



Abstinence, Sexually Transmitted Infections, Pregnancy, and Contraception

a grade nine sexual health unit



Developed by the Regina Sexual Health Coalition
Funded by The Advisory Committee on Family Planning
1319 Colony Street • Saskatoon, SK • S7N 2Z1



**Abstinence, Sexually Transmitted Infections,
Pregnancy, and Contraception Unit**

To Support Grade 9 Health Educators

March 2005

Note: This unit requires school division board approval prior to teaching (*Health Education: A Curriculum Guide for the Middle Level* (1998), page 338)

Planning: Abstinence, Sexually Transmitted Infections, Pregnancy, and Contraception

Health Education Liaison Committee

Saskatchewan Learning recommends the formation of a local liaison committee to support teachers and coordinate planning (*Health Education: A Curriculum Guide for the Middle Level* (1998), page 5).

Prior to beginning this unit and scheduling a parent meeting, ensure that you meet with your Health Education Liaison Committee and review the learning objectives and the materials. Make sure to discuss any questions or concerns from committee members, for many of their concerns will probably be similar to concerns/questions that some parents may share.

Typical Questions and Concerns:

1. Why is sexual health taught in Grade 9? Grade 9 is too early. Grade 9 is too late.
2. How is information about abstinence and contraception presented in a balanced way?
3. What alternatives might be provided if there are certain topics I do not want my son/daughter to learn about?
4. Does the content of the unit include alternative lifestyles? If so, what are the key understandings?
5. Where do you get the information that you share with the students?
6. Has sex education proven to benefit students? If so, how?
7. If students are uncomfortable participating in a certain learning activity, what will you do?
8. Concern that teaching students about contraception affirms premarital sex.
9. Concern that the contents of the unit may conflict with family values.

Suggestions on how to deal with controversial subject matter is included in the *Health Education: A Curriculum Guide for the Middle Level* (1998), page 13.

School Division Approval

As stated on page 338 in *Health Education: A Guide for the Middle Level*, (1998), this unit requires School Division Board approval before teaching. Contact your Director and Principal for approval procedures. Providing information, sometimes in the form of a presentation, helps to create local approval and support for this unit.

Question Box

Before teaching this unit, identify how students may ask questions they may not want to ask in class. Their questions may be of a personal nature. Know where you will gather the information or where you will direct students to find their answers. If you are not familiar with the resources in your community, contact your local health nurse or population health promotion contact and s/he will be able to provide you with names, numbers, or locations. In addition, websites (included in resource section) are an excellent source of information.

Pretest

Consider the needs of your students and community – ask appropriate questions that will provide you with useful feedback. Providing the students with a pretest about the concepts to be covered will present a “benchmark” for you on where to begin and will also identify topics that may need ‘extra’ time.

Sample Questions:

- ~ Should sexual health education be taught in schools? Why or why not?
- ~ What are five sexual health topics that you would like to learn more about?
- ~ What is your opinion on school-age youth being sexually active?
- ~ Who becomes infected with STIs? How can one avoid contracting an STI?
- ~ How can teens learn to make health-enhancing sexual health decisions?

Communicate With Parents

The health education of youth is a responsibility shared among the family, the school and the community. It is important to let parents and caregivers know about the basics of this upcoming unit as they may choose to enhance curriculum objectives with content that is important to their respective families.

Sample #1

Date

Dear Parents/Caregivers:

I would like to invite you to an information meeting at our school. The Grade 9 class(es) will soon begin to learn about sexual health in their health education classes and the meeting will provide the opportunity for you to look at materials, preview videos and discuss any questions you may have. I hope you are able to attend!

(Day)
(Date)
(Location)

Sincerely,

(Name and contact info)

Sample #2

Date

Dear Parents/Caregivers:

The Grade 9 Health Education class(es) will soon begin to learn about sexual and reproductive health. The unit will begin on (Date). The topics to be presented are:

sexuality and sexual health
abstinence
sexual health issues
teen pregnancy
consequences of sexual intercourse
sexually transmitted infections
health-enhancing behaviours
decision making.

If you have any questions or if you would like to review the materials to be used in class, please call me at the school (phone number).

Sincerely,

(Name and contact info)

Gather Resources

Print Resources

Englander, Anrenee, (1997). *Dear diary, I'm pregnant: Teenagers Talk About their Pregnancy*. Toronto, ON: Annick Press.

Planned Parenthood Federation of Canada, (2001). *Beyond the basics: A sourcebook on sexual and reproductive health education*. Ottawa, ON: Planned Parenthood Federation of Canada.

Saskatchewan Learning, (1998). *Health Education: A Curriculum Guide for the Middle Level (Grades 6-9)*.

Saskatchewan Learning, (1998). *Health Education: A Bibliography for the Middle Level (Grades 6-9)*.

Smith, Pamela, et al, (2001). *Renewing Partnerships & Commitment: Community Sexual Health, Services & Education and Recommendations; Executive Summary*. Regina, SK: Sample Survey and Data Bank Unit, University of Regina.

Video Resources

The Truth About Sex (School Version) (1999), Chatsworth, CA: AIMS Multimedia. Distributed in Canada by Canadian Learning Company.

Websites

<http://kidshelp.sympatico.ca/>

www.ppfc.ca

www.sexualityandu.ca – for teacher and student use

Foundational Objectives and Learning Objectives

Foundational Objectives for Level A – Extend Knowledge Base

Students will acknowledge that early sexual activity can be harmful both physically and emotionally and can have serious negative impact on life goals.

Students will understand that sexually transmitted infections (STIs) are preventable, and some are treatable while others are not.

Learning Objectives for Level A – Extend Knowledge Base

Students will:

- examine personal knowledge in terms of what they know and what they want to know (CCT)
- identify and clarify some myths regarding teenage pregnancy
- define and develop an awareness of sexuality and identify different aspects of sexuality
- develop an awareness of how cultural values can influence sexual decisions
- identify the key concepts pertaining to sexual health
- define and discuss abstinence
- outline the personal standards (Grade 6) that influence a person's decisions about postponement of first sexual intercourse
- list the strategies of personal commitment (Grade 7) that a person needs to commit to his or her decisions
- list ways to support peers (Grade 8) and their decisions
- identify sexual health issues that youth may encounter in their community
- identify health issues related to sexuality
- identify risky behaviors that may interfere with sexual health
- identify where sexual health information can be obtained
- identify how young people can obtain information from people who are knowledgeable about sexual health issues
- seek information from people who are knowledgeable about sexual health issues (e.g., public health nurse, parent, doctor, teacher) (IL)
- consciously evaluate what is being read, heard, and viewed (CCT)
- explore various forms of conception control, including abstinence, and explore how this knowledge may promote sexual health
- identify the outcomes of sexual intercourse
- identify the short-term consequences and the long-term ramifications of teenage pregnancy on life goals
- identify the emotional and social implications of teenage pregnancy
- explore alternatives regarding unplanned pregnancies
- describe the causes and symptoms of common sexually transmitted infections
- be aware of how sexually transmitted infections endanger health
- identify ways to avoid sexually transmitted infections
- understand the effects of alcohol and other drugs on sexual health decision making
- understand the effects of alcohol and other drugs on the developing fetus (e.g., Fetal Alcohol Spectrum Disorder (FASD) and other alcohol related birth defects).

Foundational Objectives for Level B – Make an Informed Decision

Students will decide how to promote health-enhancing decisions among teens regarding sexual activity.

Learning Objectives for Level B – Make An Informed Decision

Students will:

- review the determinants of health and decide which of them apply to the issues of sexual health
- review strategies of health promotion to determine which of them might apply to the sexual health challenges youth face in their communities
- list ways to inform the community of sexual health issues

predict consequences of each alternative and decide upon the best one
render a judgement and support that judgement by referring to clearly defined criteria (CCT)
establish a health promotion goal regarding community awareness of a sexual health issue for youth.

Foundational Objectives for Level C – Carry Out an Action Plan

Students will design and implement an action plan to promote the sexual health of youth in their community.

▪ Learning Objectives for Level C – Carry Out an Action Plan

Students will:

design action plans that include strategies to promote the sexual health of youth in their community
carry out their action plans and evaluate their implementation
revise their action plans based on specific criteria.

Unit At A Glance

Decision-Making Process	Content	Resources
<p>Level A – Extend Knowledge Base</p> <p>1. Reflect on what you know about the issue.</p> <p>2. Research the issue. Find the facts.</p>	<p>Overview of content and perspective</p> <p>Identifying aspects and issues of sexuality</p> <p>Defining personal standards, personal commitment, and abstinence</p> <p>Identifying risky behaviors and STIs</p> <p>Biology of human sexuality</p> <p>Seeking and evaluating sources of information</p> <p>Identifying outcomes and consequences of sexual behavior</p>	<p><i>Beyond The Basics</i></p> <p>www.sexualityandu.ca</p> <p><i>The Truth About Sex</i></p> <p><i>Dear Diary, I'm Pregnant</i></p> <p>Checklist for Evaluating Sources of Information</p>
<p>Level B – Make an Informed Decision</p> <p>3. State the challenge. Explore Alternatives and consequences.</p> <p>4. Make a decision. Set a Personal Goal.</p>	<p>Identifying youth sexual health issues in community</p> <p>Generating strategies to promote sexual health</p> <p>Challenge of promoting sexual health</p> <p>Creating alternatives and criteria</p> <p>Evaluating alternatives/strategies</p> <p>Developing a goal statement to promote sexual health</p>	<p><i>Beyond the Basics</i> page 375</p> <p>Matrix</p>
<p>Level C – Carry Out an Action Plan</p> <p>5. Design and apply an action plan.</p> <p>6. Evaluate Progress. Revise as needed.</p>	<p>Designing an action plan to promote sexual health</p> <p>Identifying traits of a person who can monitor students' progress</p> <p>Assessing the design elements of an action plan</p> <p>Evaluating the implementation of an action plan</p> <p>Revising the plan as needed</p>	<p>Sample 5WH Checklist for Planning</p> <p>Sample Rubric</p> <p>Sample Rubric</p> <p>Interview Questions</p>

Decision-making Process Level A – Extend Knowledge Base

1. Reflect on what you know about the issue.
2. Research the issue. Find the facts.

Learning Objectives

Students will examine personal knowledge in terms of what they know and what they want to know (CCT).

Students will identify and clarify some of the myths regarding teenage pregnancy.

Students will define and develop an awareness of sexuality and identify the different aspects of sexuality.

Students will develop an awareness of how cultural values can influence sexual decisions.

Instructional Strategies/Methods

Direct Instruction

Brainstorm

Porcupine Game (*Beyond the Basics*, page 193)

This activity requires a classroom environment of respect and safety. If classroom environment is not conducive to this suggested activity, please see alternate activity on next page.

Visualization (*Beyond the Basics*, page 191)

Teaching Notes

Provide students with an overview of what is included in this unit. Refer to the wall chart of the Decision-making Process and the six steps within Levels A, B, and C. Explain that the unit begins with Level A – reflecting on what the students know and researching what they do not know about abstinence, sexually transmitted infections (STIs), pregnancy, and contraception.

Ask students to brainstorm what they know about sexuality. Write students' responses on chart paper. Dispel any myths that they may have identified. Tell students that we often think about sexuality as a commodity – something we 'get, have, or do' once we reach puberty, rather than as a cumulative process. Sexuality is multifaceted and includes our sex (fe/male), gender (personal sense), sexual orientation (sexual/emotional attraction), and sexual expression.

To further identify the aspects of sexual identity...

1. Draw a circle on the board and label it sexual identity. Define sexual identity as how we feel and express ourselves as sexual beings. Emphasize that 1) we are all sexual beings, whether we have sex or not and 2) our sexual identity is formed from a number of factors.
2. Ask participants to identify the factors that are part of a person's sexual identity. Draw a spoke from the circle for each descriptor (e.g., sex, gender, culture, age, religion, media, biology, relationships).
3. Ask students to reflect on and discuss which factor is most important aspect of their sexual identity, and which is least important. How do the spokes change over time? Why?
4. Conclude by informing students that everyone has a unique set of 'spokes' that make up his/her sexual identity and these spokes often change over time.

Another important but often 'taboo' aspect of sexuality is sexual orientation. To emphasize the stereotypes and difficulties associated with, for example, homosexuality, have students complete the following exercise:

Ask students to relax and listen carefully to the story you will read aloud.

It is a beautiful spring morning in Saskatchewan. You awake early and do chores, shower, dress, and sit down to your breakfast. You glance outside and enjoy the newly planted fields of wheat and barley that are finally starting to grow. It is Monday and you are ready for another week of school.

As you wait for the bus, you glance at a magazine and listen to the radio. It is almost time to head outside, but wait..... an ad in your mother's magazine catches your eye. Two women models hold each other, sensuously displaying bathrobes on sale for half price. You also notice the cartoon on the opposite page that tells of a funny mishap in a family of two men and their dog.

Instructional Strategies/Methods	Teaching Notes
<p>Alternate Activity:</p> <p>Post a two-column chart with headings heterosexuality and Homosexuality/Two-spirited. Similar words and phrases appear under each heading. Use the list of words to engage students in a discussion that highlights the common situations regarding teenage sexuality. In pairs, students discuss the extra/unique pressures that homosexual youth confront. Debrief the pair activity by asking each pair to mention one idea that they discussed. Be sure students know they may decline to comment or pass.</p>	<p><i>You listen again to the radio playing a familiar song about the love between two women and the distance that keeps them apart. The bus drives into your driveway so you grab your coat and head for the door.</i></p> <p><i>On the way to school, your friends are talking about their latest love interests. You would like to tell your friends about what you did this weekend and about meeting this cute person of the opposite sex, but you are kind of afraid how your friends will react. You say nothing.</i></p> <p><i>When you arrive at school, you go to your locker. At the locker next to you there is a group of students laughing as a joke about heterosexuals is shared. You leave, wishing you would have told them to shut up. On your way to class, a group of guys purposefully bump into you, and they tell you they hate heterosexuals and that you had better stay out of their way.</i></p> <p><i>You make your way to health class and take a seat. Your teacher is asking everyone to get into small groups: today you are going to talk about the characteristics you look for in a perfect life partner. You feel like you are being forced to lie. You do not feel that you can tell your group how you would look for someone of the opposite sex. You look out the window, wishing.....</i></p> <p>Ask students to respond to the story individually, by writing or drawing on index cards. Invite students to share their responses with a partner before facilitating a large group discussion. Is the story realistic? What did they think of while they listened to the story? Conclude by emphasizing that sexual orientation is only one aspect of our sexual identity and we should aim to respect all people, and where possible, offer our support.</p> <p>A third aspect of sexuality that many teenagers and parents worry about is sexual decision making and the related consequence of teenage pregnancy. Distribute several pieces of small paper to the students and have them write one statement of information (both truths and myths) regarding teenage pregnancy on each piece of paper. Collect the pieces of paper.</p>
<p>Group Work</p> <p>Additional myths/facts (<i>Beyond the Basics</i>, pages 114 and 115)</p>	<p>Divide students into groups of four. Give them a sheet of chart paper and a number of the pieces of paper that has ‘student written’ information on them. Ask groups to read the information and glue/tape/write them onto chart paper, placing the information under one of the following headings: TRUTH / MYTH / DO NOT KNOW</p> <p>When groups have completed the activity, ask one member of each group to post the chart paper at the front of the room. Ask for a reporter from each group to present the group’s chart. Allow students to comment and debate the information they have gathered. The teacher then makes a list of TRUTHS/MYTHS on the board from the students’ work. Discuss and clarify the myths. An alternate activity would be to clarify the myths in the next lesson when students are at the second step in Level A and have them conduct research using the Internet and health professionals to clarify the myths.</p>
<p>Guest Speaker:</p> <p>Aids educators from both AIDS Saskatoon and South Saskatchewan AIDS Programs (Regina) may be of assistance.</p>	<p>As a final activity to this lesson, invite a person from a minority culture to discuss how the aspect of cultural values influence one’s sexual decisions. Prepare the students by engaging them in a brainstorming activity to generate a variety of questions that they can ask the speaker. Provide your guest(s) with a list of the questions ahead of time so they are better prepared.</p> <p>Sample questions:</p> <ol style="list-style-type: none"> 1. At what age do/should people start dating? 2. What roles do women/men have in relationships? 3. What influence do adults and our culture have regarding teens dating? 4. Where can young people find reliable sexual health information that is culturally sensitive? <p>At the end of the presentation, ask students to identify the cultural similarities and differences that can exist in decision making about sexual health issues. Students can present their ideas in a paragraph, chart, graphic organizer, or an oral presentation.</p>

Instructional Strategies/Methods	Teaching Notes Bring closure to the activity by telling students that for an individual to establish personal standards (grade 6) and to make a personal commitment (grade 7) regarding sexual choices/decisions, students need the facts about teenage pregnancy, sexually transmitted infections, abstinence, contraception, and other sexual issues. Students also need the facts in order to support their peers (grade 8) who are also striving to make health-enhancing decisions.
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Student Assessment Techniques There are many ways to assess the degree to which students can identify the myths about teenage pregnancy. Present students with a list of myths and facts and have them identify the fact from fiction. Ask that students represent the components of their sexual identity using a metaphor other than a wheel. Keep these in student portfolios as part of their Level A assessment. Student items regarding cultural influence on sexual decision making can also be placed in students' portfolios.

Decision-making Process Level A – Extend Knowledge Base

1. Reflect on what you know about the issue.

Learning Objectives

Students will examine personal knowledge in terms of what they know and what they want to know (CCT).

Students will define and discuss abstinence.

Students will outline the personal standards (Grade 6) that influence a person’s decisions about postponement of first sexual intercourse.

Students will list the strategies of personal commitment (Grade 7) that a person needs to commit to his or her decisions.

Instructional Strategies/Methods

Group Activity:
Reflective Discussion

Teacher may choose to make additions/deletions to the list of statements.

Debate

Direct Instruction:
Story Response

Teaching Notes

Begin by telling students that today they will continue to reflect on what they know about abstinence, STIs, pregnancy, and contraception. Ask students to think about and respond to each of the following statements about sexuality. Either have students respond as dis/agree on paper OR before class begins, place three posters around the room with Agree, Disagree, or Undecided written on each. After each statement is read, the students move around the room and stand beside the poster that displays their response.

There are negative consequences to teen sex.

Having sex before marriage/lifetime commitment is wrong.

It is important for teenagers to know how to use contraception and practice safer sex.

My culture and religion should play an important role in how I make decisions about sexual behavior.

It is important to be in love before I have sex.

If two people are sexually attracted to each other, that is all that is needed to have a good relationship.

Honesty and respect are essential to a healthy relationship.

There is too much pressure put on teenagers to have sex.

Most 13 year-olds are too young to date.

It is okay for people of different cultures to date.

Teenagers are too young to be good parents.

It is okay to make comments about people’s body parts unless they say they do not like it.

Most teenagers would be better off waiting until they are older before having sex.

When a couple dates, it is really up to one partner to make sure that things do not go too far.

Contraception and safer sex information should come from our parents/caregivers.

Choosing not to have sex is the best option for teenagers.

Allow for comments, debate and discussion regarding the above statements.

Refer back to the statement “Choosing not to have sex is the best option for teenagers”. Remind students that there are more teenagers not having sex than those who are. Abstinence is the choice for many teens. Ask students to listen to the following story “I’M WAITING”, written by a high school student. Invite students to listen for reasons that this student gives for waiting to have sex.

I’m a 17 year-old guy and I’ve decided to abstain from intercourse. Here’s why. Probably the most significant reason is the fear of AIDS or other incurable diseases. Yes, sex would be fun, but I don’t want to risk my life for it. I personally have nothing against teenage sex, as long as condoms and other protection are used. But, as we all know, there is no 100% protection. There is always a risk – a risk I am not ready to take.

Instructional Strategies/Methods	Teaching Notes
Discussion	<p><i>When I tell people I'm in Grade 12 and a virgin, they always ask me how I cope with the peer pressure to have sex. The whole peer pressure thing is overrated. When I tell some of my friends that I'm not sexually active, they say that is cool. When I tell others about my decision, most of them tell me they respect me for waiting. I've had many peers tell me that they wished they had waited. Their first time was either not as good as expected, or they didn't use protection and are dealing with the consequences.</i></p> <p><i>One summer, I got very intimate with a gorgeous friend. We kissed and everything, but I said I wouldn't have sex. At first the person was surprised, but then said it was a really cool choice I had made. When I said that I didn't want to have sex, the pressure was gone. We both felt more comfortable and got more intimate because we knew sex wasn't going to be the next step.</i></p> <p><i>Naturally, I have sexual urges, just like everyone else but there are many other ways to deal with them.....</i></p> <p>Ask the students if this story is realistic. Why or why not? What are 'other ways' that this student may deal with his sexual urges? Tell the students that this is a real account written by a 17-year-old student. Continue by saying that the teenage couple in this story was accepting of the decision. In many situations, one of the partners may try to pressure the other into changing his/her decision. Teenagers need to practise their strategies of personal commitment and know how to say no and still be friends. They also need to support their friends in saying no.</p> <p>The following suggestions should be written on the board. Divide students into pairs and have them discuss the suggestions as ways to say no to sexual pressure. Also ask that they record the suggestions that they think would be effective for dealing with risky situations.</p> <ol style="list-style-type: none"> 1. Know ahead of time how you feel about sex, drugs, drinking, and other risky behaviours. 2. Be friendly but firm. Repeat what the person has said to you – “You want me to have sex with you?” 3. Say how you honestly feel. 4. Speak only for yourself rather than for everyone else. “<u>I</u>m not ready to have sex yet.” 5. Discuss the possible consequences. “If I were to get pregnant or an STI, it might alter my chances to attend a post secondary school or to get work. Getting an STI would be scary – you can die from some of them.” 6. Separate the activity from the person and let your friend know you care for him/her but you feel uncomfortable about the sexual activity. “I really do care about you, but I can't take this risk.” 7. Suggest an alternative activity. 8. If the person persists, walk away from the situation but leave the 'door open' for him/her to join you. 9. Be prepared for rejection – if rejected, remember that this person does not care about you, s/he cares about the sex. <p>Conclude this activity by stating that decisions about sexuality can be complicated, and that it is important to think about 1) our values and personal standards when making decisions about sexual behavior and 2) our commitment to our decisions.</p>
Pair-Share	<p>Review with students the strategies of personal commitment that one needs to make and carry out informed decisions. One way to conduct the review is to divide students into groups of three. Each person has one of the rotating roles of speaker, listener, or timer. Give each person one to two minutes to discuss personal standards and strategies of personal commitment to abstain from sexual intercourse. Rotate roles. If students do not want to 'share', allow them to write their comments in their journals.</p>

<p>Instructional Strategies/Methods</p>	<p>Teaching Notes</p> <p>Examples of possible personal standards: Abstaining until marriage, using protection every time, talking to your partner about sexual health before having sex, not having intercourse until completed high school....</p> <p>Examples of possible personal commitment strategies: Have a support person(s), choose not to have friends who pressure you about sexuality, decide and make a contract (write it down), be upfront with people you date, do not engage in activities that make it difficult to stick to personal standards.</p> <p>Bring closure to the lesson by identifying with students the importance of also supporting peers (grade 8) in their personal commitment to abstinence. Students will discuss this later in the unit.</p>
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<p>Student Assessment Techniques</p> <p>Students can write a poem or draw a picture/collage about how they define abstinence. The teacher can also listen to the students as they do the pair-share activity and brainstorm their personal standards and commitment.</p> <p>A journal entry outlining personal commitment and personal standards that affect decisions about sex and making choices can be used to assess students' abilities to identify their personal standards and commitment.</p>

Decision-making Process Level A – Extend Knowledge Base

1. Reflect on what you know.
2. Research the issue. Find the facts.

Learning Objectives:

Students will identify sexual issues that youth encounter in their community.

Students will identify health issues related to sexuality.

Students will identify risky behaviors that may interfere with sexual health.

Instructional Strategies/Methods

Listening for Meaning

Teaching Notes

Begin by reading the following to students:

Kim is sixteen years old. The summer after Grade 10, Kim was offered a job lifeguarding in another town. She took the job, even though it meant being away from her family and friends for two months.

In this new town Kim felt lonely. The other lifeguards had worked at the pool before and seemed to be in a clique that excluded her. Then Kim met Jordan. Jordan was really hot and some of the other lifeguards wanted Jordan's attention. Jordan became interested in Kim and asked her out.

Suddenly the others paid attention to Kim. They included her in their activities and pumped her for information about Jordan. Kim wanted to be popular, so she decided to go out with Jordan. Everyone would think she was crazy if she didn't.

Jordan very quickly began to pressure Kim to have sex. Jordan even made it clear they wouldn't keep dating if she refused. One night, after both of them were partying, Jordan asked to sneak into Kim's room and stay the night...

Ask the students what issues Kim needs to consider to help her make a decision about what to do? Should she let Jordan in?

Next, read the revised case study:

Kim is sixteen years old. The summer after Grade 10, Kim was offered a job lifeguarding in another town. She took the job, even though it meant being away from her family and friends for two months.

At first, Kim felt lonely. Although the other girls had worked at the pool before and seemed to be in a clique, Kim persisted and eventually met a couple of friends. One evening, Kim met Jordan. Jordan was really hot and some of the other lifeguards wanted Jordan's attention. Jordan became interested in Kim and asked her out.

Jordan was really nice to Kim and they spent a lot of time together. Jordan taught Kim how to drive a seadoo and Kim taught Jordan how to swim. They took long walks together and talked about everything. They were inseparable and very happy.

At one point during the summer, both Jordan and Kim started thinking about having sex. They were definitely attracted to each other and wanted to show each other how much they cared. Jordan had already bought 'protection', and knew that if the opportunity existed they would talk about being safe...

Instructional Strategies/Methods	Teaching Notes
<p>Brainstorm</p> <p>Adaptive Dimension – if you have students with special needs in your class, prepare them for this exercise ahead of time and allow them to share their answers first.</p> <p>Simulation Activity: Divide the class into groups of four to six. Explain the various ways that alcohol can impair a person’s performance, dexterity, vision, speech, and balance.</p>	<p>Ask students what issues related to sexuality Kim needs to consider to help her make a decision about what to do?</p> <p>Brainstorm with students other sexual health issues that youth need to consider before determining whether to start or continue a sexual relationship (e.g., STIs, pregnancy, reputation, alcohol and other drugs, guilt, contraception, goals, values, personal standards)?</p> <p>Ask students to stand by their desks. They can sit when they have told you something about what it means to take a risk or they can give an example of adolescent risky behavior. Once all students are sitting again, write ADVANTAGES on one board and DISADVANTAGES on the other. Divide the students into two groups, one at each board. Ask that the groups brainstorm dis/advantages of adolescents taking risks.</p> <p>When the boards are filled, ask the groups to change locations and note the responses on the other group’s board. They can also add to the other board if they have additional ideas. Emphasize that we all take risks but being well informed and knowing and committing to our personal standards before we take a risk will considerably reduce the consequences.</p> <p>Students may identify issues that are also risky behaviors (e.g., drinking on a date). A discussion about risky behaviors that jeopardize a person’s ability to make health-enhancing decisions and remain committed to their personal standards is important. According to <i>Renewing Partnerships & Commitment: Community Sexual Health, Services, Education & Recommendations; Executive Summary 2001</i>, 63% of students aged 15-19 years who have had intercourse have done so while under the influence of alcohol. What sexual health consequences are likely to occur?</p> <p>Direct the students to the next activity by telling them that alcohol and drug impairment is a major problem for adolescents as impairment influences decision making and the choices involved with sexual activities. This activity for Middle Level students is designed to address and facilitate the discussion of alcohol impairment. Supplies needed are:</p> <ul style="list-style-type: none"> leather/cloth worker’s gloves – one per group sunglasses with light coating of Elmer’s glue – one per group 15 centimeter nut and bolt – one per group <p><u>Nut and Bolt</u> Each group gets a nut and bolt. It is placed on the desk or floor. One person threads the nut onto the bolt all the way to the top. When this is completed, the nut and bolt are handed to the next team member who removes the nut. This continues until every team member has participated.</p> <p><u>Glasses</u> The next step is to repeat the Nut and Bolt task while wearing the glasses with the glue smudge. When every team member has completed the task, the team stands.</p> <p><u>Gloves</u> Each team member repeats the Nut and Bolt task wearing the glasses and worker’s gloves. The team stands when complete.</p> <p>Conclude this activity by asking the following questions:</p> <ul style="list-style-type: none"> How did each impairment affect your ability to perform the task? How was it different when there was no impairment? What are some of the issues that impairment brings to a relationship? How does impairment influence sexual choices and inhibitions? <p>Lead the discussion to identify that the dis/advantages are actually the consequences of the decisions we make when under the influence. Students need to identify alternatives and consequences before they can make an informed decision. Locate the decision-</p>

Instructional Strategies/Methods	Teaching Notes
Risk Continuum	<p>making process chart on the wall and direct student’s attention to Level B. All health-enhancing decisions require a person to state the challenge, and identify the alternatives before making a decision.</p> <p>Ask that students draw a continuum in their books, like the following: Not very risky-----Very Risky</p> <p>Tell students that you are going to read 10 statements aloud and they are to put the number of the statement on the continuum according to how risky they believe the action to be.</p> <ol style="list-style-type: none"> 1. Drinking with your friends 2. Having sexual intercourse 3. Going on a crash diet 4. Going to a boy/girlfriend’s house when parents/caregivers are out of town 5. Trying alcohol at your house with your parents at home 6. Not using a condom when having sex 7. Taking birth control pills whenever you remember to 8. Having sex because you are pressured to do so 9. Making out with someone ‘new’ at a party 10. Thinking about sex <p>Draw a large continuum (or two depending on class size) on the board. Invite students, or groups of students, to go to the board and place their numbers from their continuums on the board. Again read the statements aloud and ask that students notice where the numbers are placed by classmates. With only numbers on the board, this exercise can be as anonymous as the class requires. Invite any comments from students. If there is a large discrepancy, discuss why. Refer to previous lesson on aspects of sexuality.</p> <p>Ask students, “What are your greatest risks or fears about sex?” Allow students to write their responses on paper and hand them in. Answers will probably include pregnancy, STIs, and parental reactions. Read their responses aloud.</p>
Risks of Pregnancy	<p>To provide students a concrete activity about risks of pregnancy, cut out 12 pieces of paper and place them in a bag. Write the months of the year on the blackboard, starting with the current month. Ask students to choose a number from one to 12 and write it on a piece of paper at their desks. Tell students you have 12 pieces of paper in the bag. What are the chances that someone will draw a three? (one in 12.) Tell students that each time a couple has sexual intercourse without protection, there is at least a one in 12 chance of becoming pregnant – if one was to have unprotected sex once a month, chances are you would become pregnant within one year. Invite one student to draw one piece of paper out of the bag and read the number aloud. Write the number beside the first month listed on the board and ask all students with that number to stand. Tell the class that these students had sex (not together as some may respond) that resulted in pregnancy. Replace the number and do this for all 12 months. Note how many students are standing after 12 months. Emphasize that any time students have unprotected sex they are taking a physical risk. This activity demonstrates that if you were to have unprotected sex once a month, the likelihood of becoming pregnant will happen within one year.</p> <p>Continue by asking if emotional risks only occur one in every 12 times of protected or unprotected sex. What emotional risks occur when people participate in sexual behaviors? What protection is there for emotional risks?</p> <p>Conclude the activity by emphasizing that like sexuality, decision making about sexual choices is multi-faceted, including physical, emotional, and psychological risks that need to be identified before an informed decision can be made.</p>

Student Assessment Techniques

To determine students' abilities to identify issues related to sexual health, provide a case study like the one provided in this lesson and ask that students identify the sexual health issues.

A journal entry describing risky behaviors that interfere with sexual health can also be included as part of the Level A assessment.

Decision-making Process Level A – Extend Knowledge Base
 2. Research the issue. Find the facts.

Learning Objectives:

Students will understand the effects of alcohol and other drugs on the developing fetus (e.g., Fetal Alcohol Spectrum Disorder (FASD) and other alcohol related birth defects.

Students will seek information from people who are knowledgeable about sexual health issues (e.g., public health nurse, parent, doctor, teacher) (IL).

Students will consciously evaluate what is being read, heard, and viewed (CCT).

Instructional Strategies/Methods

Be convincing – take in a newspaper with you as if you are looking for the story.

Discuss proper interviewing techniques and types of questions (e.g., yes/no, open-ended)

If you live in a small or remote community, bring in a panel of experts and have the class interview them as a whole.

Sex, Drugs, and Alcohol
(Beyond the Basics, page 377)

Many pregnant youth do not receive medical care until they are past the first trimester – FASD content needs to be included in this unit.

Teaching Notes

Introduce the lesson by presenting the following lie: “Did anyone see on the news last night about how doctors working in Europe have found a cure for all STIs, including AIDS, from the leaves of an exotic plant called Hisbasious?” If students ask questions, add to the myth/lie.

Eventually tell students that what you have told them is not the truth. Congratulate those who questioned and did not believe you. Continue to discuss the importance of using critical thinking to evaluate what they see, hear, and read. Emphasize to students that when we are gathering information from people resources, we need to be critical and active listeners. This includes questioning what we hear.

In this part of the unit, students interview someone from their own community to learn about the effects of alcohol and drugs on a fetus. Interviews can be planned with health care workers, department of community resources and employment, and community agencies. Students conduct the interview for the following purposes:

- to outline the dangers and effects of using alcohol and drugs while pregnant
- to determine action that is required to ensure people are aware of this information
- to evaluate their source of information

In preparation of the interview, distribute the Student Self-assessment for Preparing and Conducting an Interview located in *Health Education: A Curriculum Guide for the Middle Level* (1998) on page 62. Ask that students complete the checklist and hand it in for part of Level A assessment.

Distribute copies of Appendix 9-B and 9-C Evaluating Health-Related Sources of Information and Health-Related Information found in *Health Education: A Curriculum Guide for the Middle Level* (1998) on pages 402 and 403. Tell students they are going to interview someone who is knowledgeable about the effects of alcohol and drugs on the fetus. They will record their findings and complete the checklist to evaluate the source and information.

Brainstorm examples of questions they might ask. Take time to also role play how they should begin and end the interview (e.g., introductions, purpose, information, thank-you).

Ask students to prepare a one page summary of what they have learned about the effects of drugs and alcohol on the unborn child as a result of the interview.

Student Assessment Techniques

Include checklists for evaluating information (Appendix 9-C) and sources of information (Appendix 9-B) in students' portfolios.

Students might write a paragraph, prepare an audiotape or a short skit, or create a poster to demonstrate the effects of alcohol and drugs on the unborn child as part of their Level A assessment.

Decision-making Process Level A – Extend Knowledge Base
 2. Research the issue. Find the facts.

Learning Objectives

Students will identify where sexual health information can be obtained.

Students will consciously evaluate what is being heard, read, and viewed (CCT).

Students will list ways to support peers (grade 8) and their decisions.

Instructional Strategies/Methods

Interactive Instruction:
 Co-operative learning groups

Checklist Appendix 9-B

Ensure to include sources that are culturally sensitive to your students.

The source of ‘friends’ will probably be significantly high in their lists. Discuss if friends are an accurate source of information. Identify with students that the peer role should be to support friends (grade 8) and their decisions. As a supporting peer, part of the role may be to help the friend contact one of the sources presented in their graphic organizers.

www.sexualityandu.ca site under *Teens – Cool Tips – Talking to your doctor/health care worker about sex* provides tips on making the most of your visit.

Teaching Notes

Distribute a small piece of paper to each student. Write the following on the board – *When I think about safer sex/prevention of STI and pregnancy I often wonder.....* Ask students to quietly and independently think about this statement and finish the sentence stem on the piece of paper provided. Collect the pieces of paper and read the statements/questions aloud. Respond to any questions and inform students that they will have an opportunity to identify many answers in the next activity.

Begin by reviewing the criteria used to evaluate sources of health-related information. Provide each student with a copy of the Sample Checklist for Evaluating Health Related Sources of Information found in *Health Education: A Curriculum Guide for the Middle Level* (1998) on page 402. Remind students that available information is not always written or posted by experts. Any person who has the skills to create a web page can author and post information on the World Wide Web. Also, students need to inquire as to the source of information, critically evaluating if the source provides a bias.

Use the wall chart of the Decision-making Process to reinforce the idea that Step 2 of Level A, emphasizes researching a topic and finding additional information. Students will be researching community sources of information that can assist them in promoting the sexual health of youth.

Divide students into pairs and give each pair a phone book and access to the Internet. Ask them to identify reliable places and resources in their communities where they might obtain information about sexuality issues such as STIs, contraception, and more. Ensure that students include home (i.e., parents), school (i.e., teacher, guidance counselor), community-based (e.g., doctors, family services agencies, tribal council family services, teen wellness centers), provincial (e.g., Saskatchewan Health) and even federal organizations (e.g., Planned Parenthood, Sex Information and Education Council of Canada). Ask that students create a graphic organizer to represent the resources they have identified (e.g., concept map, web, chart, Venn Diagram).

Generate suggestions for additional criteria that students would use to evaluate if they would access a source for sexual health information (e.g., confidentiality, comfortable atmosphere, teen friendly). Using these additional criteria, students should then evaluate the sources of information. Students may wish to actually contact these places to ask questions to complete the checklists. Ask that students then prioritize the sources that they would feel most comfortable approaching for information about sexual health issues. Allow students to discuss their priorities. Ask that students place their number one source on the form, Source for Sexual and Reproductive Health Information identified as Appendix 9-1 of this sample unit.

Continue by emphasizing that knowing where to go for sexual health information is one part of promoting sexual health, but knowing what information is available and how to access it is the second part. Brainstorm with students the kinds of information one might want to obtain from these sources (e.g., STIs, physical exams, protection, testing, options).

Instructional Strategies/Methods	Teaching Notes
Guest Speaker	<p>Invite your public health nurse or another health professional to discuss what kinds of sexual health information students can have access to and how they can access it.</p> <p>Conclude the lesson by asking students to generate a personal list of sources that they could use to promote sexual health of youth in their communities. Ask that students also include other ways that they can promote healthy decisions regarding sexual health.</p> <p>Some examples might include:</p> <ul style="list-style-type: none"> dating buddies positive peer pressure listening, clarifying myths accompanying a peer to a clinic.

<p>Student Assessment Techniques</p> <p>Student source sheets and lists provide data for determining if students can identify where sexual health information can be obtained.</p> <p>In addition, students can write a paragraph in their journals about how knowing how to access reliable sexual health information is a first step in promoting sexual health.</p>

Decision-Making Process Level A – Extend Knowledge Base

1. Reflect on what you know.
2. Research the issue. Find the facts.

Learning Objectives:

Students will explore various forms of conception control, including abstinence, and explore how this knowledge may promote sexual health.

**Instructional Strategies/
Methods**

Small Group Brainstorming Activities

Sometimes, in our efforts to provide information about sexuality, we unintentionally give the message that we expect youth to be having sex. Remind students that many teens are not having sex. We also need to be reminded that we may have gay, lesbian, or transgendered youth in our classrooms.

Notes

It is important not to overload students with information, but to give them enough information, so that when they are ready they can access reliable methods of contraception.

Teaching Notes

Introduce contraception by having students work in groups of three to brainstorm methods of birth control. First they are to individually make a list of birth control methods. Encourage students to try to list the contraceptives in order of most effective to least effective. Advise students they have two minutes to make their lists.

After two minutes, in their groups of three the students are to pass their lists to the student on their right and receive the list from the student at their left. They then have 30 seconds to add to the new list. Do this one more time. Ask a recorder from each group of three to write their combined list on the chart paper. Post their lists. Students are to observe other groups' lists and notice any similarities or differences. Discuss the lists. Note similarities and differences among the lists. Also identify from their lists which are only birth control and which offer some protection from STIs as well. Emphasize for students that the only 100% effective protection is abstinence.

To summarize and clarify the information, the teacher creates one list of conception control options on a sheet of chart paper that the class can refer to later.

Types of Contraception

Hormonal: pills, implants, injections

Spermicides: films, foams, jellies/creams

Condoms: male and female

Barriers: cervical cap, diaphragm, sponge, Lea's shield, IUDs

Calendar and Withdrawal

Sterilization

The following activities provide opportunities for students to learn more about the methods of contraception.

#1 -The first option is to use "Module 7: Contraception and Safer Sex" from *Beyond the Basics*. Pages 280-288 in *Beyond the Basics* involves small groups reflecting on what they know about contraception and clarifying the information students need in order to make healthy choices.

#2 – The second option is to again have students log onto www.sexualityandu.ca website and have them read the information regarding contraception. This website is regularly updated which is advantageous when learning a concept that has information that is constantly changing. Ask that students complete a chart like the one below that will organize the information that they find.

METHOD	HOW IT WORKS	ADVANTAGES	DISADVANTAGES	% EFFECTIVE
Condom				
Pill				

<p>Instructional Strategies/Methods</p> <p>Teachers who use this approach claim that it is very effective.</p> <p>Remember to also be sensitive to the religious and cultural diversity of your students as some faiths/cultures are not supportive of contraception. Ensure your language is appropriate to include all students.</p> <p>The quiz does not give a total number correct at the end but gives immediate feedback after each question.</p>	<p>Teaching Notes</p> <p>#3 - Put various types of contraception in a bag and have partners draw an item out of the bag. They must figure out the name, how it works, and who uses it.</p> <p>Tell students that they are now going to visit the website www.sexualityandu.ca. Direct them through the website as follows:</p> <ol style="list-style-type: none"> 1. Ask students to go to www.sexualityand.ca . Click on Teens at the top right corner. 2. Click on the Fun and Games and then onto Quizzes. Tell students that they are going to complete a true/false quiz about STIs, protection, and contraception. The quiz is on screen for students to complete. <p>Students then go back to the Teens page and click on Contraception. Ask students to read the information on contraception, noting and including any information not already included in their charts. Discuss students' charts and ask if there are any questions. Emphasize that abstinence is the only 100% effective birth control method.</p> <p>Conclude this lesson by asking students to complete the sentence: “Gaining knowledge about abstinence and contraception promotes health by.....”</p>
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<p>Student Assessment Techniques</p> <p>Students can complete Methods of Pregnancy Prevention (<i>Beyond the Basics</i>, page 294) to demonstrate if they understand the various forms of birth control.</p> <p>Students may hand in their conception charts and the sexualityandu.ca quiz as part of the Level A assessment.</p>
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Decision making Process Level A – Extend Knowledge Base

2. Research the Issue.

Learning Objectives:

Students will identify the outcomes of sexual intercourse.

Students will identify the short-term consequences and the long-term ramifications of teenage pregnancy on life goals.

Students will identify emotional and social implications of teenage pregnancy.

Students will explore alternatives regarding unplanned pregnancies.

Instructional Strategies/Methods

Discussion

Dear Diary, I'm Pregnant

Any story that tells of the consequences of teen pregnancy can be used.

Interactive Instruction:
Small Group Work

Brainstorm

Teaching Notes

Before the class begins, have the following written on the blackboard or chart paper: "What is different in a person's life who decides to have sexual intercourse compared to a person who abstains?" Students can read and think about their responses. Tell them that time for sharing their thoughts is planned for later in this lesson.

Begin the lesson on consequences and ramifications of teenage pregnancy by reading "Susan Tells Her Story" (*Dear Diary, I'm Pregnant*, page 59). Ask students to note the consequences for Susan as a result of being pregnant. Direct the conversation to include the fact that conception is a consequence of sexual intercourse and that there are implications for the unborn child, the teenagers, and their parents when a teenager becomes pregnant.

Divide the students into groups of four. To create these groups, write words of a similar concept on small pieces of paper and have students select a piece of paper (e.g., out of a hat). Once each student has a piece of paper, tell them they need to find other students who 'fit' their groups according to what is on their paper. Provide words related to physical consequences, social consequences, educational consequences, and psychological consequences.

Examples:

guilt	chancres (sores)	sterility
stress	increased risk of cervical cancer	pregnancy
fear	cost	doubt
time	social isolation	

Ask the groups to identify the consequences of early intercourse such as
physical – increased risk of pregnancy, STIs, cervical cancer
emotional/psychological - reputation, guilt, stress, rejection
educational – change goals, balancing school and work
social – little time for friends

Ask the groups to record their ideas on chart paper and post their chart papers on the wall. Invite students to share their lists. Discuss their ideas and elaborate on the negative consequences. Be sure to include those consequences that appear in "Considering the Consequences of Early Sexual Intercourse" in *Beyond the Basics*, page 278.

Some students may have listed 'positive' consequences. Have the student(s) explain why s/he thinks it is a positive consequence. Invite students to identify other ways besides intercourse to achieve the same positive outcomes (e.g., 'Sex shows we love each other' - discuss other and safer ways that one can show love). For each of the student's' ideas on the 'positive list', brainstorm with students ways other than sex that they could achieve the same outcome.

<p>Instructional Strategies/Methods</p> <p>Video is 30 minutes in length – first 18 minutes focuses on risks of pregnancy and the remaining time focuses on risks of STIs.</p> <p>Small Group Work</p>	<p>Teaching Notes</p> <p>Show the video <i>The Truth About Sex</i>. Ask students to make notes under the following headings:</p> <ul style="list-style-type: none"> Risks related to teenage pregnancy Emotional and social implications of pregnancy for the family Consequences of teenage pregnancy <p>Review key points that should be included in students’ notes.</p> <p>Ask students what options are available if a pregnancy results from unprotected sex? Refer to “Pregnancy & Pregnancy Options” (<i>Beyond the Basics</i>, page 375). Read “Rose Tells Her Story” (<i>Dear Diary, I’m Pregnant</i>, page 46). Ask students to discuss what other options Rose has regarding her pregnancy and how each of their options might affect her life.</p> <p>Divide students into the same number of groups as the number of options they created. Ask them to create a PMI chart (Plus/Minus/Interesting = Pros/Cons/Interesting) to discuss the pros, cons, and interesting points about each option listed above. Advise students in advance that they need to prepare to present their PMI charts to the class. Allow for debate and discussion upon presentation. Reflect on how a couple and/or an individual would approach this decision.</p> <table border="1" data-bbox="511 745 1421 808"> <thead> <tr> <th>Option</th> <th>Positive</th> <th>Minus</th> <th>Interesting</th> </tr> </thead> <tbody> <tr> <td>Abortion</td> <td>continue with goals</td> <td>guilt, sense of loss, religion</td> <td>Illegal in some places</td> </tr> </tbody> </table> <p>Refer again to “Susan Tells Her Story” (<i>Dear Dairy, I’m Pregnant</i> pages 59-74). Ask the groups to discuss the following questions or comments:</p> <ol style="list-style-type: none"> 1. Do Susan and James know the short-term and long-term consequences of teenage pregnancy? 2. Susan’s mom gives her advice of “Don’t listen to your head, listen to your heart. If your head says go but your heart is kind of iffy about it, don’t. You’ll regret it. If you decide to, please talk to me first. I’ll get you on birth control.” Do you agree or disagree with this advice? Why or why not? 3. What questions do they need to find answers to before the baby is born? 4. What changes happen to Susan and James’ lives after Erica is born? <p>To conclude this lesson, have each group share the main points of their discussion. Emphasize that consequences of teenage pregnancy are physical, emotional, and social and that the choices and decisions that are made affect the unborn child, teenagers, and their parents/caregivers. End the lesson by having students respond in their journals to the question, “What is different in the life of a teenager who decides to abstain from sex as compared to a teenager who is sexually active?”</p>	Option	Positive	Minus	Interesting	Abortion	continue with goals	guilt, sense of loss, religion	Illegal in some places
Option	Positive	Minus	Interesting						
Abortion	continue with goals	guilt, sense of loss, religion	Illegal in some places						

<p>Student Assessment Techniques</p> <p>The activities are designed to increase student awareness and to create discussion to connect students’ previous knowledge to actual implications of teenage pregnancy. Students’ abilities to explain both the short-term and long-term implications of teenage pregnancy can be assessed by arranging for students to role play situations, emphasizing one or two of the implications. (Role Play Ideas are found in Appendix 9-2 of this sample unit.)</p> <p>Additional role play situations can be found in <i>Beyond the Basics</i>, pages 316-321.</p> <p>Students’ journal entries should also be filed in their portfolios as part of the Level A assessment.</p>
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Decision Making Process Level A – Extend Knowledge Base

1. Reflect on what you know.
2. Research the facts.

Learning Objectives:

Students will describe the causes and symptoms of common sexually transmitted infections.

Students will be aware of how sexually transmitted infections endanger health.

Students will identify ways to avoid sexually transmitted infections.

Instructional Strategies/Methods

Prepare students with learning disabilities for this activity before class by sharing information about STIs with them.

Thumbs up, thumbs down is another way of demonstrating knowledge.

www.sexualityandu.ca provides information about common STIs.

Handshake Virus (*Beyond the Basics*, page 329)

Teaching Notes

Begin the lesson by asking pairs of students to talk about STIs (e.g., names, symptoms, media images, slang, HIV information from previous HIV/AIDS Education units). Tell students that each of them will be called upon to share one thing that they know or have heard.

Build on students' responses and tell them that today they are going to learn the causes and symptoms of STIs and they are going to discuss how these STIs endanger health.

Explain to students that you are going to read a number of statements about STIs and they are to stand if it is a true statement and remain seated if they believe the statement to be false.

FALSE

The pill prevents STIs.
Once cured, you cannot get the same STI again.
There are home treatments for STIs.
If the symptom goes away, so does the STI.
You have to have sex with someone to get herpes.

TRUE

Many STIs have no symptoms.
Herpes is forever.
Condoms help protect you from STIs.
You can have more than one STI at one time.
Chlamydia is the most common STI.

Clarify the facts from fiction. Remind students that knowing truth from myth is essential for making informed decisions regarding sexual health.

The following activity demonstrates how quickly and easily a virus can spread. Ensure that you have one 3x5 card for each student. Write 'HSV(handshake virus)' on one, 'postpone' on 10% of the cards and 'glove' on another 10% of the cards and leave the rest of the cards blank. Fold and staple the cards.

Give each student one card that they do not open. Instruct each person to move around the room and to shake hands with three people (four or five depending on size of class). As they shake hands with a person, they are to write the person's name on the outside of their card.

Ask students to sit down and open their cards. Ask the person with HSV written on his/her card to stand. Say: "This person has the handshake virus. It is transmitted through handshakes." Have this person read off the names on his/her card. These people are to then also stand as they have been exposed to the handshake virus. Anyone who had 'glove' or 'postpone' written on their cards may sit down as they have protected themselves from the virus. Continue to have people read the names of people on their cards until all 'infected' participants are standing.

Instructional Strategies/Methods	Teaching Notes
<p><i>Beyond the Basics</i> also includes information about the various STIs. Using www.sexualityandu.ca/ allows for more current information.</p>	<p>Discuss how HSV is similar to STIs and HIV (e.g., protection, cannot tell who is infected, may have it and do not know it). Emphasize that those who ‘postpone’ sexual intercourse and those who use protection (i.e., glove), greatly reduce their chances of becoming infected with an STI.</p> <p>Distribute the Sexually Transmitted Infections Chart (Appendix 9-3) and ask students to fill in the spaces with the information they learn from the website, www.sexualityandu.ca/. This website displays current and factual information on STIs. Click on Teens, STIs, and then What Are They? The website describes symptoms, treatment, consequences and prevention for numerous STIs.</p> <p>Have students share their charts. Answer any questions that they may have.</p>
<p>Case Studies</p>	<p>Continue by dividing students into pairs and giving them two case studies to read and answer questions. Students may continue to need access to the Internet to complete these questions.</p> <p><i>Case Study #1</i> <i>Ashton and Aaron had been attracted to each other for a long time. When they finally began to date, things moved very quickly and they decided to have sex. Almost a month after first having sex together, Ashton developed small fluid-filled blisters on his genitals.</i></p> <ol style="list-style-type: none"> 1. Which STI might have infected Ashton? 2. How can this STI be treated? <p><i>Case Study #2</i> <i>Karen had a crush on someone she worked with at her part-time job at the band office. They arrived at the same party one night and both were drinking. That night they had sex. A few weeks later, after a full gynecological examination by her doctor, Karen found out she had Chlamydia.</i></p> <ol style="list-style-type: none"> 1. What symptoms might Karen experience? 2. How is chlamydia treated? 3. What might happen if the chlamydia is left untreated? <p>Discuss students’ responses and conclude the lesson by asking the following questions.</p> <ol style="list-style-type: none"> 1. Does everyone have an obligation to tell a date about having an STI? (Yes – if they are sexually active.) 2. Why should you go to the doctor if you have an STI that cannot be cured? (To receive treatment for symptoms, and/or to receive counseling.) 3. Should teenagers tell their parents if they have an STI? Why or why not? 4. If you had to develop a media slogan to create awareness about STIs, what would it be?

Student Assessment Techniques

Students participate in *What's The Question?* which is a simplified Jeopardy game. The game consists of answers that need questions. Students can play this as two large teams or they can play it in groups of three. One student or team starts by selecting a category (e.g., symptoms, treatment, diagnosis), the answer is read aloud, and then student(s) try to guess what the original question is. The first student to get the correct 'question' picks the next category.

Example:

Student chooses the 'treatment' category.

The statement (answer) is "This STI cannot be cured".

The student begins with 20 points for the correct question "What is herpes?". If the student does not know the "question" s/he may ask for a hint. The student loses five points for every hint s/he needs.

Hint #1 – This STI has a simplex one and simplex two virus that can be treated but not cured. The student responds "What is herpes?" for 15 points.

Provide students with STI case studies and collect their written responses.

Decision-making Process

Level B – Make an Informed Decision

3. State the challenge. Explore alternatives and consequences.
4. Make a decision. Set a personal goal.

Learning Objectives:

Students will review the determinants of health and decide which of them apply to the issues of sexual health.

Students will review strategies of health promotion to determine which of them might apply to the sexual health challenges youth face in their communities.

Students will list ways to inform the community of sexual health issues.

Students will predict consequences of each alternative and decide upon the best one.

Students will render a judgment and support that judgment by referring to clearly defined criteria (CCT).

Students will establish a health promotion goal regarding community awareness of a sexual health issue for youth.

Instructional Strategies/Methods

Direct Instruction:
Mini-lecture

Population Health Promotion Model - Appendix 9-A (*Health Education: A Curriculum Guide for the Middle Level*, page 401)

(*Beyond the Basics*, page 375)

Teaching Notes

Use the wall chart of the Decision-making Process to indicate the progression from Level A to Level B, where students will decide how to inform their school, neighborhood, or community about sexual health issues for youth.

Review the Determinants of Health introduced at the beginning of the school year in Level A of the Decision-making Process Unit. Engage the students in a discussion about how these determinants may affect the sexual health of youth in their community.

The Determinants of Health are:

- Income and Social Status (e.g., contraception costs)
- Social Support Networks (Where can youth go for sexual health information?)
- Education (Knowledge of how to make informed choices)
- Working Conditions
- Physical Environment (Do students have access to reliable sexual health information?)
- Biology and Genetics
- Personal Health Practices and Coping Skills (What is learned about sexual health in school and at home?)
- Healthy Child Development (e.g., Fetal Alcohol Spectrum Disorder)
- Health Services (Is sexual health of youth a priority?)

Also review the Health Promotion Strategies presented in Level A of the same unit:

- Strengthen Community Action
- Build Healthy Public Policy
- Create Supportive Environments
- Develop Personal Skills
- Reorient Health Services

Present the Canadian Facts About Teenage Pregnancy

- 90% of teenage pregnancies are unplanned
- 1/10 teenage girls will be pregnant before 18 years of age
- About 50% of these pregnancies will end in abortion
- 85-90% of teens who deliver a baby choose to parent
- Over half of teens who parent do not finish school
- 2/3 women who become mothers as teens spend their lives in poverty.

Instructional Strategies/Methods	Teaching Notes
Interactive Instruction: Discussion	<p>Ask the following questions:</p> <ol style="list-style-type: none"> 1. What needs to change in our community to improve the sexual health of youth? 2. How can we promote the sexual health of youth? 3. Who can help us? 4. Who are we trying to impact? <p>As a starter list, provide students with some ideas about what they might do to “promote sexual health” in their community. Discuss some of the issues/challenges related to the sexual health of youth.</p> <p>Example: <i>Challenge/Issue – students in your high school are afraid to go to their ‘family doctor’ to obtain birth control information, STI protection and/or testing due to confidentiality issues.</i> <i>Alternative – create a bulletin board in the school that displays information regarding the sources where youth can obtain reliable sexual health information.</i></p>
Brainstorm	<p>Facilitate a brainstorming activity in which students generate a list of alternatives that meet the challenges they identified. Before students begin adding to the list of possible strategies, review the leadership skills needed to promote health. Refer to the list of skills students generated in the Decision-making Process Unit at the beginning of the school year. Discuss advocacy and how leadership skills can make a person a more effective advocate for the sexual health of youth in his/her community.</p>
Direct Instruction: mini-lecture and demonstration	<p>Draw attention to the wall chart of the Decision-making Process and Step 3 of Level B, Make an Informed Decision. Step 3 includes three aspects:</p> <ul style="list-style-type: none"> stating a challenge generating a list of alternatives to meet the challenge exploring the consequences of each alternative. <p>Lead the class through Step 3 in the following manner:</p> <ol style="list-style-type: none"> 1. State the following classroom challenge: “Our challenge is to promote strategies to improve the sexual health of youth in our community.” Remind students that in Level A, students researched sources that can help them in their health promotion. 2. Refer to the strategies or activities that were presented in the class discussion. Suggest that the task is to decide which one is best suited to their community, their leadership skills, and the challenge. 3. Remind students that in grades six to eight they explored the short-term and long-term consequences of alternatives as a means of selecting the best alternative to meet a specific challenge. Also, remind them of the specific selection criteria they studied in the Decision-making Process Unit at the beginning of the year.
Matrix (<i>Health Education: A Curriculum Guide for the Middle Level</i> , page 412)	<p>In order to compare the alternatives or activities selected by the students, provide criteria such as:</p> <ul style="list-style-type: none"> Time (time available) Cost (How much will it cost?) Support (What kind of support do I need and who can support me?) Challenge (Which alternative best meets the challenge?) Skills (Do I have the skills to complete?) Impact (Who and how does it impact?)
Talking Circle	<p>Insert student generated alternatives in the first column of the matrix and include criteria across the top. (See <i>Health Education: A Curriculum Guide for the Middle Level</i>, page 412). Review the elements of an effective goal statement while using a talking circle. Refer to the Grade 9 Decision-making Process Unit, Level B.</p>

<p>Instructional Strategies/Methods</p>	<p>Teaching Notes</p> <p>Have students read their challenge statement as it acts as a beginning point for creating a goal statement. Emphasize that student goal statements are to indicate what specifically the student is going to do to address the challenge.</p> <p>Example: “My goal is to promote sexual health of youth in my community by.....”</p> <p>Ask students to write their goal statements in their journals. Tell them to also include the determinant(s) of health (<i>what</i>) and the health promotion strategy (<i>how</i>) in their journal entry. Some students may choose to work alone to develop strategies to promote sexual health in their community. Other students may choose to work in pairs or small groups.</p> <p>Students who intend to design and carry out action plans on their own can work in pairs to help one another refine their goal statements to make them more specific. Ensure that students date and sign their goal statements, as they are submitted as part of their Level B assessment.</p>
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Student Assessment Techniques

Students’ abilities to generate and evaluate alternatives and consequences can be assessed by using a case study. Students’ matrices should also be included in student portfolios. Goal statements written by individual students can be used to assess the degree to which students can develop goals that are clear, specific, attainable, and measurable.

Assessment and Evaluation

Assessment is the process of gathering data while evaluation is the process of making a judgement based upon the data. The mark assigned to Level B should reflect students’ achievements as demonstrated in the data gathered throughout Level B.

Decision-making Process Level C – Carry Out Action Plan
 5. Design and apply an action plan.
 6. Evaluate progress. Revise as needed.

Learning Objectives:

Students will design action plans that include strategies to promote the sexual health of youth in their community.

Students will carry out their action plans and evaluate their implementation.

Students will revise their action plans upon specific criteria (CCT).

Instructional Strategies/Methods

Direct Instruction:
 Structured overview

Students are expected to carry out two action plans in Grade 9. Some students may choose to design and implement an action plan in this unit while others may not.

Students have used Appendix 9-G Selecting A Support Person to Monitor Leadership Skills (*Health Education: A Curriculum Guide For Middle Level Health*, page 407) in preparing previous action plans.

Direct Instruction

Teaching Notes

At this point in the unit, step-by-step action plans are created to achieve the goal statements declared at the conclusion of Level B. Using the wall chart of the Decision-making Process, provide an overview of what students can expect throughout Level C.

Review the elements of an effective action plan as presented in the Decision-making Process Unit taught at the beginning of the year. Remind students that “promote health” is the focus of Grade 9 Health Education.

Review also the students’ ideas for activities to promote the sexual health of young people in their community.

See Appendix 9-F (*Health Education: A Curriculum Guide for the Middle Level*, page 406) for a Sample 5WH Checklist for Planning. This checklist includes the elements of an effective action plan. Have students delete questions that may not pertain to this planning session. In addition, be sure to add specifics that apply to the students’ goal statements related to promoting the sexual health of youth. Provide time for students to complete the checklists.

The next step is for each student to select a peer support and an adult support person. Students need to identify what kind of support they need. They should pay particular attention to thinking about why these people are likely to be effective support people. Students should include their explanations as part of Level C assessment.

Provide students with examples of action plan outlines. A sample Action Plan Outline for Grade 9 is provided in Appendix 9-J (*Health Education: A Curriculum Guide for the Middle Level*, page 410) as a design option. Assign each student the task of completing a design form such as Appendix 9-J.

Review the following information about assessing and evaluating action plans:

assessment is the process of gathering information

evaluation is the process of making a judgement based upon the gathered information

the action plan is assessed in the design phase

implementation of the action plan is evaluated when it has been completed

the design elements of the action plan are assessed using a Sample Rubric for Evaluating the Elements of an Effective Action Plan to Promote Health, Appendix 9-H, in *Health Education: A Curriculum Guide for the Middle Level*, page 408.

implementation of the action plan is evaluated using rubric Appendix 9-I located in *Health Education: A Curriculum Guide for Middle Level*, page 409.

An optional Level A Learning Objective

Decision Making Process Level A – Extend Knowledge Base

1. Reflect on what you know.
2. Research the issue.

Learning Objectives:

Students will be aware of the responsibilities of parenthood.

Instructional Strategies/Methods

Cooperative Learning Groups

Allow students five minutes.

Teaching Notes

Before students enter your class, have one of the following scenarios on each desk. You can develop scenarios to fit your community and the cultures of your students.

Scenario #1

You are a 21 year old single father of two young children. You work a 50 hour week to provide for your family. Your children are five years and three years old. The oldest is in kindergarten while the youngest is in preschool. You live two hours away from any relatives.

Scenario #2

You live on reserve with your kokum, cousin, and three younger nieces and nephews. You already have responsibilities around helping to raise them. You are seven months pregnant and attend the small school on the reserve.

Scenario #3

You are a teenage father who has one full year of school left before graduation. You and the baby's mother are going to try to share the responsibilities of parenting but the baby will live with her and her parents. Both of your parents are willing to support your decisions but have said that the responsibilities around childcare are yours.

Scenario #4

You are a teenage mother who has just had her baby. You are to graduate from high school in five months. You can live with your parents until you graduate and then you need to find your own place. You are hoping to complete school as scheduled.

Ask the students to read their scenarios. Designate groups to discuss a scenario. Ask each group to list as many responsibilities of parenting as they can for each of the parents/grandparents in the scenarios. Each group needs to record their combined list on chart paper.

When groups are finished, ask them to tally their totals. Each group needs to appoint a reporter. Explain to students that the tallying will work as follows:

Each group will have the opportunity to share from their lists. The reporter will present one of the points from his/her list, aiming to present a point that one of the other groups does not have. When the point is presented, if another group has the same point, those group members stand or put up their hands. The reporting group and the other group(s) check off the point and put a one beside it.

If a group presents a point that no other group has, the members of the group check off the point and write a three beside it. The teacher should record the 'unique' answers on the board for later reference.

You allow each group to report one point at a time until each group has presented seven to 10 points.

Once the groups have reported a number of ideas, tell the groups that they are to write a two beside any remaining points that have not yet been presented.

Ask members of each group to individually tally their lists. (Having each member of each group record and tally their lists ensures they listen and pay attention as points are reported.)

Ask members of each group to come up with a consensus for their tally.

Students can report their tally numbers.

Instructional Strategies/Methods	Teaching Notes
Cooperative Learning Groups	<p>Discuss the parent responsibilities that are common to all parents of all family structures. Note that some responsibilities become more difficult depending on your age and your support systems.</p> <p>Divide the students into two groups. Ask group #1 to then create a list of the 20 most important parenting responsibilities. They can use ideas presented from the previous group activity. When they have completed their lists, ask the students to circle the responsibilities, that if they were to become parents tomorrow, they would be able to fulfill. Group members briefly describe how they would fulfill the responsibilities.</p> <p>Ask group #2 to create a list of emotional and physical needs that babies and small children have. When they have completed their lists, ask the students to circle the needs that if they were to be parents tomorrow, they would be able to meet and how.</p> <p>Conclude the lesson by asking students to respond in their journals to the following statement: "People who are unable to provide for the needs of a child should....."</p>

<p>Student Assessment Techniques</p> <p>Ask students to write a paragraph about the responsibilities that they could not fulfill as a parent. Tell them to include how or by whom these responsibilities would be fulfilled OR what would be the outcome for the child if those responsibilities were not fulfilled.</p> <p>Having students develop a list, in oral or written fashion, is an appropriate means of assessing growth related to their abilities to identify the responsibilities of parenthood and the resources that are necessary to meet these responsibilities.</p>

SOURCE FOR SEXUAL AND REPRODUCTIVE HEALTH INFORMATION

1. Name of Source: _____

2. Address and phone number:

3. Contact Hours: _____

4. The following information/services are provided from this source:

*

*

*

*

*

5. What is this source's policy on confidentiality?

**6. I would/would not use this source for information about sexual and reproductive health.
Why/not?**

ROLE PLAY IDEAS

Role Play #1

You are at a great party and there are tons of people there. You are standing around with your friend Steve when you see this girl over his shoulder. She smiles right at you. You continue to talk to Steve but every now and then you laugh really hard and look at her. She keeps smiling back, so you walk over to her. Conversation is great and everything is going fine and she even laughs at your jokes. Next thing you know, you are kissing. Then it gets all out of control. She is whispering to you to join her upstairs.

Anyway, she goes off and Steve comes over. He is really excited, going on about ‘taking my chances’ and ‘having it off’. You are really excited about the kiss and Steve is encouraging you. You know you are good at smooth talking, but you have actually never done ‘it’.

You go upstairs, and find her in the bedroom, with all the lights off. She is partially naked lounging on top of the coats that are on the bed. You think that you should say something – you are a virgin and you know that she wants to have sex. You are wondering about protection, but you assume she must have ‘done’ something about it as she is the one instigating the whole thing.

Role Play #2

You had known Jensen for ages, but it was not until Grade 10 that you started going out. That was two years ago and you have been together all that time. After about a year, you both felt you wanted to have sex; go all the way. You had nearly done ‘it’ anyway with all the hugging and fondling. Because you were friends and talked a lot, you talked about sex too. You were both going to attend the same college after graduation and planned on being together forever.

You were both really nervous, but talking and laughing really helped. Plus, you were able to make sure nothing drastic happened. Although you loved each other, you certainly did not want to make a mistake or to put your health at risk. You went to a health clinic together, sorted things out, and decided on your best prevention methods. You were very careful the first time, the second time, the third time..... but then you became careless with your protection.

Sexually Transmitted Infections Chart

INFECTION	DIAGNOSIS	SYMPTOMS	ENDANGER HEALTH	TREATMENT	PREVENTION
HERPES					
HIV/AIDS					
GONORRHEA					
SYPHILLIS					
CHLAMYDIA					
PID					
HPV GENITAL WARTS					
HEPATITIS B					