		Red Light
3) How can power and con Give a specific example.		ing relationships contribute to violence?
been dating. She said sh because they'd been too learned today, explain w	he told him no, but he is uching and kissing befo why it's wrong to coerc	oressured into having sex with someone she insisted. She also said it must be her fault fore it happened. Based on what you've see someone into having sex and why the rap
is not your friend's fault	J.	
Name at least 2 people you could ask for help if you experiencing dating vio	u or a friend were	Self-Check ☐ I defined dating violence and described at least 3 warning signs of unhealthy relationships. ☐ I described at least 3 qualities of healthy relationships. ☐ I described how power and control differences can contribute to dating violence and gave an example. ☐ I explained why it's wrong to pressure someone to have sex and why rape is not the victim's fault. ☐ I named at least 2 people I could ask for help if I or a friend was experiencing dating violence.