LONGVIEW
PUBLIC SCHOOLS
CREATING THE FUTURE TODAY

Relationships & Sexual Health Unit

High School

Relationships & Sexual Health Unit

Materials

1. FLASH Curriculum (parts of)
2. Comprehensive Health Skills for High School Textbook
    a. Chapter 3
    b. Chapter 14
    c. Chapter 21
    d. Chapter 22
3. Videos
    a. Healthy vs. Unhealthy relationships/Dating
        i. Because I love you PSA https://www.youtube.com/watch?v=4JYyHa03x-U
    b. Online safety
        i. Red Flags https://youtu.be/SroynZgVnXY
        ii. Sexting https://www.commonsense.org/education/videos/teen-voices-who-are-you-on-social-media
    c. STD Myths
        i. https://sexetc.org/videos/std-myths-2
        ii. Hey There Chlamydia https://www.youtube.com/watch?v=dcagS2eDmRs
        iii. Pregnancy
        iv. Life in the Womb https://www.youtube.com/watch?v=GE_ll86boUU
    d. Consent/Bystander
        i. Consent Tea https://www.youtube.com/watch?v=fGoWLWS4-kU
        ii. Bystander https://www.youtube.com/watch?v=BCgkJSXCu-E

Relationships & Sexual Health Unit

Essential Questions/Objectives/Targets

- ✓ How might understanding effective communication strategies assist in my relationships?
- ✓ How can identifying healthy and unhealthy relationship qualities keep me safe?
- ✓ How might understanding the risks of pregnancy and contracting STI's impact my decisions when considering being sexually active?
- ✓ How can I keep myself safe when communicating online?
- ✓ How can understanding the reproductive system functions inform my overall health?
- ✓ How can establishing boundaries in my dating relationships keep me safe and protect my goals in life?

Washington State Health Standards

- ✓ *Demonstrate effective communication skills to express emotions. H4.So4.HS*
- ✓ *Analyze potential dangers of sharing personal information through electronic media. H1.Sa3.HS*
- ✓ *Summarize fertilization, fetal development, and childbirth. H1.Se1.HSa*
- ✓ *Explain the role hormones play in sexual behavior and decision-making. H5.Se1.HS*
- ✓ *Evaluate how culture, media, society, and other people influence our perceptions of gender roles, sexuality, relationships, and sexual orientation. H2.Se3.HS*
- ✓ *Evaluate the effectiveness of abstinence, condoms, and other contraceptives in preventing pregnancy and STDs/HIV. H1.Se4.HSa*
- ✓ *List steps to using a condom correctly. H7.Se4.8*
- ✓ *Identify local youth-friendly sexual health services. H3.Se4.HS*
- ✓ *Differentiate between affection, love, commitment, and sexual attraction. H1.Se5.HSa*
- ✓ *Compare and contrast characteristics of healthy and unhealthy romantic and sexual relationships. H1.Se5.HSb*
- ✓ *Demonstrate effective ways to communicate with a partner about healthy sexual decisions and consent. H4.Se5.HS*
- ✓ *Analyze factors that can affect the ability to give or recognize consent to sexual activity. H2.Se5.HS*
- ✓ *Identify laws and concerns related to sending or posting sexually explicit pictures or messages. H1.Se6.HSb*

Stamps

Pages/Info	Date Due	Stamp

Learning that works for Washington
CTE™

Updated 12.2019

Longview School District
Family Health

Course: Family Health		**Total Framework Hours: 90 hours**
CIP Code: 190003	☒**Exploratory** ☐**Preparatory**	**Date Last Modified: 12/17/2019**
Career Cluster: Health Sciences		**Cluster Pathway: Health Informatics**

Relationships & Sexual Health Section Only

COMPONENTS AND ASSESSMENTS	
Performance Assessments: Individual Activity (I.A.) Assignments/Projects Interactive Notebook Communication & Relationship Quiz STD & HIV Quiz Relationship Do's & Don'ts Project	
Leadership Alignment: Individual Activity (I.A.) – Manage Projects, Produce Results, Be Self-directed Learners and Work Independently Relationship Project – Think Creatively, Make Judgements and Decisions, Be Self-directed Learners and Work Independently, Manage Projects	
Standards and Competencies	
Unit: Relationships & Sexual Health	
Industry Standards and/or Competencies 2.4 - Evaluate the effects of technology on individual and family resources in a global context. 2.4.2 - Analyze how media and technological advances influence family and consumer decisions 2.4.3 - Assess the use of technology and its effect on quality of life 6.1 - Analyze the effects of family as a system on individuals and society. 6.1.5 - Analyze the role of family in developing independence, interdependence, and commitment of family members. 7.5 - Evaluate services for individuals and families with a variety of conditions that could impact their well-being. 7.5.7 - Demonstrate effective verbal and nonverbal communication skills that support individuals and families with a variety of conditions that could affect their well-being. 12.3 - Analyze strategies that promote growth and development across the life span. 12.3.2 - Analyze the role of communication on human growth and development. 13.1 - Analyze functions and expectations of various types of relationships. 13.1.1 - Analyze processes for building and maintaining interpersonal relationships.	**Total Learning Hours for Unit:** 18

13.1.4 - Analyze factors that contribute to healthy and unhealthy relationships. 13.1.5 - Analyze processes for handling unhealthy relationships. 13.2 - Analyze personal needs and characteristics and their effects on interpersonal relationships. 13.2.5 - Explain the effects of personal standards and behaviors on interpersonal relationships. 13.3 - Demonstrate communication skills that contribute to positive relationships. 13.3.2 - Demonstrate verbal and nonverbal behaviors and attitudes that contribute to effective communication. 13.3.3 - Demonstrate effective listening and feedback techniques. 13.3.6 - Analyze the effects of technology on communications in family, work, and community settings.	
Aligned Washington State Standards	
English Language Arts	Writing (9-10) Production and Distribution of Writing 4. Produce clear and coherent writing in which the development, organization, and style are appropriate to task, purpose, and audience. Speaking and Listening (9-10) Comprehension and Collaboration 1 - Initiate and participate effectively in a range of collaborative discussions (one-on-one, in groups, and teacher-led) with diverse partners on grades 9–10 topics, texts, and issues, building on others' ideas and expressing their own clearly and persuasively.
Health and Physical Education	H1.Se1.HSa - Summarize fertilization, fetal development, and childbirth. H2.Se3.HS - Evaluate how culture, media, society, and other people influence our perceptions of gender roles, sexuality, relationships, and sexual orientation. H1.Se4.HSa - Evaluate the effectiveness of abstinence, condoms, and other contraceptives in preventing pregnancy and STDs/HIV. H3.Se4.HS - Identify local youth-friendly sexual health services. H1.Se5.HSa - Differentiate between affection, love, commitment, and sexual attraction H1.Se5.HSb - Compare and contrast characteristics of healthy and unhealthy romantic and sexual relationships. H2.Se5.HS - Analyze factors that can affect the ability to give or recognize consent to sexual activity. H3.Se6.HS - Describe laws related to accessing sexual health care services.

21st Century Skills

Check those that students will demonstrate in this course:

LEARNING & INNOVATION

Creativity and Innovation
- ☒ Think Creatively
- ☐ Work Creatively with Others
- ☐ Implement Innovations

Critical Thinking and Problem Solving
- ☒ Reason Effectively
- ☐ Use Systems Thinking
- ☒ Make Judgments and Decisions
- ☐ Solve Problems

Communication and Collaboration
- ☒ Communicate Clearly
- ☒ Collaborate with Others

INFORMATION, MEDIA & TECHNOLOGY SKILLS

Information Literacy
- ☒ Access and Evaluate Information
- ☐ Use and Manage Information

Media Literacy
- ☒ Analyze Media
- ☐ Create Media Products

Information, Communications and Technology (ICT Literacy)
- ☒ Apply Technology Effectively

LIFE & CAREER SKILLS

Flexibility and Adaptability
- ☒ Adapt to Change
- ☐ Be Flexible

Initiative and Self-Direction
- ☒ Manage Goals and Time
- ☒ Work Independently
- ☒ Be Self-Directed Learners

Social and Cross-Cultural
- ☒ Interact Effectively with Others
- ☐ Work Effectively in Diverse Teams

Productivity and Accountability
- ☒ Manage Projects
- ☒ Produce Results

Leadership and Responsibility
- ☐ Guide and Lead Others
- ☒ Be Responsible to Others

Sexual Health Unit Quiz

Name: _____

Communication, Relationships, Dating, Reproductive Systems, Pregnancy, STD's, Birth Control, Consent, Bystander

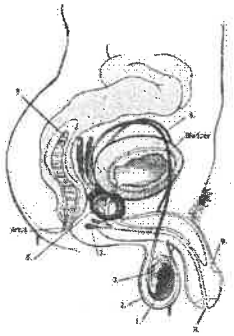
Question 1 (9 points)

Match the steps to using a condom in the right order.

___	1. Step 1	A. Roll condom down erect penis
___	2. Step 2	B. Check expiration date
___	3. Step 3	C. Throw condom in garbage
___	4. Step 4	D. Pinch tip of condom
___	5. Step 5	E. Intercourse with condom
___	6. Step 6	F. Hold condom onto penis while pulling out
___	7. Step 7	G. Carefully open package
___	8. Step 8	H. Take condom off
___	9. Step 9	I. Ejaculation with condom

Question 2 (1 point)

Using the attachment, identify #6 on the diagram.



___ A. cowper's gland

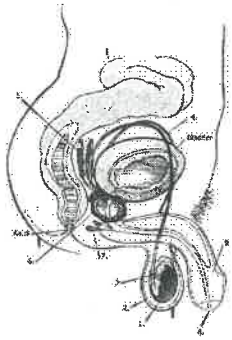
___ B. ovary

___ C. prostate gland

___ D. urethra

Question 3 (1 point)

Using the attachment, identify #2 on the diagram.



___ A. cervix

___ B. testicle

___ C. urethra

___ D. scrotum

Question 4 (1 point)

A healthy dating relationship includes constant arguing and disagreements.

___ True ___ False

Question 5 (1 point)

General symptoms of an STD may include all of the following EXCEPT which one?

___ A. discharge

___ B. pelvic pain

___ C. coughing and sneezing

___ D. painful urination

Question 6 (2 points)

Warning signs of an unhealthy or abusive relationship may include (select 2 answers):

___ A. manipulation

___ B. comfortable pace

___ C. fun

___ D. guilting

Question 7 (1 point)

A female can become pregnant when she is menstruating (on her period.)

___ True ___ False

Question 8 (8 points)

Match each term with the correct definition.

___ 1. Passive	A. be clear; tone, pitch, volume
___ 2. Passive Aggressive	B. process of sending and receiving information
___ 3. Assertive	C. direct and respectful form of communication
___ 4. Aggressive	D. indirect and unfriendly form of communication
___ 5. Communication	E. concentrating on what is being said; acknowledge
___ 6. Speaking	F. hostile and unfriendly form of communication
___ 7. Listening	G. does not offer opposition
___ 8. Relationships	H. a bond or connection with others

Question 9 (1 point)

Consent is given when someone's behaviors indicate they want to participate in sexual activity.

___ True ___ False

Question 10 (1 point)

Open, effective communication is a sign of a healthy relationship.

___ True ___ False

Question 11 (1 point)

Some STD's have no symptoms.

___ True ___ False

Question 12 (1 point)

Emotions could be a barrier to effective communication.

___ True ___ False

Question 13 (1 point)

The hormone that is released one week after implantation of a fertilized egg (and can be detected with a urine test) is called what?

___ A. HDL

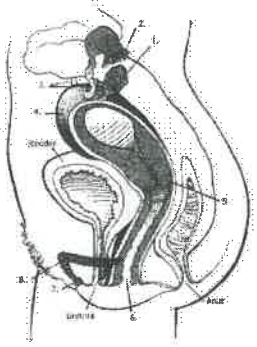
___ B. HIV

___ C. HOV

___ D. HCG

Question 14 (1 point)

Using the attachment, identify #6 on the diagram.



___ A. ovary

___ B. vagina

___ C. prostate

___ D. clitoris

Question 15 (1 point)

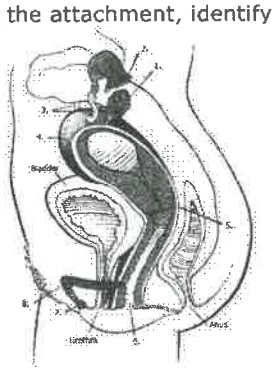
Read the scenario and identify what type of relationship it is.
Your partner calls and texts you all the time to check up on you.

___ A. Healthy relationship

___ B. Unhealthy relationship

Question 16 (1 point)

Using the attachment, identify #3 on the diagram.



___ A. vas deferens

___ B. fallopian tube

___ C. cervix

___ D. fimbria

Question 17 (1 point)

Consent is when both people verbally say "yes" to engage in sexual activity.

___ True ___ False

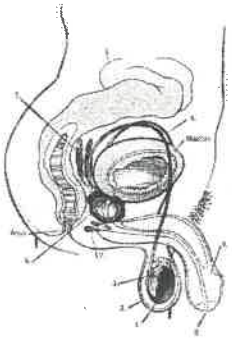
Question 18 (1 point)

A bystander is someone who witnesses an incident but does not do anything to intervene or help.

___ True ___ False

Question 19 (1 point)

Using the attachment, identify #8 on the diagram.



___ A. penis

___ B. urethra

___ C. vagina

___ D. prostate

Question 20 (1 point)

Cowlitz County has a very high rate of which STD?

___ A. Syphilis

___ B. Gonarreah

___ C. HIV

___ D. Chlamydia

Question 21 (1 point)

Ovulation is when the fallopian tube releases an egg.

___ True ___ False

Question 22 (1 point)

The only 100% effective way to prevent pregnancy and STD contraction is

___ A. Spermicide

___ B. Condoms

___ C. The Pill

___ D. Abstinence

Question 23 (1 point)

Condoms and spermicides are examples of hormonal birth control.

___ True ___ False

Question 24 (2 points)

When in a dating relationship, a person should consider two of the following when it comes to physical intimacy (select 2 answers.)

___ A. Sexual activity is part of all dating relationships.

___ B. Know your physical boundaries before dating.

___ C. Don't date someone who pressures you to be physically intimate.

___ D. Keep physical intimacy boundaries a secret.

Question 25 (1 point)

Hormonal birth control can be prescribed to males.

___ True ___ False

Question 26 (1 point)

Abstinence is the only 100% way to prevent STD transmission and pregnancy.

___ True ___ False

Question 27 (1 point)

Spoken and written words (letters, texts, etc.) are examples of which type of communication?

___ A. Verbal

___ B. Non-verbal

___ C. Both verbal and non-verbal

___ D. Neither verbal and non-verbal

Question 28 (1 point)

Maintaining one's individuality is important in healthy dating relationships.

___ True ___ False

Question 29 (1 point)

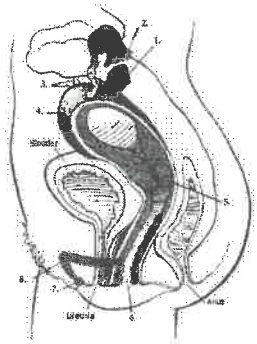
Read the scenario and identify what type of relationship it is.
If you have a disagreement, your partner uses the silent treatment and won't talk to you for days.

___ A. Healthy relationship

___ B. Unhealthy relationship

Question 30 (1 point)

Using the attachment, identify #4 on the diagram.



___ A. uterus

___ B. cervix

___ C. vagina

___ D. testicle

Cover over 2 class periods

Communication

- Exchange of spoken or unspoken messages between people

BRAINSTORM

- What are the different ways we communicate?
  - Past
  - Present

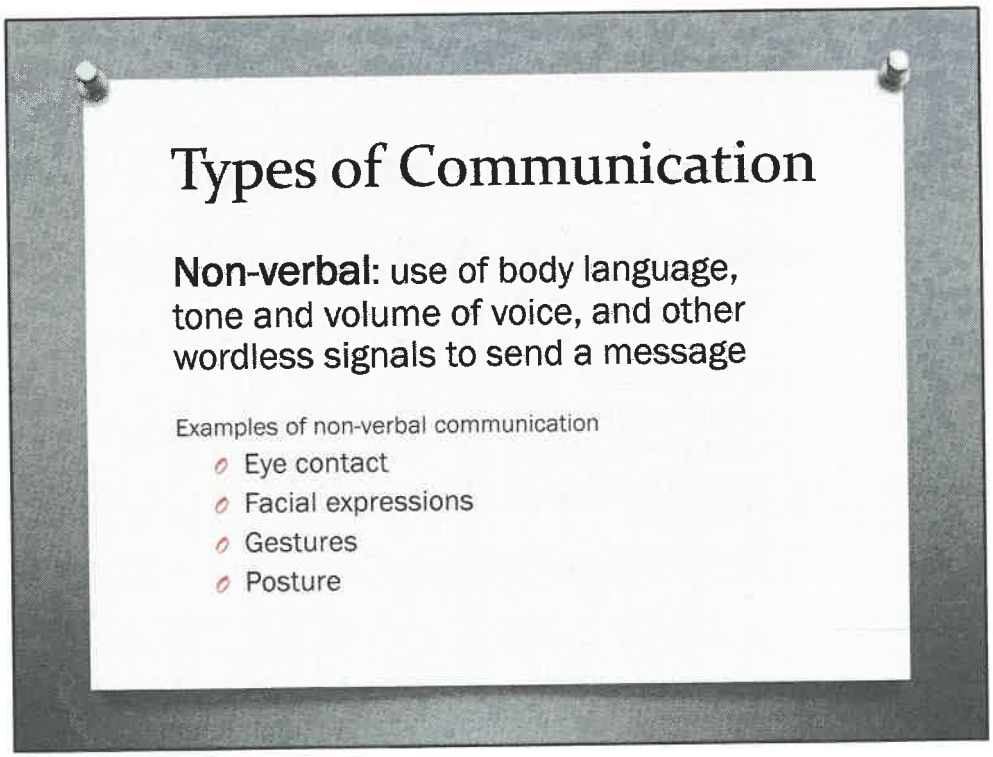
Types of Communication

Verbal: use of words, spoken or written, to send a message

Examples of verbal communication

- Face to face
- Phone calls
- Texting
- Email
- Social media posts
- Letters, notes

Every day conversation, text messages, phone calls, emails, social media, letters/notes



Eye contact, gestures, facial expressions, posture

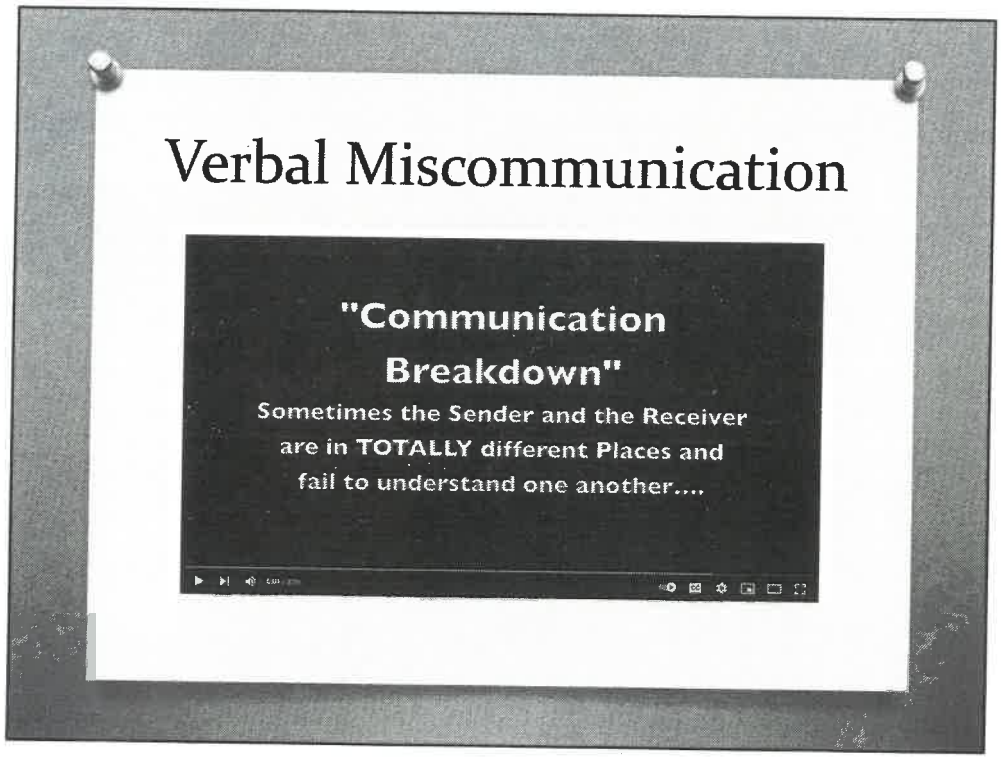
Non-verbal Example

https://www.youtube.com/watch?v=0cIo0PkBs2c

Let's try it!

NON-VERBAL TASK

Without speaking or making sounds, use only non-verbal ques to get in line according to your birth month and day.



https://www.youtube.com/watch?v=7di5zAMMxaI

Let's try it!

VERBAL TASK

Using your speaking skills, get in line according to your birth month, day AND year.

Speaking & Listening

Speaking

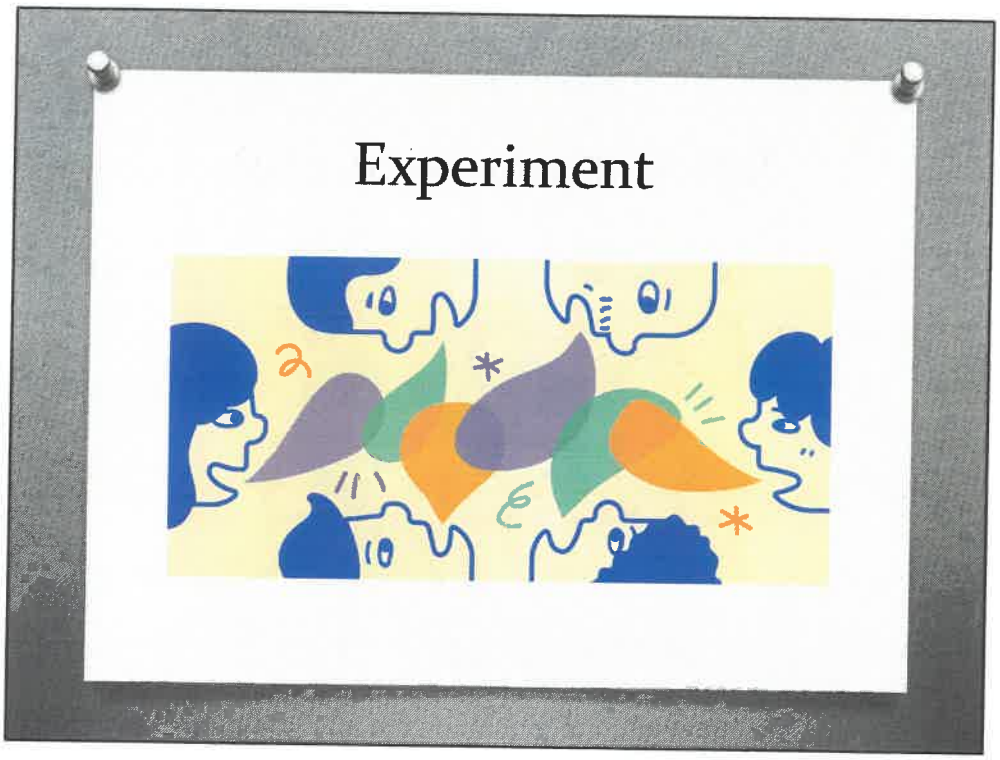
- Say clearly what you mean (wants, needs, opinions, emotions)
- Tone of voice, volume, pitch
- Not **WHAT** you say but **HOW** you say it

Active Listening

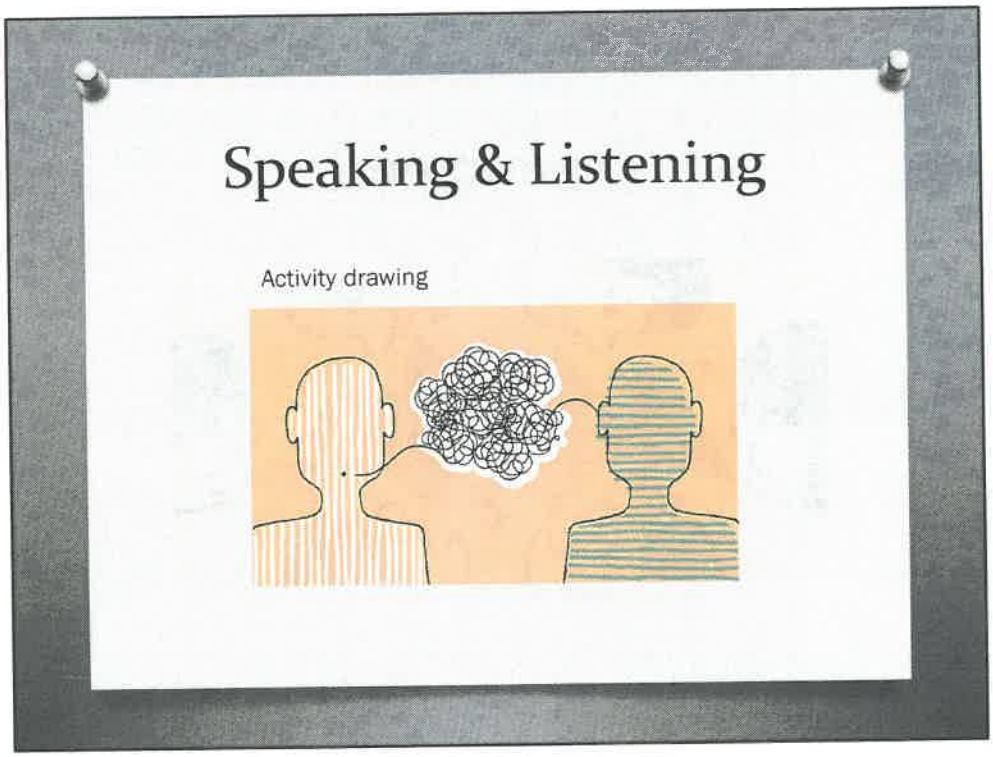
- practice of concentrating on what a person is saying
- Focus attention
- Acknowledge & repeat (FEEDBACK)

Feedback

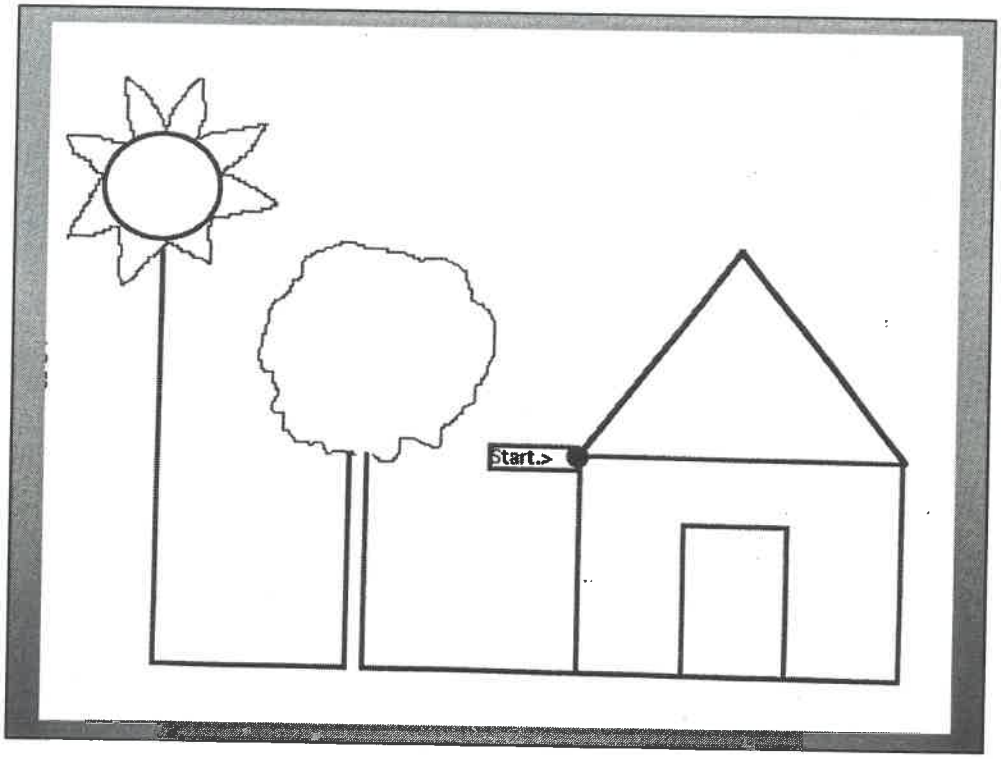
- A response that signals a message has been received and understood
- Constructive response to a message



Groups of 3 – different speaking/listening tasks



drawing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Communication Styles

Passive	Aggressive	Passive-aggressive	Assertive
Hiding or not clearly stating needs, wants & feelings; Does not offer opposition	Making demands of and insulting others; Hostile and unfriendly	Using techniques that DO NOT clearly state needs, wants, and feelings to make demands of and insult others	Clearly stating needs, wants, and feelings; Direct and respectful

Communication Styles

- Example: Your sibling borrowed your favorite piece of clothing and ruined it.

Passive	Aggressive	Passive-aggressive	Assertive
Not saying anything and throwing the shirt away	Call your sibling a jerk and threaten to ruin something of theirs	Walk away while saying something negative or disrespectful in a sarcastic tone	Explain that this was your favorite and it makes you sad that it is ruined

"I" Messages

vs.

"You" Messages

- "I" messages
  - Words that explain how the speaker feels without judging the receiver
  - Ways of talking to explain how you feel by remaining firm, calm & polite
  - Used to address issues & resolve conflicts
  - Comes across less threatening
- "You" messages
  - Accusing words and puts others on the defensive
  - Can create conflict

- **"I (how you feel) when (the what or why)..." Then be assertive with what you need/want.**

Example

- Suppose you are trying to study for a test and your sibling is playing music so loud that you aren't able to concentrate.

- "You" message
  - "You are so rude. You need to turn that down so I can study!"
- "I" message
  - "I can't study for my test with the music so loud. Can you please turn it down?"

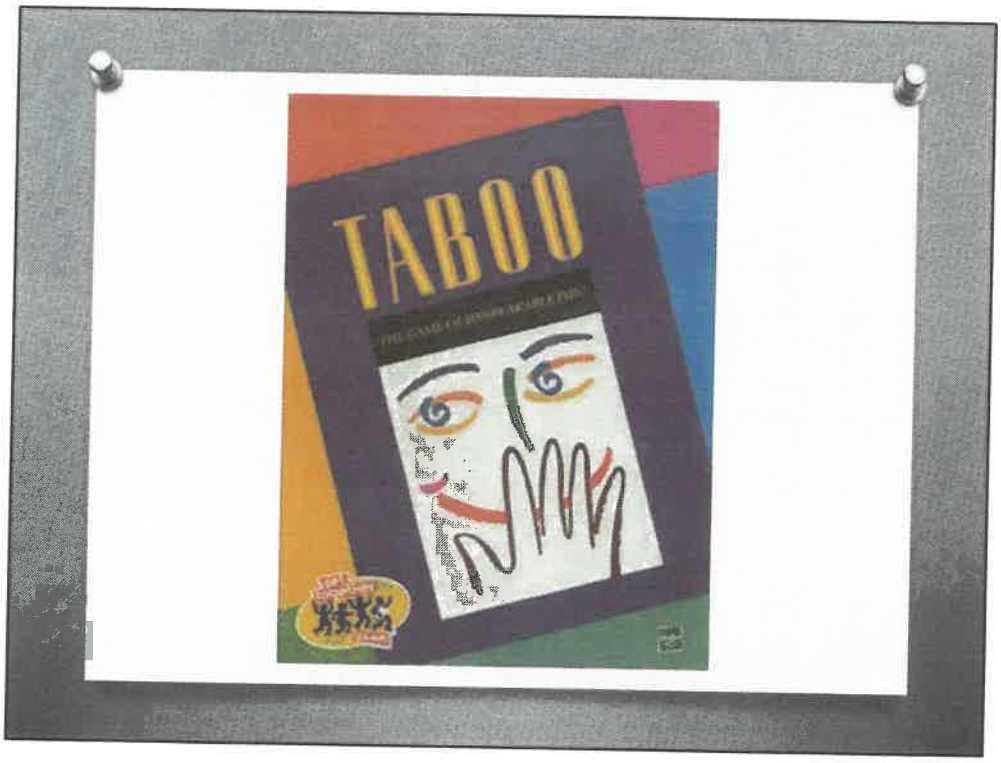
https://www.youtube.com/watch?v=OvEci5Bjgd4

Barriers to effective communication

What would cause communication to break down and possibly create conflict?

1. Different priorities
2. Different values
3. Different goals
4. Different needs
5. Misunderstandings

The F experiment
Page 76 Quiz – What kind of communicator are you?


TABOO

Communication and Refusal Skills

Communication Tips

Use I-statements ("I think ...", "I want ...")
- I only want to have sex with a condom.
- I won't have sex with someone who has been drinking.

Express opinions ("I believe ...")
- I believe people shouldn't have sex without protecting themselves.
- I believe people shouldn't have sex unless they are married.

State your strengths and abilities ("I can ...")
- I can buy condoms so we have them when we need them.
- I can wait to have sex until I am ready.

Say NO firmly but respectfully.
- No, I won't have sex without a condom.
- No, I don't want to go to your car.

Ask for what you want.
- I want to wait to have sex until we've been together longer.
- I want to have sex, but only if we use a condom.

Express positive feelings and/or appreciation.
- I love you and I'm glad we're together.
- I appreciate how you listen to me and take my feelings seriously.

Refusal Skills

Say NO and clearly state what you don't want to do.
- No, I don't want to have sex yet.
- No, I don't want to do that.

Explain why.
- I'm worried about getting you pregnant.
- I don't have sex with people I just met.

Suggest an alternative.
- We can go to the store up the street and buy some condoms.
- I don't want to go upstairs, but we can keep talking here with everyone else.

Leave if you need or want to.
- My mom is calling, I have to go home.
- We are done talking about this. I am leaving.

"I" Statements

When a person feels that they are being blamed—whether rightly or wrongly—it's common that they respond with defensiveness. **"I" statements** are a simple way of speaking that will help you avoid this trap by reducing feelings of blame. A good "I" statement takes responsibility for one's own feelings, while tactfully describing a problem.

"I feel *emotion word* when *explanation*."

- ✓ "I feel..." must be followed with an emotion word, such as "angry", "hurt", or "worried".
- ✓ Careful wording won't help if your voice still sounds blaming. Use a soft and even tone.
- ✓ In your explanation, gently describe how the other person's actions affect you.

Examples

Blaming	"You can't keep coming home so late! It's so inconsiderate."
"I" Statement	"I feel worried when you come home late. I can't even sleep."

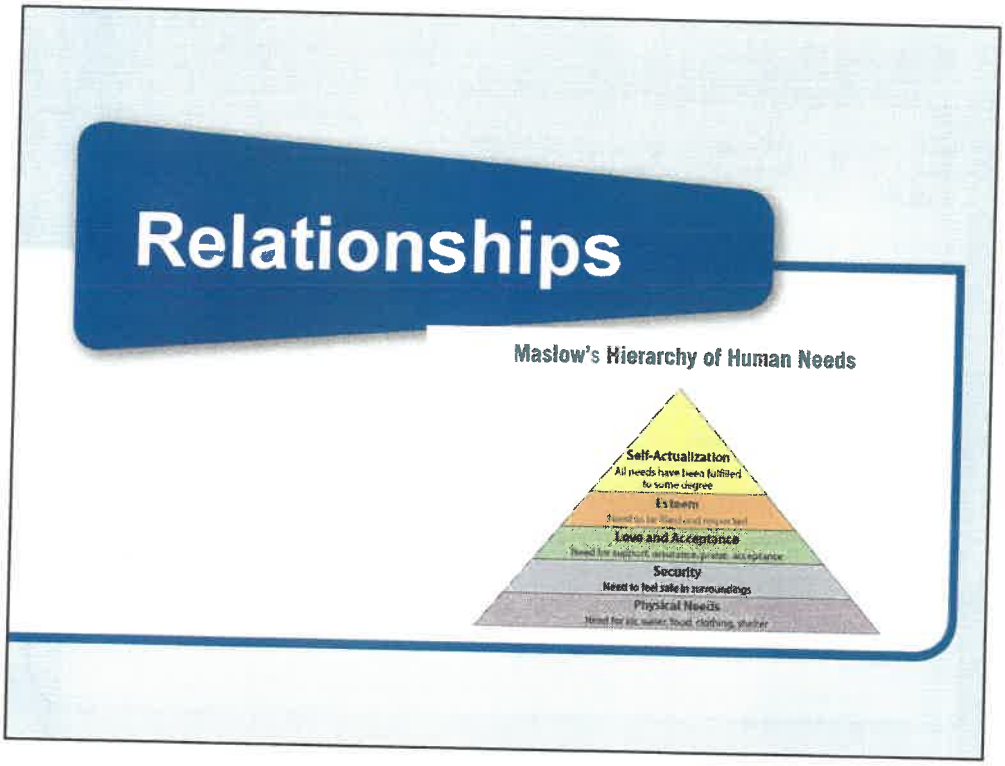
Blaming	"You never call me. I guess we just won't talk anymore."
"I" Statement	"I feel hurt when you go so long without calling. I'm afraid you don't care."

Practice

Scenario	A friend always cancels plans at the last minute. Recently, you were waiting for them at a restaurant, when they called to say they couldn't make it.
"I" Statement	

Scenario	You are working on a group project, and one member is not completing their portion. You have repeatedly had to finish their work.
"I" Statement	

Scenario	Your boss keeps dumping new work on you, with little instruction, and not enough time. Despite working overtime, you're weeks behind.
"I" Statement	



Skills Check page 468

Relationship

- connections that people form and maintain with others

BRAINSTORM

Why are relationships important?

Possible answers: support, influence health (positive & negative) meet basic human needs, belonging, learn about self,

Types of Relationships

What are different types of relationships?

1. Family
2. Peers - Friends
3. Romantic
4. Community

Discuss the importance of each and how they evolve. Have students name people under each category

Family

- Provides
  - Physical needs
  - Mental & emotional needs
  - Educate
  - Socialize

5. Parents, siblings, grandparents, aunts/uncles, cousins

6. Sibling rivalry, mischief, parent conflict (especially in teen years), changes (moving, loss of job, etc)

Friends

- Provides
  - Companionship
  - Trust/respect
  - Support
  - Learn about yourself

How do we make friends?

How has the way you make friends changed over time?

Romantic

- Provides
  - Close friendship
  - Companionship
  - Intimacy
  - Exclusive

Being romantically involved with one partner

Community

- Provides
  - Support
  - Guidance
  - Safety
- Examples
  - Teacher/Student
  - Coach/Player
  - Boss/Employee
  - Co-worker

Characteristics of a Healthy Relationship

Describe what we would see/feel in a healthy relationship.

Common characteristics:

honesty, trust, respect, care, commitment, support, emotional control, safety

Characteristics of an Unhealthy Relationship

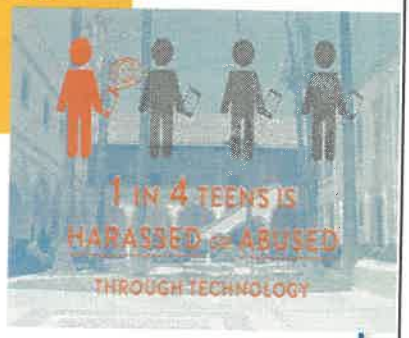
Describe what we would see/feel in an unhealthy relationship.

Common warnings:

angry outbursts, constant fighting, pressure, jealousy, threats, lack of respect

https://www.joinonelove.org/videos/

Digital Abuse: Phone and Social Media



Reading some else's texts/DMs

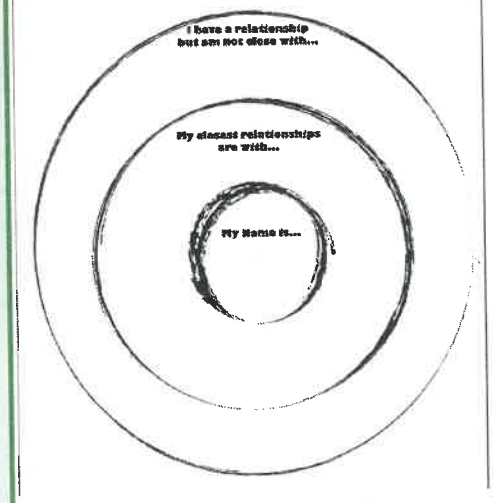
Threats via text/social media

Damaging their phone/device

Demanding constant access

Location sharing

Relationship Circle



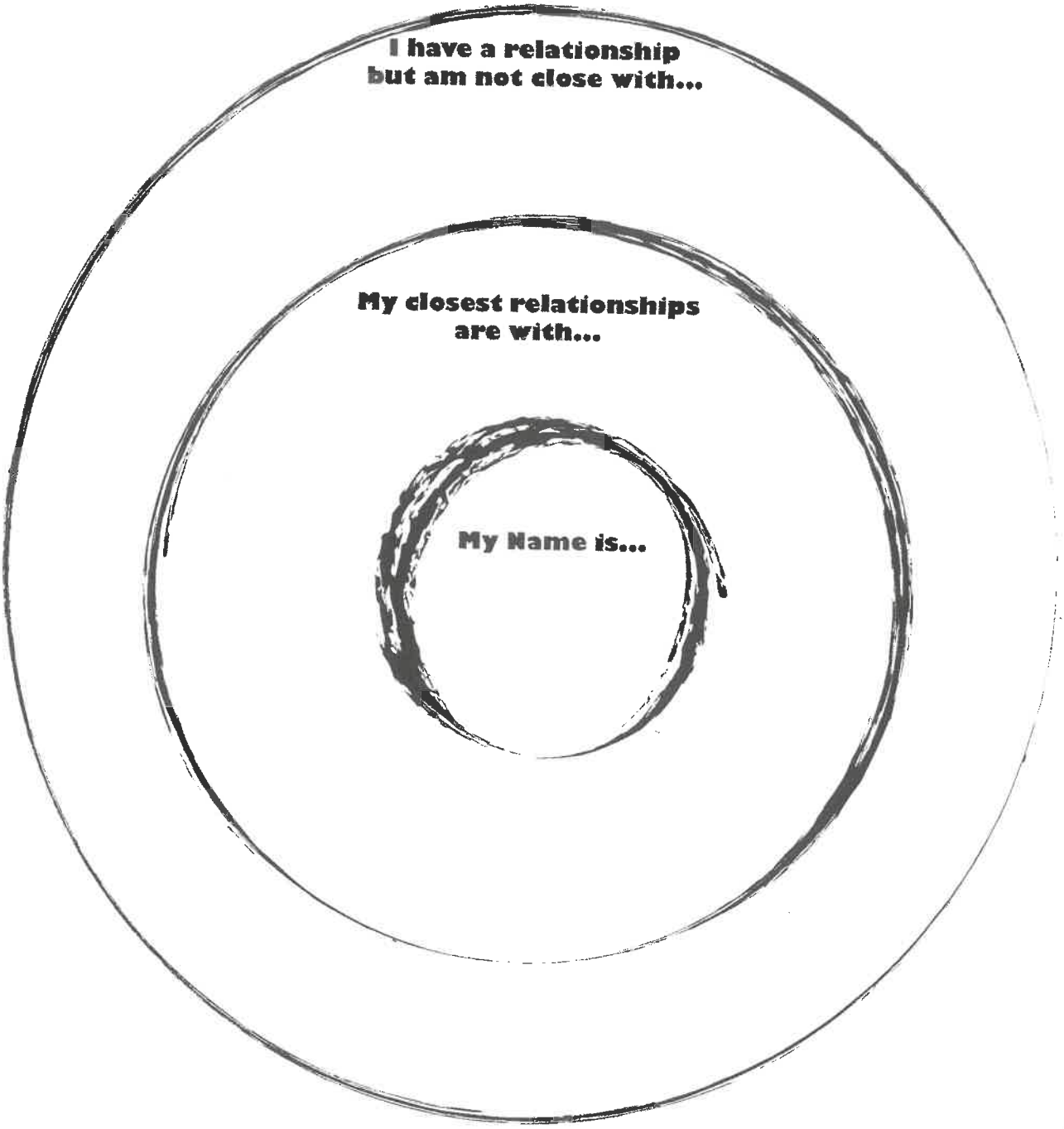
- Fill in the center with your name (regular pencil)
- Write the names of the closest people in your life in the next circle (favorite color)
- Write people you know but are not necessarily close with in the outer circle (second color)

Relationship Circle

- **Outside the circles,** write the ways you want to be treated by the people in your circles or what you are looking for in a relationship. (third color)

- Funny
- Weird or wacky
- Unique
- Older/younger than me
- Independent
- Honest
- Smart
- Artsy
- Good listener
- Supportive
- Cared for
- Challenged
- Movie fanatic
- Outgoing
- Adventurous
- Listened to
- Encouraged
- Trusted
- Respected
- Confident
- Nice to other people
- Liked by my family
- Committed to
- Loved
- Makes me laugh
- Likes animals
- Treats me as an equal
- Fun
- Loyal
- Stands up for themselves

Relationship Circle



Name _____ Date _____

Lesson 18.1

Resolving Family Conflicts

Family relationships are some of the most important relationships you will have in your life; however, it's not uncommon for conflicts to arise between family members. The following scenarios describe conflicts between teenagers and members of their families. After reading each scenario, offer each teen your advice for resolving the conflict.

1. Drew and his younger brother, Michael, are only a year apart. Last month, Michael got his driver's license and now he wants to use the car all the time. The two brothers are constantly fighting over who gets to drive the car. Since he's the oldest, Drew thinks he should be able to use the car more often than Michael. Their parents are sick of the fighting and have threatened to take the car away from both of them. What advice would you give Drew and Michael about resolving their conflict?

   _____

   _____

   _____

   _____

2. Isaac is pushing his parents to give him a later curfew. He has to be home by 10:00 p.m. on weekends, but all of his friends stay out until 10:30. Isaac doesn't understand why his parents won't extend his curfew—especially since it's only by a half hour. Every weekend night he goes out, he feels angry with his parents. What advice would you give Isaac and his parents about resolving their conflict?

   _____

   _____

   _____

   _____

3. Rafael's parents always tell him to put his cell phone away at the dinner table. Rafael can't understand why they get so upset—it doesn't take him long to send a text message or two between bites. It seems like he's always fighting with his parents about how much time he spends on his phone. Sometimes his parents even take his phone away. What advice would you give Rafael and his parents about resolving their conflict?

   _____

   _____

   _____

   _____

4. Olivia's younger sister, Chloe, has been getting on her nerves lately. Chloe comes into Olivia's room without knocking and she keeps wearing Olivia's clothes without asking. Yesterday, Olivia wanted to wear her favorite sweater, but she couldn't because Chloe had worn it and spilled spaghetti sauce all down the front. What advice would you give Olivia and Chloe about resolving their conflict?

   _____

   _____

   _____

   _____

Name _____ Date _____

Lesson 19.1

Resolving Conflict

Conflict is a normal part of everyday life, and it is not always bad. Engaging in conflict can have positive outcomes for yourself and your relationships. Understanding conflict—including what causes conflict and how best to prevent and resolve conflict—is important in developing and maintaining healthy relationships with others. For each scenario described below, explain how a resolution might be achieved.

1. Vincent's friend Jamey is having a party at his house on Saturday. Vincent knows, however, that his parents think Jamey is a negative influence and will not let him go. Jamey drinks alcohol, smokes marijuana, and occasionally skips classes at school. When Vincent approaches his parents about attending the party, they tell him that they will not discuss the matter and that they don't want Vincent to interact with Jamey outside of school. Vincent gets angry, leaves the room, and goes to his bedroom, slamming the door. What can Vincent and his parents do to resolve this conflict?

   _____

   _____

   _____

2. Mariska and George have been dating for a year. Mariska is involved in several extracurricular organizations and activities, and she finds it hard to spend quality time with George as well as her friends amid her hectic schedule. One afternoon, George tells Mariska that he is not happy with the way their relationship has been going. He irritably delivers an ultimatum: "You will reevaluate your priorities, or I will break up with you." What can George and Mariska do to resolve this conflict?

   _____

   _____

   _____

3. Steve and Jack are in the same trigonometry class. While Jack is doing exceptionally well in trigonometry, Steve is exasperated because he has been struggling to understand the material. Because Steve sits next to Jack in class, he asks Jack to let him copy his answers to the test questions. Jack replies, "Are you serious? I'm not jeopardizing my college scholarship so you can cheat, loser." Steve angrily tells his friend, "Thanks a lot. I'd help you out if you needed it." He gathers his books before issuing a sullen good-bye and leaves. What could Steve and Jack have done to resolve this conflict?

   _____

   _____

   _____

4. Marguerite's parents have asked her to babysit her 12-year-old sister on Saturday night so they can go out for a movie and dinner. Because of their busy work schedules, Marguerite's parents have not gone on a "date" or otherwise spent much time together for the past five months. Marguerite explains that the boy she likes at school has finally asked her for a date—on Saturday night. She is concerned that if she cancels the date, she will not be asked out again. "I always get stuck babysitting," Marguerite complains. What can Marguerite and her parents do to resolve this conflict?

   _____

   _____

   _____

DATING

KAHOOT.IT

- Can you identify healthy vs unhealthy signs in a relationship?

DATING

Why do people date?
- Reasons?
- Motivations?

What does "dating" look like?
- Past?
- Present?

PURPOSE OF DATING

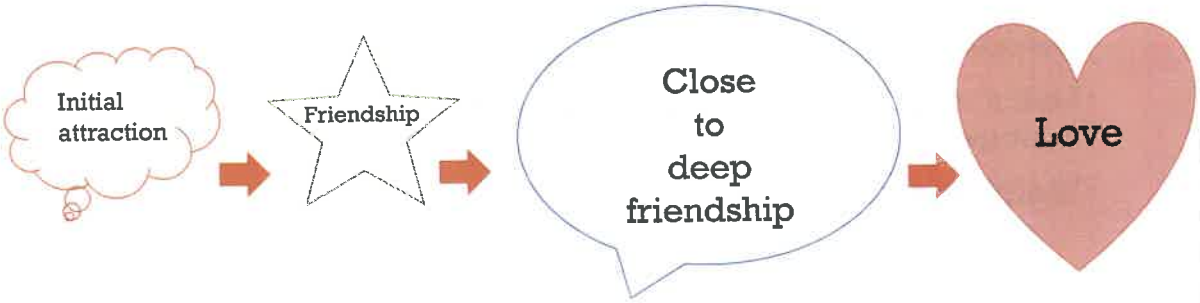
- ***Socialization***
  - To develop appropriate social skills
  - To practice getting along with others in different settings
  - Companionship or support
- ***Recreation***
  - To have fun and enjoy the company of others
  - To try new and different activities
  - Spend time with someone in various settings

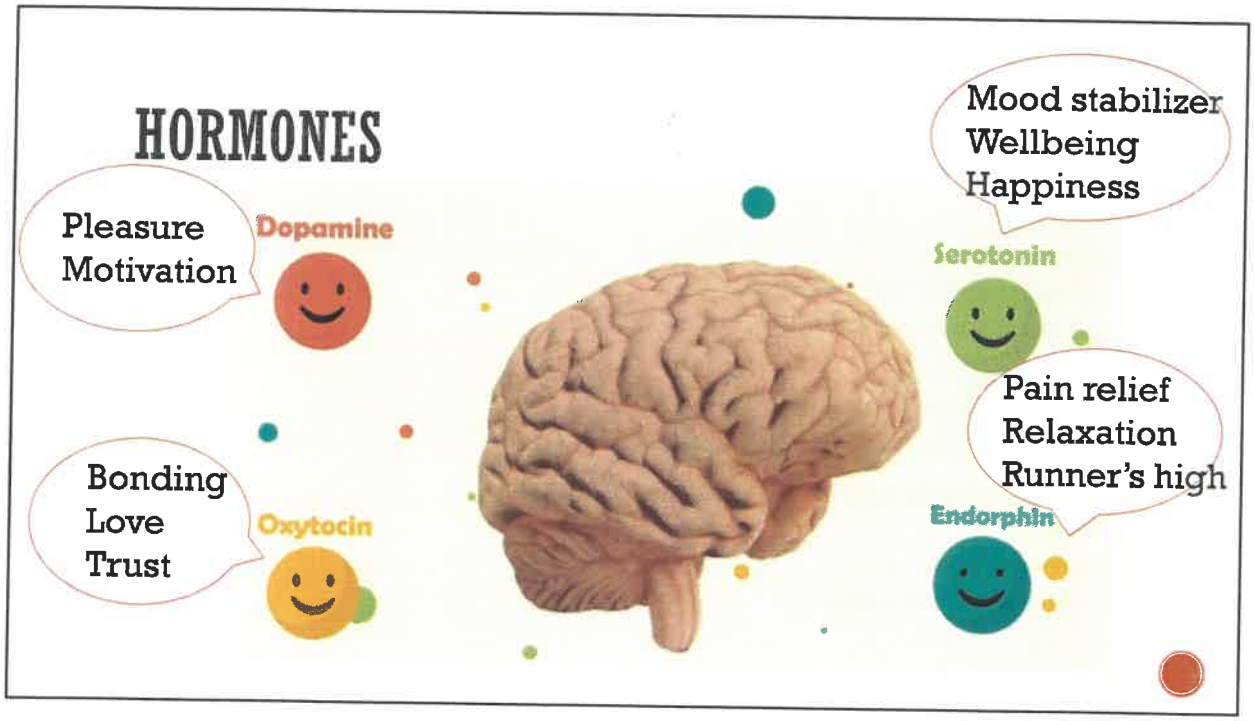
BENEFITS OF DATING

- Find out what different types of people are like
- Discover who you relate to
- Learn what types of qualities you want in a future spouse
- Identify your values

Getting to know a dating partner page 499

HEALTHY DATING RELATIONSHIPS START GRADUALLY…




HORMONES
Pleasure
Motivation
Dopamine
Mood stabilizer
Wellbeing
Happiness
Serotonin
Pain relief
Relaxation
Runner's high
Endorphin
Bonding
Love
Trust
Oxytocin

OBSTACLES WITH DATING

- Interfere with:
  - School/sports/extra-curricular
  - Friend/family relationships
- Experience less
  - Miss opportunities to get to know others
  - May not learn what/who you really like
- Increases pressure to be sexually active
  - STIs
  - Teen pregnancy
  - Emotional damaging

ROMANTIC INTIMACY

Feelings of emotional closeness and connectedness with another person; DOES NOT have to be physical

1. **Know your boundaries** before you start dating
2. Feel comfortable **telling your partner about your limits**
3. Use **effective communication skills** to keep the bond strong
4. A romantic relationship can exist **without sexual activity**
5. Be sure you **are not pressured** to engage in physical intimacy

BOUNDARIES

- Are you comfortable if your partner…
  - wants to hold hands?
  - gives you a kiss?
  - asks to use something of yours (phone)?
  - Calls/texts you several times a day?
  - likes knowing where you are?
  - asks you to send "sexts"?
  - asks you to hang out at their house alone?
  - tells you "I love you"?
  - wants you to sit on their lap or vice versa?
  - hangs out with you and your friends?

Other things to consider…

- What are your family rules about dating?
- What are your partner's family rules?
- What precautions are you going to take if you decide to be sexually active?
- How will you balance school, friends and a dating relationship?

SETTING BOUNDARIES

- Physical
  - Know your values
  - Don't rush into sex
  - You don't owe your partner anything
- Emotional
  - "I love you" happens at different times
  - Take time for yourself and others (not just your partner)
- Digital
  - Don't share passwords
  - Have digital boundaries (photos, sexting)

TEEN DATING ABUSE

- Pattern of physical, verbal, emotional and/or sexual abuse when dating

Because I Love You

https://www.joinonelove.org/videos/

Couples in a healthy relationship also argue, have different opinions, feel frustrated, insecure and bored at times. Healthy doesn't mean perfect. What makes a relationship perfect is HOW you choose to move through those challenges TOGETHER.

BREAKING UP

Coping with a Breakup

Be kind to yourself.

- Get enough sleep, eat nutritious foods, and get physical activity.
- Remind yourself it is normal to feel sad, hurt, embarrassed, or guilty after a breakup and it will get better with time.
- Remember your positive characteristics. If you find this difficult, ask your friends to remind you.

Share your feelings.

- Find someone to talk to. The people who love you can cheer you up.
- Friends, siblings, and particularly trusted adults have probably been through breakups of their own. They can remind you that your feelings are normal and will not last forever.

Keep yourself busy.

- Fill your time and thoughts with activities you normally enjoy.
- Find a new hobby by joining an after-school club, trying a new physical activity, or volunteering.

Give your ex space.

- No matter who initiated the breakup, exes may feel tempted to stay in each other's lives. Former dating partners can remain friends, but each person needs to allow the other space and time to heal.

Limit how much you see or hear about your ex.

- Block your ex on social media and tell your friends you do not want to hear about your ex. Hearing about or seeing what your ex is doing hurts your ability to move on.

Focus on the good.

- Try to find at least one reason to be grateful every day. This reminder will help shift your attention, even briefly, away from the bad onto what is good.

Page 502 in textbook

MY DATING PROTOCOL DISPLAY

10 Do's & 10 Don'ts

- 10 qualities I look for in a dating partner
  - *Not physical traits*
- 10 qualities that would make me not date someone
- Use color/pics/drawings

Advertisement

- Create an advertisement about who you are and what you are looking for in a dating partner
- Create "like" a page on a dating app

Create on paper or CANVA

What is Dating?

love is respect org

"Dating" means different things to different people, particularly across generations. At loveisrespect.org, we define "dating" as two people in an intimate relationship. The relationship may be sexual, but it does not have to be. It may be serious or casual, straight or gay, monogamous or open, short-term or long-term. The important thing to remember is that dating abuse can occur within all kinds of intimate relationships.

Types of Dating

You and your friends may use the word "dating" or you may not. People describe relationships in different ways. Whatever you call it, we want you to understand and feel comfortable with whatever type of relationship you are in. Some of the most commonly used words to describe dating are:

- Going out
- Together
- Being with someone
- Seeing each other
- Hubby/wifey status
- Just friends
- Friends with benefits
- Hooking up

Regardless of the label you use, you and your partner should both accept the same definition for your relationship.

Who is a Partner?

Simply put, a dating "partner" refers the person you're in a relationship with. A healthy partner is:

- Respecting
- Trustworthy
- Honest
- Dependable
- Supportive

Whether you're in a long-term, committed relationship or looking for casual dating experiences, you can still experience abuse. People who are lesbian, gay, bisexual, transgender or queer/questioning (LGBTQ) can be in abusive relationships too. In fact, studies show that dating violence occurs at the same rates in same-sex relationships as in opposite-sex relationships.

Everyone has the right to a healthy relationship. If you're "dating" someone now, take our quiz at loveisrespect.org and check where your relationship falls on the relationship spectrum.

What Should I Look for in a Partner?

Relationships require respect, trust and open communication. Whether you're looking for a relationship or are already in one, make sure you and your partner agree on what makes a relationship healthy. It's not always easy, but you can build a healthy relationship. Look for someone who will:

- Treat you with respect.
- Doesn't make fun of things you like or want to do.
- Never puts you down.
- Doesn't get angry if you spend time with your friends or family.
- Listens to your ideas and comprises sometimes.
- Isn't excessively negative.
- Shares some of your interests such as movies, sports, reading, dancing or music.
- Isn't afraid to share their thoughts and feelings.
- Is comfortable around your friends and family.
- Is proud of your accomplishments and successes.
- Respects your boundaries and does not abuse technology.
- Doesn't require you to "check in" or need to know where you are all the time.
- Is caring and honest.
- Doesn't pressure you to do things that you don't want to do.
- Doesn't constantly accuse you of cheating or being unfaithful.
- Encourages you to do well in school or at work.
- Doesn't threaten you or make you feel scared.
- Understands the importance of healthy relationships.

Remember that a relationship consists of two people. Both you and your partner should have equal say and should never be afraid to express how you feel. It's not just about speaking up for yourself -- you should also listen and seriously consider what your partner says.

Every relationship has arguments and disagreements sometimes -- this is normal. How you choose to deal with your disagreements is what really counts. Both people should work hard to communicate effectively.

Dating FAQ

love is respect org

These are a few frequently asked questions about dating. If you have questions of your own or need more information, chat with a trained peer advocates.

So, Are We Dating?

It's important that both you and your partner agree on a definition for your relationship. Whether you call it "dating" or something else, both people should agree on the same ground rules. Keep these questions in mind:

- Do you have romantic feelings for this person?
- Are you and the person you're interested in both looking for a committed relationship?
- Do you hang out or go on dates without a group of friends?
- Is the status of your relationship something you've shared online, like on Facebook?
- Do both people in the relationship agree that it's exclusive?

Does "Hooking Up" Count?

Hooking up is a broad term, but generally, it refers to casual encounters between two people who can be friends but don't have to be. They may or may not be monogamous and can include sex.

Even if you are just "hooking up," your partner should not be disrespectful or controlling. You should be able to communicate your feelings without being afraid of negative consequences or abuse. Remember the rules for a healthy relationship apply to hook ups too.

We're Not "Dating," How Can I Be Abused?

Abuse affects all types of relationships, not just long-term or committed relationships. Even if your relationship is casual or you've only hooked up once, you can still experience abuse. If something makes you uncomfortable, scared or threatened, you could be experiencing the warning signs of an unhealthy relationship.

Name: Period:

Instructions: *Imagine that you are in the following scenarios and your boundaries and limits are being threatened. Decide what you would do to enforce these boundaries. Then, answer the reflection question.*

Scenarios

1. You know that your dating partner loves you. You are afraid to express your limits around sexual activity, however, because you do not know how your partner will respond.

   A. What would you do to enforce your boundaries?

2. Your dating partner likes to text you late at night. You always want to talk to your partner, but you are exhausted the next day. You are beginning to get upset that your partner does not seem to care if you get enough sleep.

   A. What would you do to enforce your boundaries?

3. You have repeatedly communicated to your dating partner that you would like to spend more time with your friends. Your partner continues to get upset when you choose to spend time with other people.

   A. What would you do to enforce your boundaries?

Reflection Questions

1. Explain the importance of deciding on and communicating your boundaries early in a relationship.

2. Imagine that you do not enforce your boundaries. How might this affect a dating relationship? How might this affect your health?

3. What should you do if your dating partner does *not* respect your boundaries? Explain.

"My boyfriend used to be so nice to me, but lately he's changed. He makes jokes about my weight and calls me stupid, even in front of his friends. When I get upset, he laughs and says I'm too sensitive. If he loves me, why is he so mean?"

"My girlfriend is so jealous. She's always accusing me of cheating on her, even though I never have. If I even say hello to another girl, she goes nuts. Today she threw my phone against a wall just because she saw a text from someone she didn't know. Is this normal?"

"My boyfriend keeps asking me to text him sexy pictures of myself, even though he knows I don't want to. He says if I really loved him, I would do it. Should I do it?"

"My sister used to have so many friends until she started going out with her boyfriend. Now it's like he owns her. He decides who she sees and when, and even what she wears. The other day I saw bruises on her arm. She said she bumped into the door, but I know she's lying. What should I do?"

"Whenever my girlfriend doesn't know where I am, she blows up my phone. Lately, she's even started looking for me when I'm out with my friends. She says it's just because she loves me and worries about me, but I'm sick of her stalking me. Tonight I told her I was going to break up with her if this didn't stop, and she said she'd hurt herself if I did. Now I feel trapped."

"I love my boyfriend, but he's constantly checking my phone and my Facebook page. I've asked him to stop, but he says I shouldn't mind if I have nothing to hide. Is it wrong to want some privacy?"

Name: Period:

Instructions: *Read the following scenarios and answer the questions about the influences that may affect Aliah's decision to practice sexual abstinence.*

Scenario 1

Going into high school, all sorts of exciting new things are coming Aliah's way. She finally gets to drive, she has a new job, and she is going on dates. She does not think she is ready for a sexual relationship. She just wants to have fun without it getting that intense.

1. What factors may influence Aliah's decision to practice abstinence?

   Answer:

2. How might this decision be challenged throughout high school? How can Aliah overcome these challenges?

   Answer:

Scenario 2

Aliah has started dating someone and she feels completely comfortable with this person. She enjoys the physical intimacy with this person, but she always stops short of having sex because she does not want to deal with a pregnancy or STI. Even if the risk is small, it is a risk she does not want to have at all.

1. What factors influence Aliah's decision to practice abstinence?

   Answer:

2. What factors may influence Aliah's decision *not* to practice abstinence? How can she overcome these factors?

   Answer:

Scenario 3

Aliah knows that her best friend and her best friend's dating partner had sex last year and they have never felt closer or more intimate. Aliah fears that not progressing sexually in her relationship means that her relationship is not healthy. When she expresses her fears to her partner, her partner says that sexual compatibility is a big part of a long-term relationship.

1. What factors influence Aliah's decision to practice abstinence?

   Answer:

2. What factors may influence Aliah's decision *not* to practice abstinence? How can she overcome these factors?

   Answer:

Instructions: *Respond to the following lines pressuring you to have sex by respectfully and assertively saying "no" to sex. Include benefits of abstinence in your response.*

Pressure Lines

1. We have been dating for years and I love you. I want this night to be special for both of us.

   A. Provide a response:

2. Sex isn't that big of a deal. It won't change anything between us.

   A. Provide a response:

3. I know you want to try it. Let's just have fun and see what it's like.

   A. Provide a response:

4. I have always been here for you. If you really loved me, you would want to do this with me.

   A. Provide a response:

Name _____ Date _____

Lesson 18.3

Healthy versus Unhealthy Dating Relationships

Many people experience their first dating relationships during their teenage years. Learning how to distinguish between healthy and unhealthy dating relationships is an important skill. Read the following stories about teenagers and their dating relationships. Decide whether each couple seems to have a healthy or unhealthy dating relationship, and then explain how you came to that conclusion.

1. Chris and Hannah have been dating for three months. Hannah really likes Chris, but he's been acting jealous lately. Every day, he asks whom she is texting and gets upset if it's one of her male friends. Last week Hannah's friend Blake gave her a ride to the football game, and Chris was so angry he wouldn't speak to her for the rest of the night.

   A. Is this dating relationship healthy or unhealthy? _____

   B. Why? _____

2. Kai and Andy are involved in a lot of extracurricular activities, but they try to support each other as much as they can. Kai attends as many of Andy's baseball games as her busy rehearsal schedule allows; and when Kai was the lead in the school play, no one cheered louder for her than Andy.

   A. Is this dating relationship healthy or unhealthy? _____

   B. Why? _____

3. When Easton and Abby started dating last May, they had an open, honest discussion about how much time they should spend together. While they enjoy each other's friends, they decided that they should both make time to hang out with their friends alone. Last Friday, Easton went to a hockey game with his friends, while Abby had two of her friends over to watch a movie. On Saturday, the couple went out for ice cream together.

   A. Is this dating relationship healthy or unhealthy? _____

   B. Why? _____

4. Each morning, Owen leaves the house early so he can pick up his girlfriend, Katie, on his way to school. He tries to give Katie thoughtful gifts and do nice things for her, such as offering her rides because she doesn't have a car. Lately, though, Owen has been feeling like he's just Katie's chauffeur. When she forgot his birthday last week, his feelings were really hurt.

   A. Is this dating relationship healthy or unhealthy? _____

   B. Why? _____

How to Break Up Respectfully

When Relationships End

In the beginning, it's exciting. You can't wait to see your BF or GF — and it feels amazing to know that he or she feels the same way. The happiness and excitement of a new relationship can overpower everything else

Nothing stays new forever, though. Things change as couples get to know each other better. Some people settle into a comfortable, close relationship. Other couples drift apart.

There are lots of different reasons why people break up. **Growing apart is one.** You might find that your interests, ideas, values, and feelings aren't as well matched as you thought they were. **Changing your mind or your feelings about the other person is another.** Perhaps you just don't enjoy being together. Maybe you argue or don't want the same thing. You might have developed feelings for someone else. Or maybe you've discovered you're just not interested in having a serious relationship right now.

Most people go through a break-up (or several break-ups) in their lives. If you've ever been through it, you know it can be painful — even if it seems like it's for the best.

Why Is Breaking Up So Hard to Do?

If you're thinking of breaking up with someone, you may have mixed feelings about it. After all, you got together for a reason. So it's normal to wonder: "Will things get better?" "Should I give it another chance?" "Will I regret this decision?" Breaking up isn't an easy decision. You may need to take time to think about it.

Even if you feel sure of your decision, breaking up means having an awkward or difficult conversation. The person you're breaking up with might feel hurt, disappointed, sad, rejected, or heartbroken. When you're the one ending the relationship, you probably want to do it in a way that is respectful and sensitive. You don't want the other person to be hurt — and you don't want to be upset either.

Avoid It? Or Get it Over With?

Some people avoid the unpleasant task of starting a difficult conversation. Others have a "just-get-it-over-with" attitude. But neither of these approaches is the best one. Avoiding just prolongs the situation (and may end up hurting the other person more). And if you rush into a difficult conversation without thinking it through, you may say things you regret.

Something in the middle works best: **Think things through so you're clear with yourself on why you want to break up. Then act.**

Break-up Do's and Don'ts

Every situation is different. There's no one-size-fits-all approach to breaking up. But there are some general "do's and don'ts" you can keep in mind as you start thinking about having that break-up conversation.

DO:

- **Think over what you want and why you want it.** Take time to consider your feelings and the reasons for your decision. Be true to yourself. **Even if the other person might be hurt by your decision, it's OK to do what's right for you.** You just need to do it in a sensitive way.

- **Think about what you'll say and how the other person might react.** Will your BF or GF be surprised? Sad? Mad? Hurt? Or even relieved? Thinking about the other person's point of view and feelings can help you be sensitive. It also helps you prepare. Do you think the person you're breaking up with might cry? Lose his or her temper? How will you deal with that kind of reaction?

- **Have good intentions.** Let the other person know he or she matters to you. Think about the qualities you want to show toward the other person — like honesty, kindness, sensitivity, respect, and caring.

- **Be honest — but not brutal.** Tell the other person the things that attracted you in the first place, and what you like about him or her. Then say why you want to move on. "Honesty" doesn't mean "harsh." Don't pick apart the other person's qualities as a way to explain what's not working. Think of ways to be kind and gentle while still being honest.

- **Say it in person.** You've shared a lot with each other. Respect that (and show your good qualities) by breaking up in person. If you live far away, try to video chat or at least make a phone call. Breaking up through texting or Facebook may seem easy. But think about how you'd feel if your BF or GF did that to you — and what your friends would say about that person's character!

- **If it helps, confide in someone you trust.** It can help to talk through your feelings with a trusted friend. But be sure the person you confide in can keep it private until you have your actual break-up conversation with your BF or GF. Make sure your BF/GF hears it from you first — not from someone else. That's one reason why parents, older sisters or brothers, and other adults can be great to talk to. They're not going to blab or let it slip out accidentally.

DON'T:

- **Don't avoid the other person or the conversation you need to have.** Dragging things out makes it harder in the long run — for you *and* your BF or GF. Plus, when people put things off, information can leak out anyway. **You never want the person you're breaking up with to hear it from someone else before hearing it from you.**

- **Don't rush into a difficult conversation without thinking it through.** You may say things you regret.

- **Don't disrespect.** Speak about your ex (or soon-to-be ex) with respect. Be careful not to gossip or badmouth him or her. Think about how you'd feel. You'd want your ex to say only positive things about you after you're no longer together. Plus, you never know — your ex could turn into a friend or you might even rekindle a romance someday.

These "dos and don'ts" aren't just for break-ups. If someone asks you out but you're not really interested, you can follow the same guidelines for letting that person down gently.

What to Say and How to Say It

You've made the decision to break up. Now you need to find a good time to talk — and a way to have the conversation that's respectful, fair, clear, and kind. Break-ups are more than just planning what to say. You also want to consider how you will say it.

Here are some examples of what you might say. Use these ideas and modify them to fit your situation and style:

1. **Tell your BF or GF that you want to talk about something important.**

2. **Start by mentioning something you like or value about the other person.**
   For example: "We've been close for a long time, and you're important to me."
   Or: "I really like you and I'm glad we've gotten to know each other."

3. **Say what's not working** (your reason for the break-up).
   For example: "But I'm not ready to have a serious boyfriend right now."
   Or: "But you cheated on me, and I can't accept that."
   Or: "But we're arguing more than we're having fun."
   Or: "But it just doesn't feel right anymore."
   Or: "But there's someone else."

4. **Say you want to break up.**
   For example: "So, I want to break up."
   Or: "So I want us to be friends, but not go out."
   Or: "So I want to stay friendly, but I don't want to be your BF/GF anymore."

5. **Say you're sorry if this hurts.**
   For example: "I don't want to hurt you."
   Or: "I'm sorry if this isn't the way you wanted things to be."
   Or: "I'm sorry if this hurts you."
   Or: "I know this is hard to hear."

6. **Say something kind or positive.**
   For example: "I know you'll be OK."
   Or: "I know we'll always care about each other."
   Or: "I'll always remember the good times we had."
   Or: "I'll always be glad I got to know you."
   Or: "I know there's another girl/guy who will be happy to have a chance to go out with you."

7. **Listen to what the other person wants to say.** Be patient, and don't be surprised if the other person acts upset or unhappy with what you've said.

8. **Give the person space.** Consider following up with a friendly message or conversation that lets your ex know you care about how s/he is doing.

Relationships Help Us Learn

Whether they last a long time or a short time, relationships can have special meaning and value. Each relationship can teach us something about ourselves, another person, and what we want and need in a future partner. It's a chance for us to learn to care about another person and to experience being cared about.

A break-up is an opportunity to learn, too. It's not easy. But it's a chance to do your best to respect another person's feelings. Ending a relationship — as hard as it is — builds our skills when it comes to being honest and kind during difficult conversations.

Reviewed by: KidsHealth Medical Experts

NEMOURS CHILDREN'S HEALTH.

RELATIONSHIPS & COMMUNICATION

We know the power of words & actions.

DIGITAL CITIZENSHIP | GRADE 9

Chatting and Red Flags

common sense education®

Essential Question

How can you tell when an online relationship is risky?

Learning Objectives

1. Identify the types of messages that might cause a red flag feeling for someone.
2. Use the Feelings & Options thinking routine to analyze and respond to a situation involving a red flag feeling.

WARM UP: Google Form

Think about what you share through digital media: text messages, social media, messaging apps, etc. How much of the real you comes through?

How is the *you* that you present through digital media different from the *you* face-to-face?

Directions:

Take a moment to think about the prompt. Then, record your answers on the back of the sheet.

WATCH + DISCUSS

Discuss:

- How are the chat messages in this video misleading?

- Discuss

KEY VOCABULARY

Grooming (online)

When someone older uses chatting or messaging to befriend and manipulate a child or teenager into an in-person meeting for the purpose of sexual abuse or sex trafficking

KEY VOCABULARY

Red Flags - A Warning Sign

When something happens that makes you feel uncomfortable, worried, sad, or anxious. (Just seems off or out of the norm)

KEY VOCABULARY

Red Flags -

Not always with a stranger, you could get a Red Flag feeling when you are with someone you know. (Ex. they ask you to share a picture of yourself with them, ask you for your address, school, or to keep your relationship a secret.)

Other red flag things they might say **"If you really like me, you would..."** or **"No one understands you like do."**

Feelings & Options

Identify. Who are the different people involved in the scenario? What dilemma or challenge are they facing?

Feel. What do you think each person in the dilemma is *feeling*? Why might the situation be hard or challenging for each of them?

Imagine. Imagine *options* for how the situation could be handled. Come up with as many ideas as possible. Then, choose which option might lead to the most positive outcome, where most people feel good or taken care of.

Say. Thinking more about the idea you chose for handling the situation, what could the people involved say? Be as specific as possible.

Directions

Read Scenario & Questions: Part 1

Identify: Who are the different people involved in the scenario?

Feel: What do you think Sheyna is feeling? Why might the situation be hard or challenging for her?

Imagine: Imagine how Sheyna could handle the situation. Come up with as many ideas as possible: There is no 'right' answer! Then, circle which option might lead to the most positive outcome.

Say: What could Sheyna say? How should she say it?

Part 2: Possible Scenarios: What Should Sheyna **Say**?

1. What if Sheyna tries to change the subject to avoid sending a picture, but Nick keeps bringing it up?
2. What if Nick threatens to sabotage Sheyna's chances of becoming a CIT if she doesn't share a picture?
3. What if Sheyna sends a picture to Nick, and Nick ends up showing it to other people?
4. What if Sheyna ignores Nick, but Nick keeps finding ways to communicate with Sheyna?

Remember:

When you have a red flag feeling, slow down, pause, and think about how you're feeling and how you should proceed safely.

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Boundaries

Sheyna's Situation

NAME

DATE

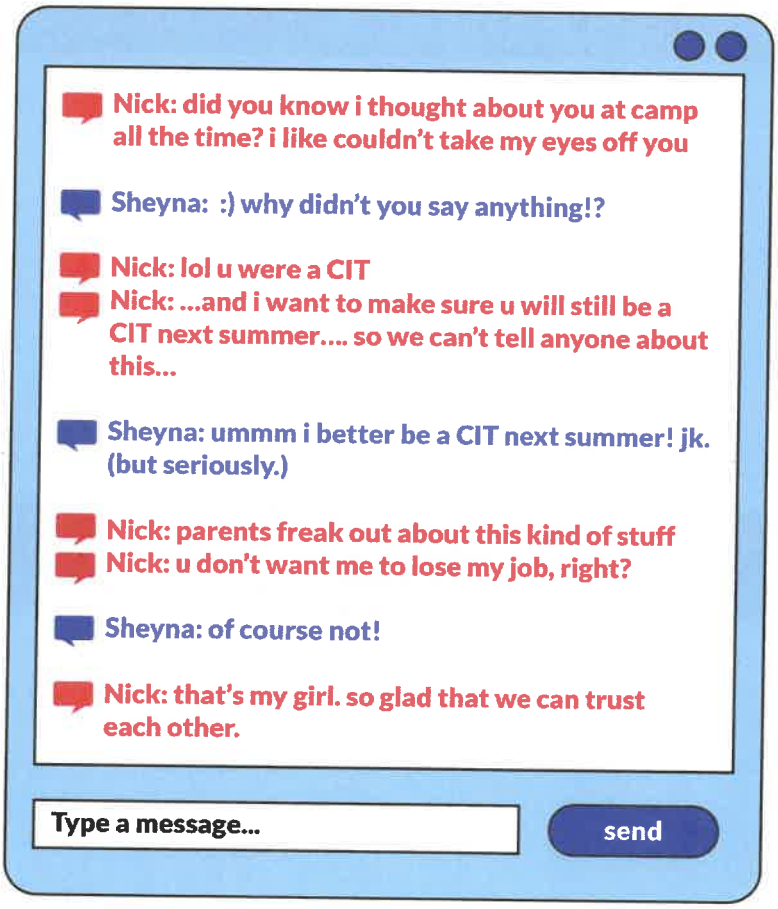
Part 1 Directions:

Read the scenario. Then use the "Feelings & Options" thinking routine to answer the questions below.

Sheyna just started her freshman year of high school and has recently started exchanging messages with Nick, who is the assistant director at the day camp she attended over the summer. He just graduated from college and lives a few hours away.

Sheyna messages about how much she misses camp and how she's frustrated with her friends. Nick is funny, flirty, and great at giving advice. "Those girls sound so immature," he tells her. "You might as well be in college. Seriously. You act way cooler than any 14-year-old I know."

One day Sheyna and Nick have the following exchange (CIT stands for "counselor in training"):



Nick then asks Sheyna to send him some pictures of her in her bathing suit at camp. Sheyna is flattered, but it makes her feel a little uncomfortable. Nick always talks about how mature she seems. She doesn't want to make him think otherwise.

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GRADE 9: CHATTING AND RED FLAGS

Sheyna's Situation

NAME

DATE

Identify: Who are the different people involved in the scenario? What dilemma or challenge are they facing?

Feel: What do you think Sheyna is feeling? Why might the situation be hard or challenging for her?

Imagine: Imagine how Sheyna could handle the situation. Come up with as many ideas as possible: There is no "right" answer! Then, circle which option might lead to the most positive outcome.

Sheyna's Situation

NAME

DATE

Say: Thinking more about the idea you chose for handling the situation, what could Sheyna say?

First: How would she say it?

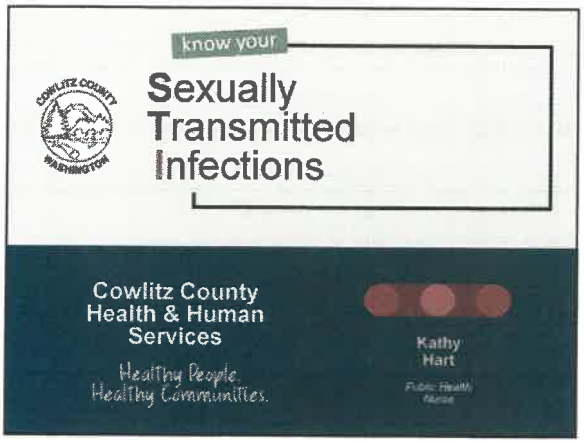
- In Person
- Call or FaceTime
- Text
- Direct/private message
- Email
- Other:_____

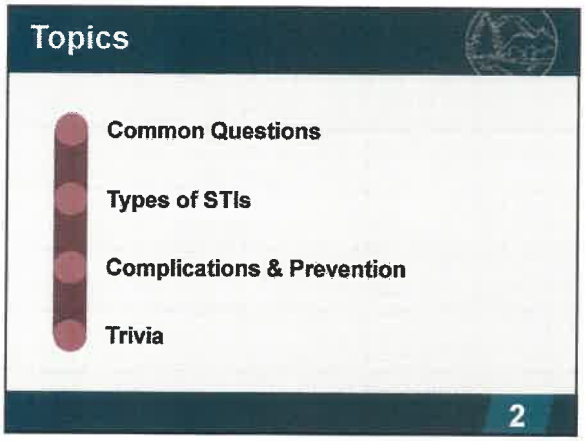
Second: What would she say? Write out the conversation.

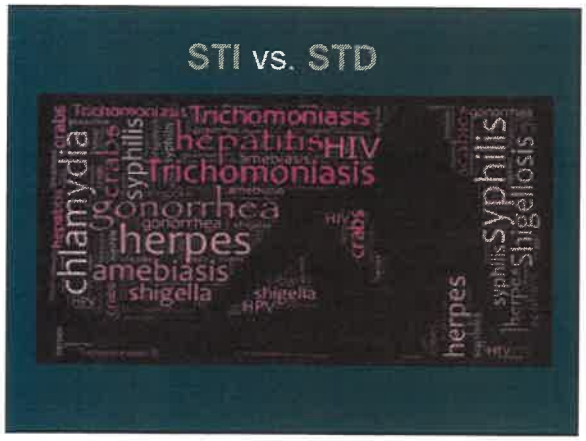
Part 2 Directions:

In your group, discuss each of the scenarios below. Consider how Sheyna might feel and what she should do or say given the additional background information.

1. What if Sheyna tries to change the subject to avoid sending a picture, but Nick keeps bringing it up?
2. What if Nick threatens to sabotage Sheyna's chances of becoming a CIT if she doesn't share a picture?
3. What if Sheyna sends a picture to Nick, and Nick ends up showing it to other people?
4. What if Sheyna ignores Nick, but Nick keeps finding ways to communicate with Sheyna?

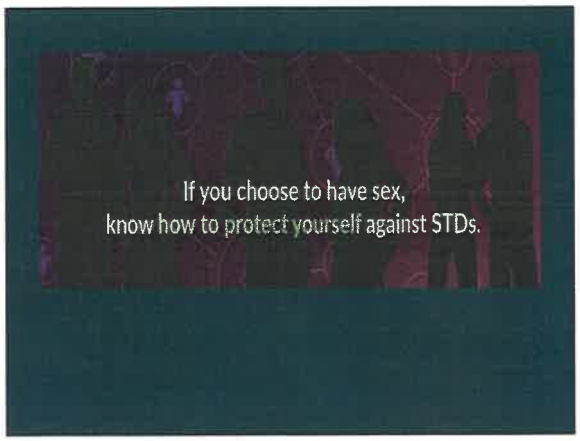

know your
Sexually Transmitted Infections
Cowlitz County Health & Human Services
Healthy People. Healthy Communities.
Kathy Hart


Topics
Common Questions
Types of STIs
Complications & Prevention
Trivia
2


STI vs. STD
Trichomoniasis
hepatitis
HIV
syphilis
chlamydia
gonorrhea
herpes
amebiasis
shigella
shigellosis

VD, the clap, the drip

At the end of the day, it doesn't really matter if you call 'em STDs, STIs, down-there boo boos, the genital sads, or whatever else you can think of. What matters is that we're protecting ourselves and each other by having safer sex, getting tested, and fighting STI stigma.
~Planned Parenthood



What's an STI?

- STIs are generally spread through sexual contact.
- Sexual contact. Oral, vaginal, anal, and **self inoculation**.
- STIs can spread non-sexually from mothers to infants.
- Infections can spread between people who have no symptoms.

Sexually Transmitted Infections (STIs): Generally acquired by sexual contact. The bacteria, viruses, or parasites that cause sexually transmitted diseases may pass from person to person in blood, semen, or vaginal and other bodily fluids.

— Mayo Clinic

6

Sexual Transmitted Infections

Are STIs common?

- STIs are the most commonly reported diseases in Washington state.

▲ STIs made up 81% of notifiable diseases or conditions reported to the state in 2020.

Many are curable. Others are treatable. All are preve

7

What are the symptoms?

- Many people with STIs don't have obvious symptoms.
- 70-80% of people with an STI don't know they're infected.
- Without treatment STIs can spread.
- Untreated STIs can result in serious complications, such as increased risk of giving or getting HIV.

8

What are common STIs?

MOST COMMON:

- Chlamydia (Bacteria)
- Gonorrhea (Bacteria)
- Herpes Simplex Virus (virus)
- Human Papilloma Virus/HPV (virus)
- Trichomoniasis (protozoa)
- Syphilis (bacteria)
- Human immunodeficiency Virus/HIV(virus)

ADDITIONAL STIs:

- Pubic lice
- Scabies
- Hepatitis B
- Hepatitis C
- Chancroid (rare in US)
- Granuloma Inguinale
- Lymphogranuloma Venereum

9

CDC estimates that youth ages 15-24 make up half of the 26 millions new STI's.

WHY?

15-24 year olds account for half of all new STD Infections

Some reasons....

Unique factors place youth at risk

Insufficient Screening
Many young women don't receive the chlamydia screening CDC recommends

Confidentiality Concerns
Many are reluctant to disclose risk behaviors to clinicians

Biology
Young women's bodies are biologically more susceptible to STIs

Lack of Access to Healthcare
Youth often lack insurance or transportation needed to access prevention services

Multiple Sex Partners
Many young people have multiple partners, which increases STI risk

- Overbearing
- Risky behaviors
- Cultural pressure
- Difficulty accessing preventive healthcare (Condoms)
- Biological (being a young female, no symptoms, undiagnosed STI)
- Douching
- Substance abuse

Chlamydia

- Most common in **females ages 14-25** years old.
- Majority of people who have chlamydia **don't know they have it**.
- **Spread**: vaginal, anal, or oral sex.

SYMPTOMS

females

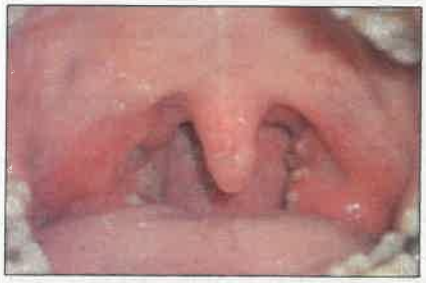
abnormal vaginal discharge, burning sensation when urinating, rectal pain and bleeding, sore throat

males

discharge from penis, burning sensation when urinating, painful, swollen testicles, rectal pain and bleeding, sore throat.

12

Chlamydia



CHLAMYDIA INFECTION IN THE THROAT

13

Chlamydia

Why do females have more reported cases of Chlamydia than males?

14

Chlamydia

Do females truly have more reported OR……

- More likely to have symptoms
- More likely to see their doctor
- More likely to notice changes to their bodies
- Get tested more

15

Gonorrhea

- Most common in **males ages 15-25** years old.
- Infections in the genitals, rectum, throat, and eyes.
- **Spread**: vaginal, anal, oral, or self-inoculation.

SYMPTOMS

females

burning with urination, increased vaginal discharge, bleeding outside of normal periods, anal itching or bleeding

males

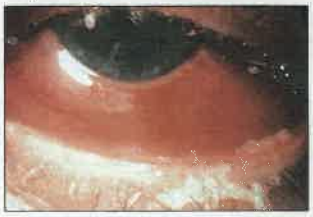
burning with urination, white, yellow, green discharge from penis, swollen painful testicles, anal itching or bleeding

Why do you think males have more reported cases of gonorrhea?

16

Gonorrhea

GONORRHEA INFECTIONS



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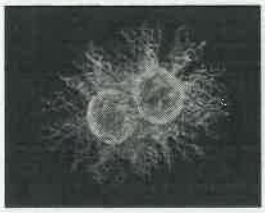
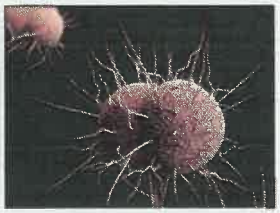
Gonorrhea

GONORRHEA





18

Herpes

- Most common in **males and females ages 14-49** years old.
- More than **1 in 6** are infected.
- HSV 1 (cold sores) and HSV 2 (more common genital)
- HSV 1 can be spread to genitals and HSV 2 can spread to mouth.
- **Spread**: vaginal, anal, oral sex

SYMPTOMS

Often, there are no symptoms. Even without symptoms, herpes can spread.

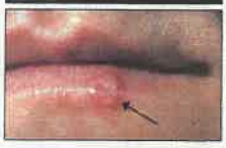
Symptoms include painful sores in/on internal and external genitalia/legs.

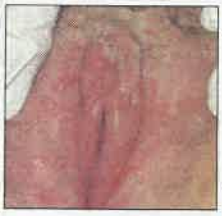
Not all sores are covered by a condom

Lesions/clusters can cause brain infections. This is very rare.

19

Herpes





HERPES SIMPLEX VIRUS (HSV) INFECT-IONS

20

Trichomoniasis

- More common in **older women**. Increases with age starting at reproductive ages.
- **Often a co-infection** with Chlamydia and Gonorrhea
- Parasite with Flagella that swim all around urethra and genital tract

SYMPTOMS

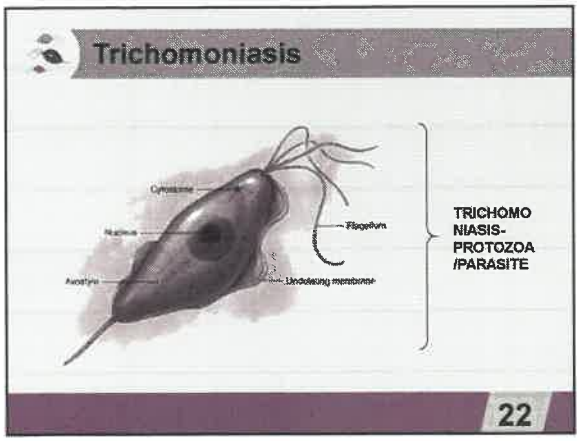
females

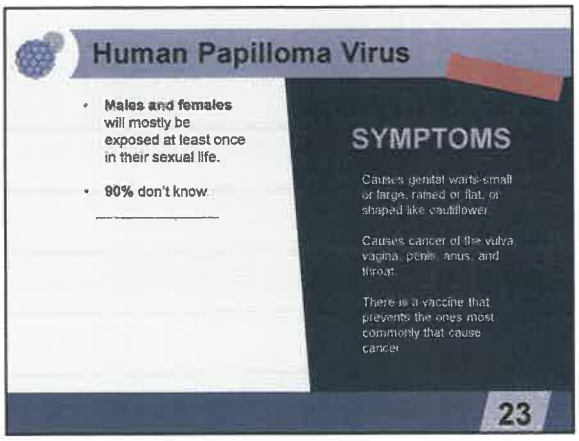
itching, burning, redness, soreness in the genitals, discomfort during urination, fishy odor, discharge, pain during sex

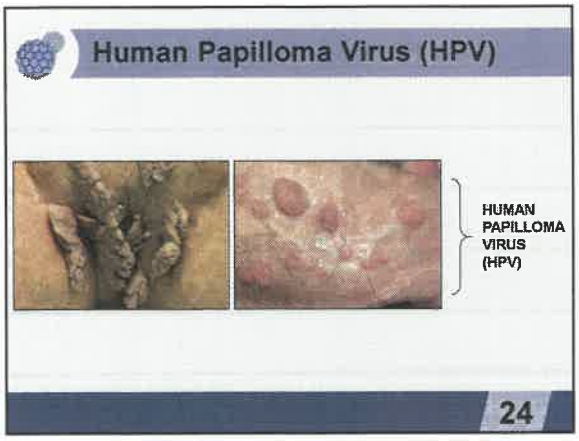
males

itching or irritation inside the penis, burning after urination or ejaculation, discharge from penis

21


Trichomoniasis
Cytostome
Nucleus
Axostyle
Flagellum
Undulating membrane
TRICHOMO NIASIS-PROTOZOA /PARASITE
22


Human Papilloma Virus
Males and females will mostly be exposed at least once in their sexual life.
90% don't know
SYMPTOMS
Causes genital warts-small or large, raised or flat, or shaped like cauliflower
Causes cancer of the vulva, vagina, penis, anus, and throat
There is a vaccine that prevents the ones most commonly that cause cancer
23


Human Papilloma Virus (HPV)
HUMAN PAPILLOMA VIRUS (HPV)
24

Syphilis

- Most common in males.
- Serious health problems if left untreated.
- Can result in fetal deaths or deformities.

SYMPTOMS

STAGES

Sores → Rash → Baldness → Gone

LATE NOT TREATED

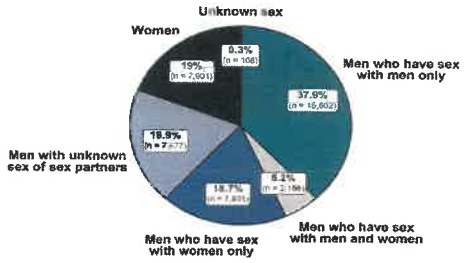
Eyes, Brain, Heart/Organs → Dementia → Death

Neuro Syphilis

Headache, Difficulty Coordinating Muscle Movement, Paralysis, Dementia → Death

25

Syphilis



26

Syphilis

SYPHILIS

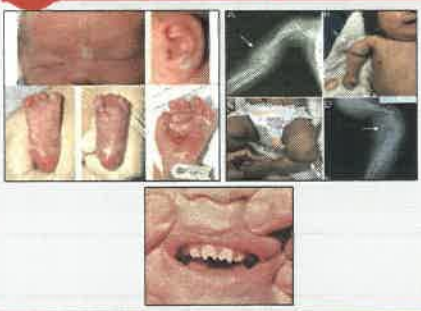
27

Syphilis

SYPHILIS INFECTIONS

28

Congenital Syphilis



CONGENITAL SYPHILIS INFECTIONS

29

Sexually Transmitted Disease

Common complications

- Inflammation of urethra
- Burning during urination
- Trouble with urination
- Abnormal discharge from penis, vagina, or rectum
- Odor
- Scrotal pain
- Enlarged testicles
- Enlarged labia
- Inflamed reproductive organs
- Genital, rectal, oral blisters
- Rashes
- Paralysis
- Rectal bleeding
- Genital irritation
- Infertility
- Liver inflammation
- Throat infections
- Eye infections/blindness
- Systemic infections
- Arthritis
- Cancer
- Genital warts
- Congenital abnormalities or death to fetus
- Neurologic malfunctions

30

Talk, Test, Treat!

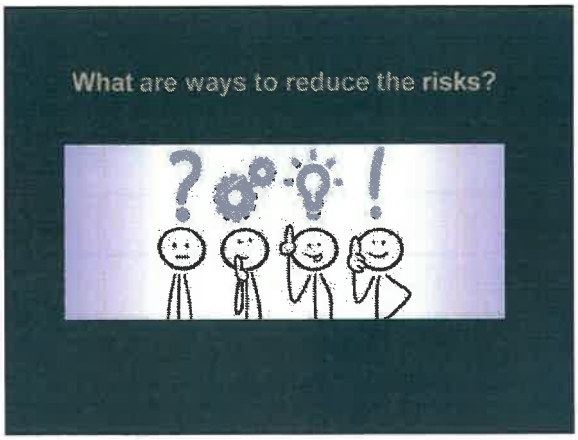
Preventative steps

- Get routinely tested.
- Don't wait for symptoms
- Talk to your doctor, parents, teachers(who else?)
- Take recommended treatment
- Use barrier protection
- Mutually Monogamous
- Abstinence

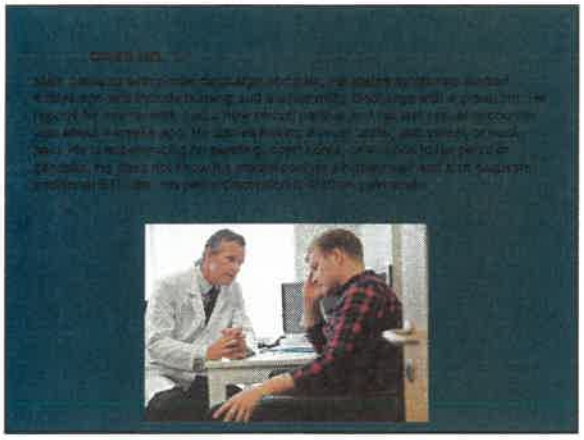
Talk, test, treat REPEAT!! 31

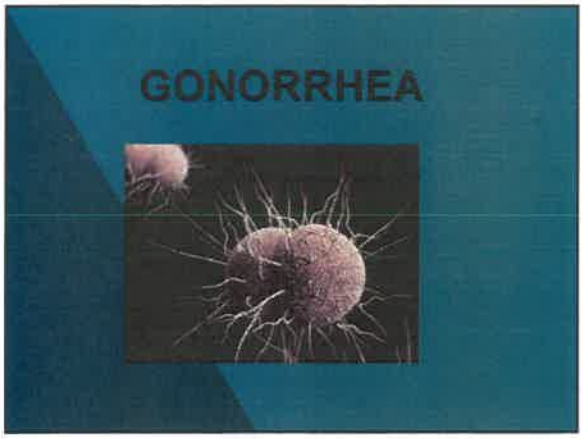
What is a 100% guarantee to not get an STI/STD?

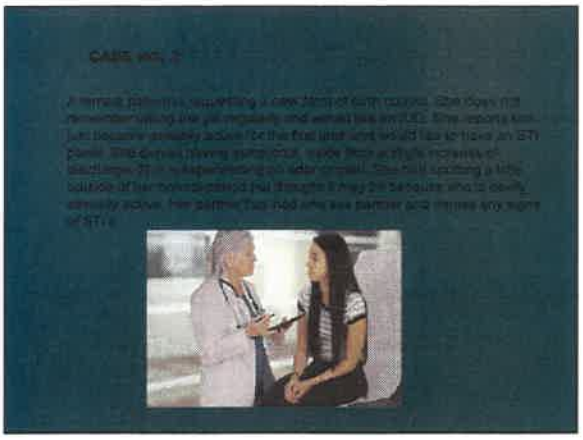

abstinence


What are ways to reduce the risks?


Use barrier protection
Get routinely tested
Be in a mutually monogamous relationship



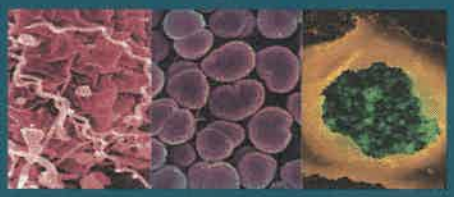

GONORRHEA



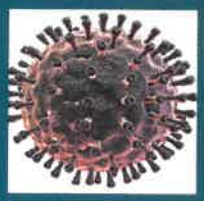
CHLAMYDIA

painless

SYPHILIS, GONORRHEA & CHLAMYDIA



GENITAL HERPES & CHLAMYDIA



CASE NO. 5

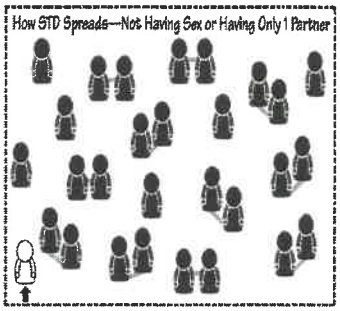
PHARYNGEAL (THROAT) **&** **OCULAR** (EYE) **GONORRHEA**

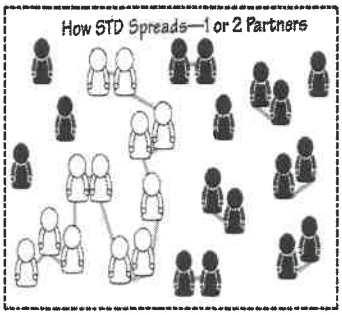
47

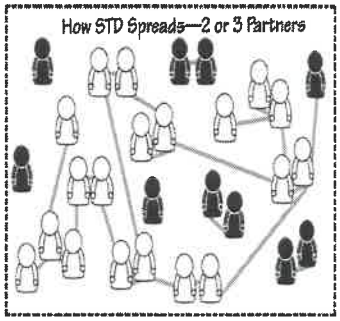
48


thanks for listening!

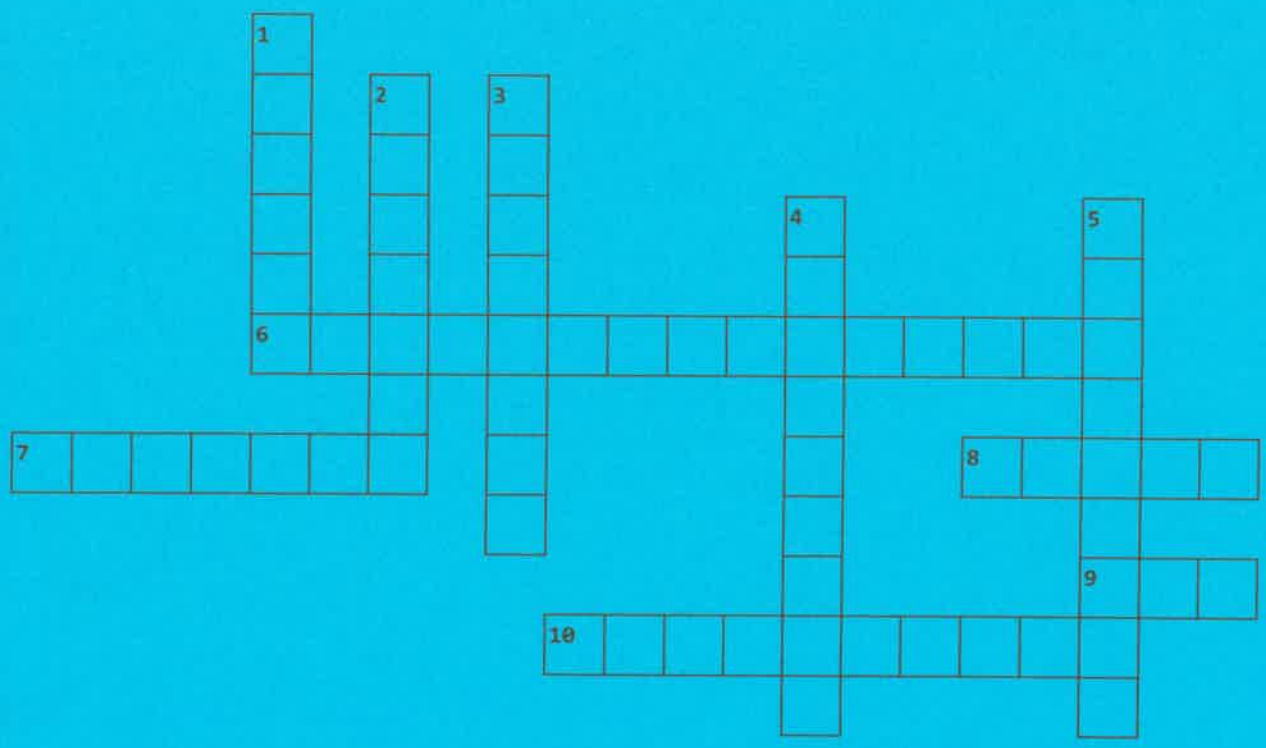
STD Risk


How STD Spreads—Not Having Sex or Having Only 1 Partner


How STD Spreads—1 or 2 Partners


How STD Spreads—2 or 3 Partners

STIs



Across

When a person introduces an STI to their own body part(s).

7. A common barrier method of risk reduction for STIs.

8. Bacterial STIs can generally be _____ with antibiotics.

9. A sexually transmitted virus that can cause cancer.

10. The only guaranteed way to not catch an STI.

Down

1. A virus affecting more than 1 in 6 Americans.

2. The sex more likely to notice symptoms and go to a provider.

3. A bacterial infection that can be devastating to a fetus/baby.

4. _____ is the most commonly reported STI in WA.

5. The STI that is more likely to cause a green tinted discharge.

Name _____ Date _____

Lesson 13.1

STI Transmission

The transmission of STIs can be an issue of great concern for teens and adults who want to maintain their health. As their name suggests, sexually transmitted infections (STIs) are most often transmitted during sexual activity. There are protective methods that can be used to prevent the transmission of STIs, but these methods are not always effective. In each of the following scenarios, identify whether an STI could have been transmitted or not.

1. Brandy and Jim have been friends for years and have just begun dating. The night after Brandy and Jim kiss for the first time, Brandy texts her best friend to tell her the exciting news. Brandy's best friend wants to be excited for her, but she also has some bad news. She heard that Jim has a sexually transmitted infection known as *genital herpes,* which can sometimes manifest as sores on the mouth. Could an STI have been transmitted? Why or why not?

_____

_____

_____

_____

_____

_____

2. Twenty-eight-year-old Travis and twenty-five-year-old Tina have been engaged for a few years. They've discussed the topic of sexual activity and eventually decide that they are both ready. During their discussions, Travis reveals that he has been sexually active in the past and that a recent test showed he has an STI known as *syphilis.* When they engage in sexual intercourse, Travis and Tina use a latex condom. Could an STI be transmitted? Why or why not?

_____

_____

_____

_____

_____

_____

3. Beth and Jen are hanging out at their friend David's house. While there, Beth uses the bathroom. After they leave David's house, Jen tells Beth that David has an STI. Beth is worried because she used the same toilet seat that David has used in the past. Could an STI have been transmitted? Why or why not?

_____

_____

_____

_____

_____

_____

Around the room you'll notice five learning stations. [Point to and read out loud the five statements you have written around the room (see above)]. *I'm giving each of you two blank Post-it or sticky notes. I want you to write comments, facts, or even questions on your paper, and then post it on the learning station of your choice. If you get to a sheet after others, try to think of things that other people haven't already written. You will have five minutes to complete this activity. Then we'll discuss what you wrote after we watch a short video.*

3. **Show seven-minute video from Sex, Etc. or lead STD Basics discussion.**

The seven-minute video, ***STD Myths*** from SexEtc.org, a project of Answer at Rutgers University, can be found at: sexetc.org/videos/std-myths-2 . The film addresses common misunderstandings about STDs – about how they are transmitted, who can catch them, and ways to prevent them. It features teen peer educators.

After the video is over, ask three or four students to share some of what they thought were important facts that the video covered.

If you do **not** use the video, instead, lead a discussion to review basic STD facts students may or may not know. Start by asking:

a. ***The primary way people get infected is when they have oral, anal, or vaginal sex and the other person's semen or vaginal fluid comes in contact with their mucous membranes. Could someone list for us what parts of the body contain mucous membranes?***

Fill in if students don't respond: *The rectum (inside the anus), the vagina, the urethra, the mouth and throat, and – not so much related to STDs except at birth – the eyes, nose, and inner ears.*

Explain: *Let me make clear* **why** *mucous membranes are so vulnerable. Feel the inside of your cheek with the tip of your tongue. That's an example of a mucous membrane. Mucous membranes, in general, are thinner skin, tear easier than other skin on our bodies, and are soft and more porous than other skin, meaning there are tiny holes that allow small organisms to get through.*

One way to think about it is to compare the skin on my hand and my arms to the windows in this room. Windows are good protection for the room. They block wind, rain and dirt from getting in. The skin on most of our bodies does the same thing. It's great protection from blocking things from getting in, like bacteria and viruses. But mucous membranes are more like a screen. Screens still protect the room from bigger things like birds, but rain, water, or dust can get through the screen. Likewise, mucous membranes can protect our bodies from bigger things, but bacteria and viruses can get in.

b. ***So, to review ... which body fluids can pass STDs?***

Ask several students and fill in if the students don't respond: *Semen, vaginal fluid and blood. NOT sweat, tears, mucus (snot), urine, or saliva (spit). Though saliva sometimes has blood* **in** *it, it is not enough to transmit HIV, for example. Kissing is safe, in terms of STDs, but can spread colds or mononucleosis (mono).*

Name _____ Date _____ Period _____

Choose **4** different types of **birth control** from the presentation to fill in the table.

Method	Hormonal? (H) Non-hormonal? (NH)	How it works	Pros/Cons
Abstinence			
Spermicide			
Barrier (condom)			
"The Pill"			
Depo Provera			
Implant (Nexplanon)			
IUD (Intrauterine device)			

Answer the following questions.

I **plan to** have my first child when _____

because _____.

OR

I **do not plan** to have children because _____

_____.

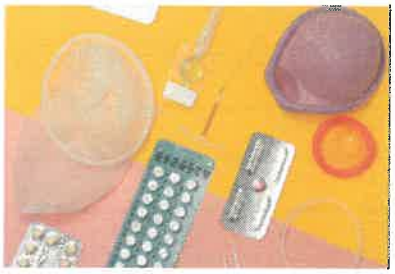
No matter which choice I answered above, I will protect my choice by _____

_____.

Fill in the table about **STD's**.

STD name	3 key facts
Chlamydia	
Gonorrhea	
Herpes	
Trichomoniasis	
Human Papilloma Virus (HPV)	
Syphilis	

Contraception (Birth Control)



What is birth control?

Birth control (contraception) is any method, medicine, or device used to prevent pregnancy. Women can choose from many different types of birth control. Some work better than others at preventing pregnancy. The type of birth control you use depends on your health, your desire to have children now or in the future, and your need to prevent sexually transmitted infections. Your doctor can help you decide which type is best for you right now.

Why is birth control important

- According to the National Library of Medicine there are over 3 million unplanned pregnancies in the United States each year.
- In 2020 in the state of Washington 7.3 out of a 1000 women ages 15-17 became pregnant
- Per the Cowlitz County Health Department there were 11 babies born to teens between the ages of 15-17 in 2021 which is slightly lower than the 14 babies born to the same age group in 2020.
- Cowlitz County teen pregnancy rate is higher than the national average.
- Pregnancy can happen to you if you have sex, even if it "only happened once" or "it was the first time".

What is the impact of teen pregnancy?

- Teen pregnancy does not only impact the person who is pregnant
- Strained relationships
- Missed experiences and "normal" teen events
- Greater health risks related to teen pregnancies
- Higher rate of dropping out of school
- Financial strain now and future
- Depression
- Adverse outcomes for the children of teen moms

Types of birth control

- Abstinence
- Natural birth control
- Barriers such as condoms
- Injectable
- Implants
- Intrauterine
- Emergency contraception

Abstinence

- Abstinence is 100% effective form of birth control
- You are in control!
- "NO" means "NO"
- Only you know when you are ready to have sex
- It is never OK for anyone to force or coerce you to have sex
- Believe it or not, not "everyone is doing it".

Natural birth control

- Natural birth control methods do NOT protect you from sexually transmitted disease.
- Fertility Awareness
  - Complex calculation to determine when ovulation is occurring
  - Approximately 1 in 4 couples get pregnant within the first year
- Pull out method
  - Sperm can be present prior to ejaculation
  - You can get pregnant if semen gets anywhere near the vagina or vaginal opening.

Spermicide

PROS

- Easy to find
- No prescription needed

CONS

- If using with barrier methods such as condoms need to make sure it is compatible.
- Can be pretty messy
- Might cause irritation to vagina and/or penis
- Not very effective is used alone.
- Does not prevent sexually transmitted diseases.

Barrier birth control

- Stop the semen from entering the Vagina can be up to 98% effective if they are used correctly every time.
- External or male condom
  - 98 % effective when used perfectly
  - 87% effective when used typically (people aren't perfect)
- Internal or female condom
  - 95% effective with perfect use
  - 79% effective with typical use
- Cervical cap
  - Use in combination with spermicide
- Sponge
- Diaphram
  - Must be fitted by a provider
  - Used in combination with spermicide

Male Condom

PROS

- 98 % effective when used perfectly every time
- Easy to use
- Easily accessible
- Affordable
- Protects against sexually transmitted diseases

CONS

- People aren't perfect, only 87% effective with typical use
- Fear of decreased sensitivity during intercourse
- Risk of ripping or tearing
- Have to stop what your doing to put it on
- Must withdraw before penis becomes soft or risk semen leaking out

Female condom

PROS

- 95% effective when used correctly every time
- Prevent sexually transmitted diseases
- Covers a larger area than male condoms
- Can be inserted up to 8 hours prior to intercourse
- Does not effect hormones
- Does not require an erect penis to keep it in place

CONS

- People are not perfect, 79% effective with typical use
- Have to stop what your doing to insert if not inserted prior to sexual activity
- Can be cumbersome to insert
- Alter vaginal stimulation with intercourse
- Must be removed immediately after ejaculation to prevent spilling.

Cervical Cap

PROS

- You can put it in hours prior to having sex
- Neither partner should be able to feel the cervical cap

CONS

- You have to go to a provider to determine the right size for you.
- Have to stop to insert if you didn't preplan
- Can be cumbersome to insert
- You have to use it every time to be the most effective.
- Can be dislodged with a large penis, robust intercourse or certain positions.

Diaphragm

PROS

- 83% effective in real world use.
- Can be put in prior to having sex.
- Does not have to be removed immediately following sex

CONS

- You have to see a provider to get fitted.
- Can be cumbersome to put in.
- Have to stop to insert if you didn't preplan
- Some women can experience increase in UTI's.
- Should not be used if you have allergies to silicone or spermicide.
- Can be dislodged by large pentises, robust sex or certain sexual positions.

Sponge

PROS

- You can put it in prior to having sex.
- Neither partner should be able to feel it.
- Very few side effects
- You can have sex multiple times in a 24 hour period.
- Available at most pharmacies
- Moderately priced

CONS

- Failure rate of up to 27% if with typical use.
- Must be used everytime you have sex
- You have to leave the sponge in for at least 6 hours after you last have sex but can't leave it in for more than 30 hours.
- Have to stop to insert if you didn't preplan

Hormonal Birth Control

99-100% effective when used properly

Decreases to about 95% with typical use when on birth control pills

While hormonal birth control is safe and effective it is not a one size fits all. It works by introducing hormones to your body that may result in some side effects. Your provider may need to adjust dose to get it right for you.

Birth Control Pills "The Pill"

PROS

- Easy to use, just swallow with a sip of water
- No interruption in the "heat of the moment
- Can control or even stop your period
- Can lessen menstrual flow
- Can improve acne
- Can lessen symptoms of PMS

CONS

- Have to remember to take it every day to be effective
- May experience some nausea, spotting and/or breast tenderness while your body adjusts to the hormones.
- Must see a provider to get a prescription
- Does not protect you from sexually transmitted diseases.

The Patch

PROS

- Only has to be changed once a week
- 99.7% effective if used perfectly , 93% effective with typical use
- No interruption in the "heat of the moment"
- Might give you more regular and lighter periods
- May improve acne

CONS

- May experience nausea, spotting and breast tenderness until your body adjusts to the hormones
- Irritation at the application site
- Does not protect you from sexually transmitted diseases

Depo Provera

PROS

- Easy to use, just one injection every 3 months
- Private, no one needs to know unless you tell them
- May decrease menstrual flow
- Decreases menstrual cramps and pain

CONS

- Depo is a long acting hormone injection so it can take your body a little longer to adjust. Can have irregular bleeding for 6-12 months.
- You have to remember to get your injection on time
- Bloating and nausea
- Less common side effects include Depression, thinning hair and headaches.
- Does not protect you from sexually transmitted diseases

Implant (Nexplanon)

PROS	CONS
• Birth control is taken care of for the next 4 years. • Most women have fewer and lighter periods. • Can improve symptoms of PMS • Can improve abdominal pain and cramping related to menstrual cycles • Discrete	• Irregular periods for the first 6-12 months • Ovarian cysts • Depression • Insertion site pain • Hair loss • Does not protect you from sexually transmitted diseases.

IUD (Intrauterine device)

PROS	CONS
• 99.4-99.9% effective with perfect use • Lasts 3-7 years depending on the brand • May make your periods lighter or stop all together • May reduce PMS, acne and cramps.	• Can take a bit for your body to adjust, may have light spotting for the first few months. • Cramping • IUD can slip out • Infection

Emergency Contraception

PROS	CONS
• Easily accessible at most pharmacies • Most don't require a prescription • Covered by Medicaid and some commercial insurances	• Irregular bleeding • Fatigue • Nausea and/or vomiting

Key points

- Most important to remember you are the only one who decides when you are ready to have sex!
- NO means NO!
- Birth control is the responsibility of both partners. Believe it or not she didn't "get herself pregnant".
- Many forms of birth control available
- Any birth control is better than no birth control
- Speak with a provider about what the best choice is for you
- Pregnancy is not the only scary out come of sex, protect yourself from sexually transmitted diseases too.
- These are often uncomfortable conversations to have but "I'm pregnant" is a lot more uncomfortable.

Questions?

Focused Writing Worksheet

Pick one sentence below that is the best match for you. Fill in the blanks. Use the back of the page if you need more room to express your ideas.

NAME _____ **PERIOD** _____

For students who have never had a child...

1. I plan to have my first child when _____

   because _____

   _____

   _____

2. I do not plan to have any children because _____

   _____

   _____

   _____

For students who already have a child ...

1. I plan to have my next child when _____

   because _____

   _____

   _____

2. I do not plan to have any more children because _____

   _____

   _____

   _____

Condom Line-Up Cards

Check expiration date

Carefully open package

Condom Line-Up Cards

Pinch tip of condom

Roll condom down erect penis

Condom Line-Up Cards

Intercourse with condom

Ejaculation with condom

Condom Line-Up Cards

Hold condom on penis while pulling out

Take condom off penis

Condom Line-Up Cards

Throw condom in garbage

Name _____ Date _____

Lesson 23.1

Pregnancy Prevention Myths

Many myths exist about the best ways to prevent unplanned pregnancy. The best way to guard against falling for myths is to learn the facts about reproduction and pregnancy. The following statements are all pregnancy and reproduction myths. Beneath each myth, write a correct and factual treatment of each topic.

1. **Myth**: A woman cannot become pregnant if she or her partner uses birth control.

   Fact: _____

2. **Myth**: A woman cannot become pregnant if she stands up during or after sexual intercourse.

   Fact: _____

3. **Myth**: If a woman urinates after having sex, she won't get pregnant.

   Fact: _____

4. **Myth**: If a woman douches, or cleans the inside of her vagina after having sex, she won't get pregnant.

   Fact: _____

5. **Myth**: A woman cannot become pregnant if her partner withdraws or "pulls out" before he ejaculates.

   Fact: _____

6. **Myth**: A woman cannot become pregnant during her period.

   Fact: _____

Name _____ Date _____

Lesson 23.1

Practicing Abstinence

Practicing abstinence is the only 100% effective method of birth control. The following scenarios describe teenagers who find themselves in situations that challenge their abilities to practice abstinence. Read each scenario and then offer strategies and advice to help these teens maintain their commitments to abstinence.

1. Leah and Sam have been dating for a year. Sam knows some of their friends are sexually active, but he doesn't feel ready for sex. Sam thinks Leah feels the same way, but he isn't sure. What advice would you give to Sam to help him practice abstinence?

_____

_____

_____

_____

2. When Jenna went online on Wednesday night, she saw an invitation to a party at Jamal's house on Saturday. Because their parents are friends, Jenna knows that Jamal's parents are going to be out of town this weekend. She's worried that some of Jamal's friends will bring beer to the party, but she really wants to go because she knows her crush, Scott, will be there. What advice would you give to Jenna to help her practice abstinence?

_____

_____

_____

_____

3. Scott and Sarah have just started dating. Scott is a little older than Sarah, and Sarah thinks he might not be a virgin. She's worried that Scott will want to have a sexual relationship, and that he may have been exposed to STIs if he has been sexually active. Sarah is a virgin and knows she isn't ready for sex. What advice would you give to Sarah to help her practice abstinence?

_____

_____

_____

_____

4. Last weekend, Jared asked his girlfriend, Tia, what she thought about starting a sexual relationship. Tia said she was unsure about taking their relationship to that level, but told him she would think about it. Now, Jared has planned a romantic date for Friday night, and Tia is worried he will make a move. She isn't sure she's ready for sex. What advice would you give to Tia to help her practice abstinence?

_____

_____

_____

_____

Name _____ Date _____

Lesson 21.5

Teen Parent Challenges

Teen parents face many challenges, including a lack of the time, energy, and financial resources that taking care of a new baby requires. Teens often have to drop out of school and find a job to earn more money. Understanding the challenges that teen parents face can help you understand the importance of thinking about the future when making choices today. For this activity, research each of the challenges of teen parenting listed below. Find at least two sources of reliable health information regarding these issues. List your findings and write a few sentences of reflection on what you have learned.

Challenge: Isolation from family and friends

Sources of information: _____

Findings: _____

Reflection: _____

Challenge: Financial strain

Sources of information: _____

Findings: _____

Reflection: _____

Challenge: Increased responsibilities

Sources of information: _____

Findings: _____

Reflection: _____

Expectations

1. No personal information/questions
2. Use correct terminology
   (medically accurate)
3. Ask questions – or write them down

Warm-Up

Male, Female, or both? *(as assigned at birth)*

Write

M (male)

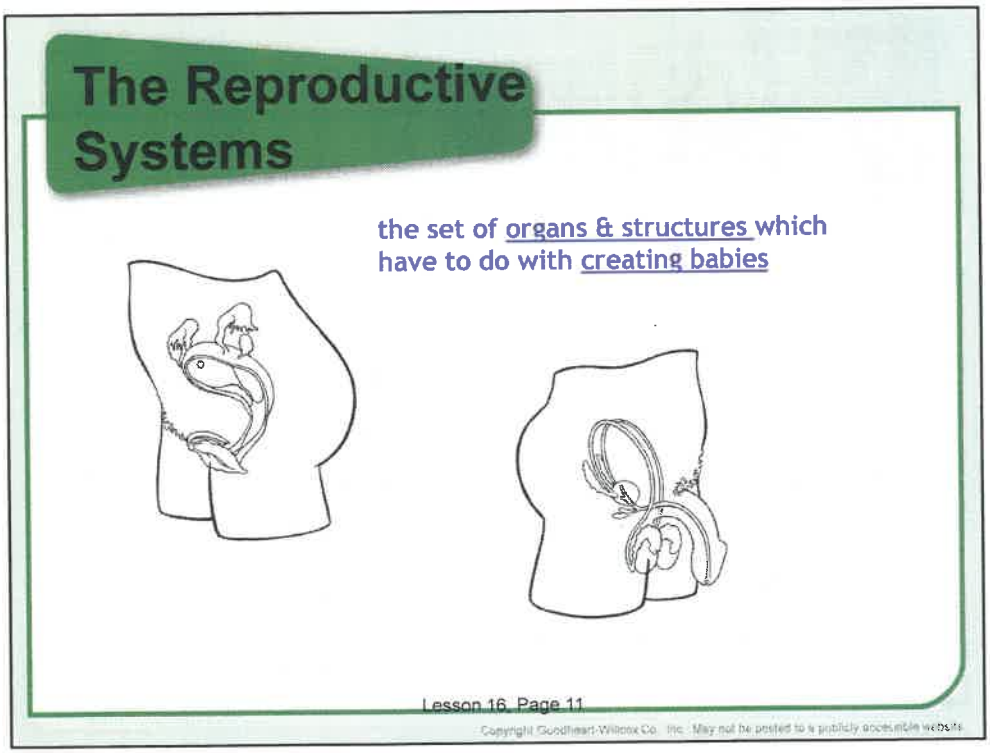
F (female)

B (both)

thinkstock.com/moodboard/moodboard

M, F, B

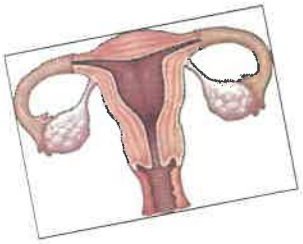
- Pelvis
- Abdomen
- Uterus
- Urethra
- Penis
- Vagina
- Scrotum
- Vas Deferens
- Ovary
- Epididymis
- Clitoris
- Cervix
- Seminal Vesicle
- Foreskin
- Prostate Gland
- Fallopian Tube



See ***High School FLASH*** lesson 16, page 6 for teacher notes.

The curriculum is online: www.kingcounty.gov/health/FLASH

Female Reproductive System

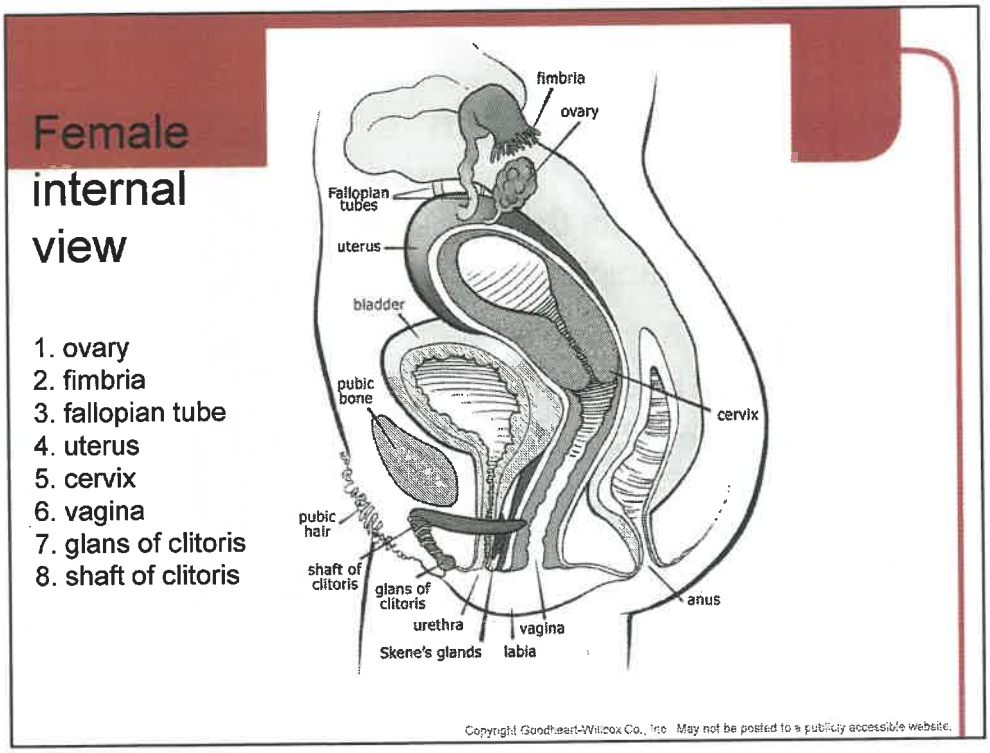


Function of Female Reproductive System

- Produce sex hormones (estrogen)
- Produce functioning ova (eggs)
- Support & protect developing embryo

Estrogen

- Estrogen triggers the development of female characteristics.
  - Widened hips for child birth
  - Breasts for nursing
  - Production of eggs



See ***High School FLASH*** lesson 2, page 3-6 for teacher notes.

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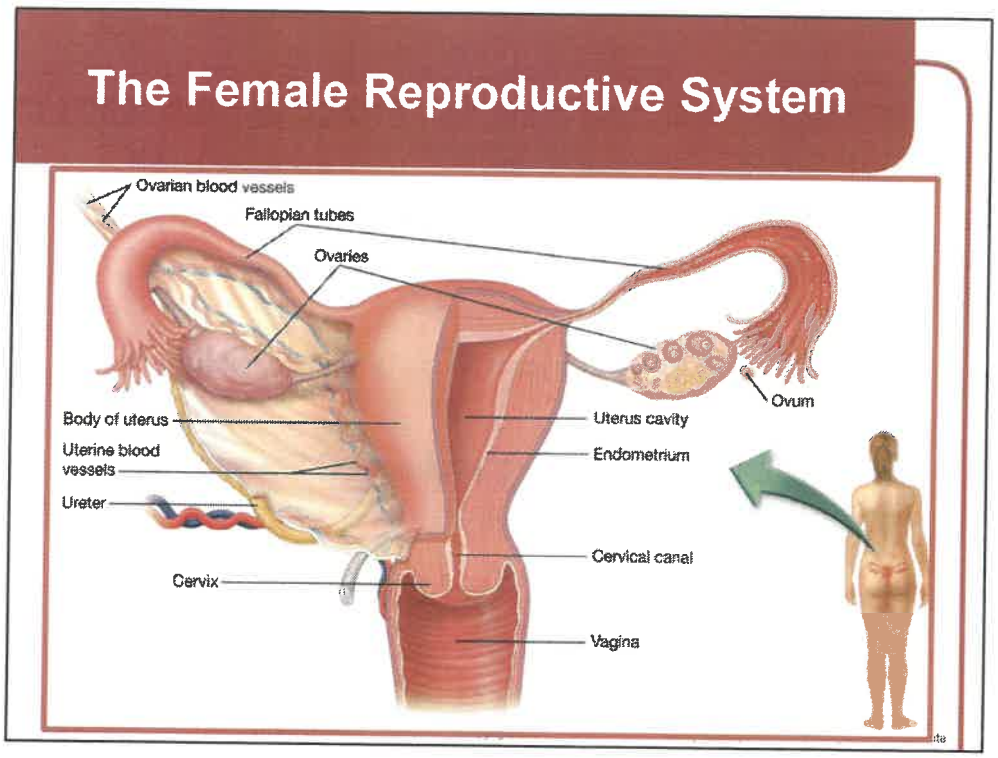

Pass out diagram and fill it in.

Discuss sterilization (tubal ligation)

Menstruation

- **Begins during puberty** (roughly ages 10-14)
- **The release of dead endometrial tissue and blood**
- Uterus grows new endometrial lining to prepare for a fertilized egg
- No egg implanted= lining and unfertilized egg exit the body through the vagina

https://www.youtube.com/watch?v=vXrQ_FhZmos

Menstrual Disorders

- Common symptoms
  - Lack of menstruation
  - Painful, irregular menstrual periods
  - Excessive bleeding
  - Changes in mood (depression/anxiety)
- Premenstrual syndrome (PMS)
  - Occurs BEFORE menstruation
  - Includes cramps, mood changes, and/or bloating
- Premenstrual dysphoric disorder (PMDD) – severe PMS
- Endometriosis

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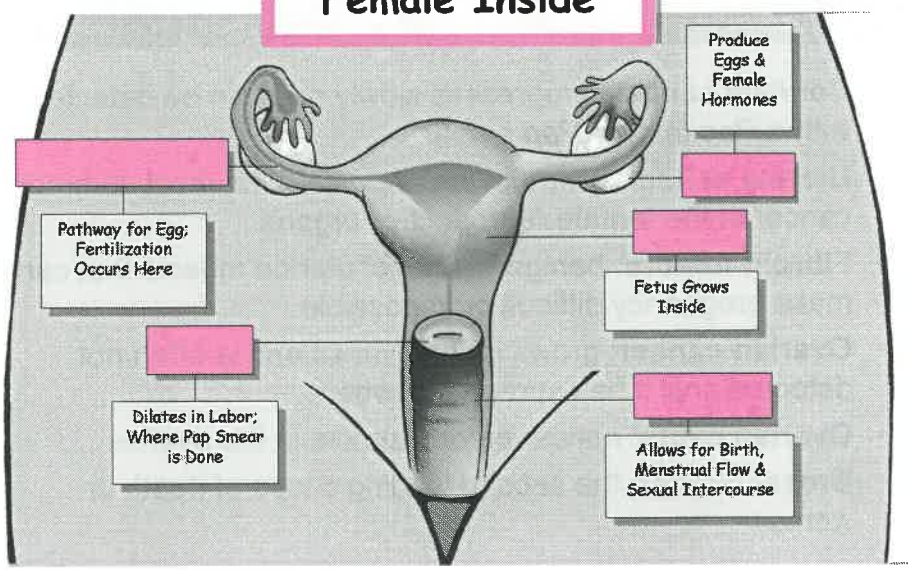
Female Cancers and Tumors

- **Cervical cancer**: progresses slowly and can be detected with a *Pap test*, or *Pap smear*
- **Uterine cancer**: grows in the endometrium; most common cancer of the female reproductive organs
- **Fibroid tumors**: benign tumors of uterine muscle that can make pregnancy difficult or impossible
- **Ovarian cancer**: grows in the ovaries and is often not detected until it has spread elsewhere
- **Ovarian cysts**: noncancerous tumors in the ovaries
- **Breast cancer**: the second leading cause of death in women

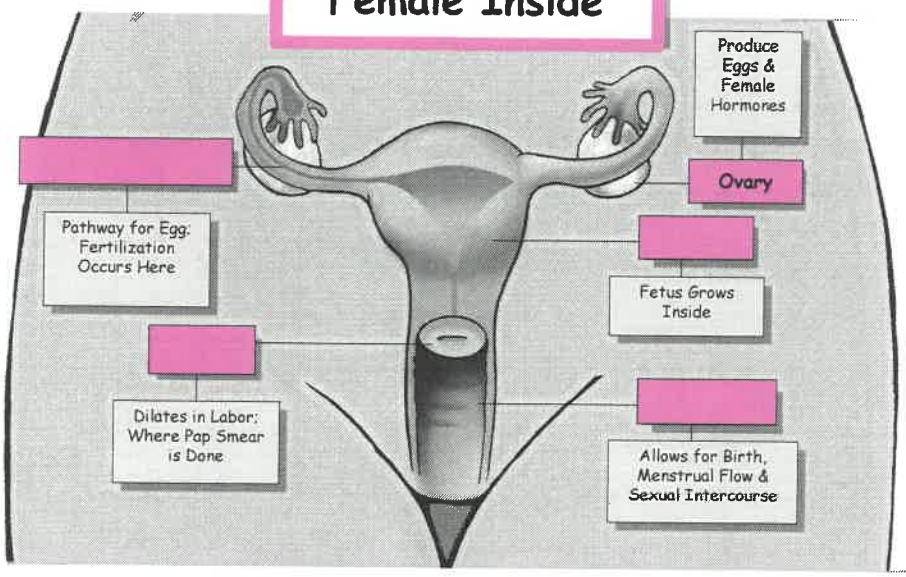
ANATOMY DIAGRAM for Poster or Transparency, for ACTIVITY 2.2

Female Inside



ANATOMY DIAGRAM for Poster or Transparency, for ACTIVITY 2.2

Female Inside



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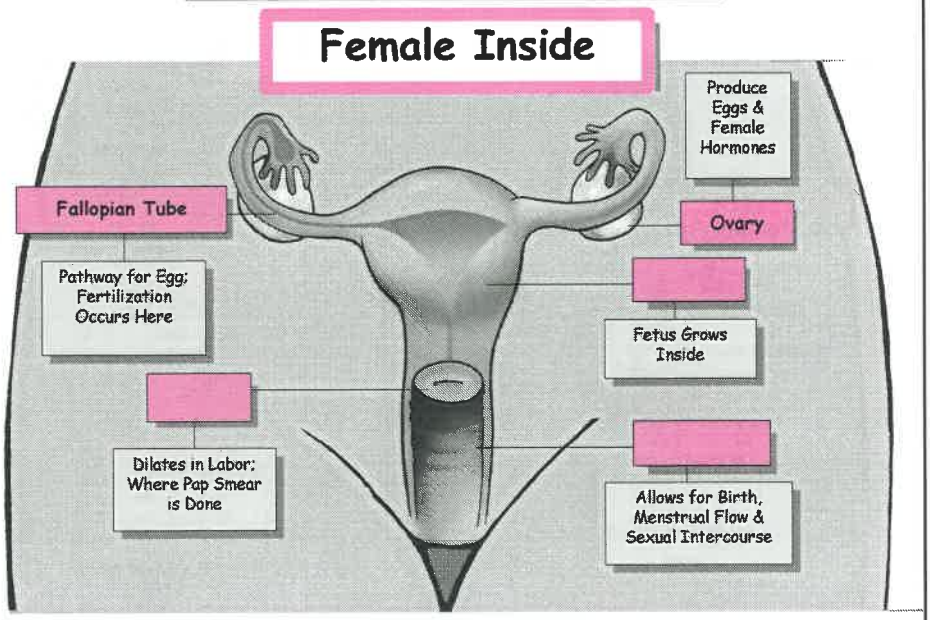

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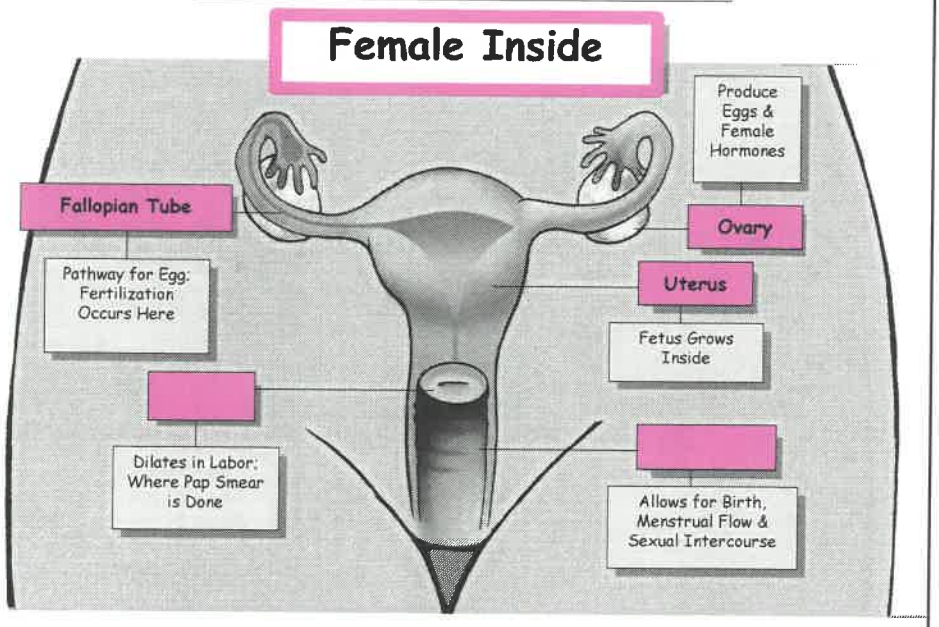

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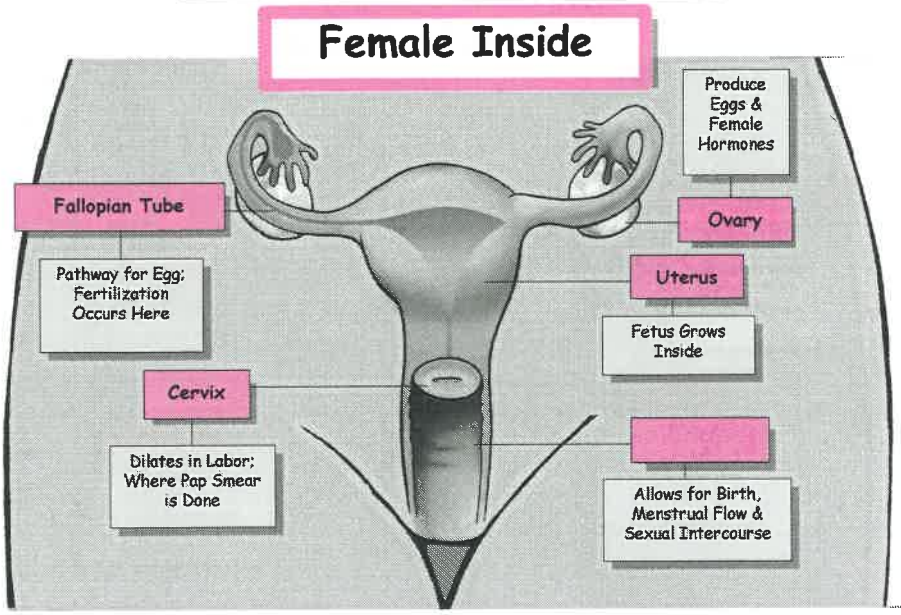

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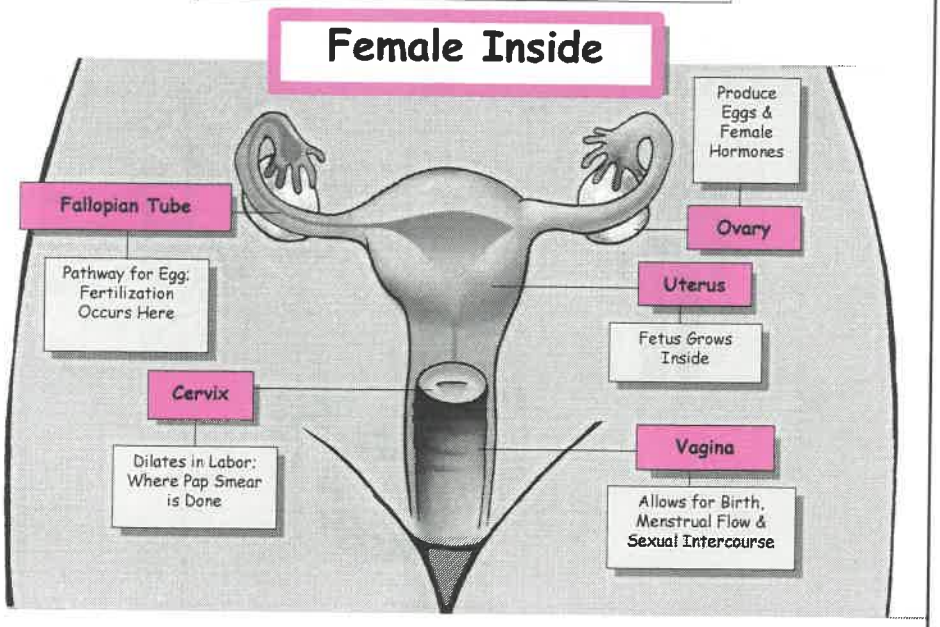
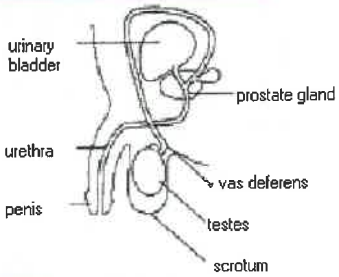
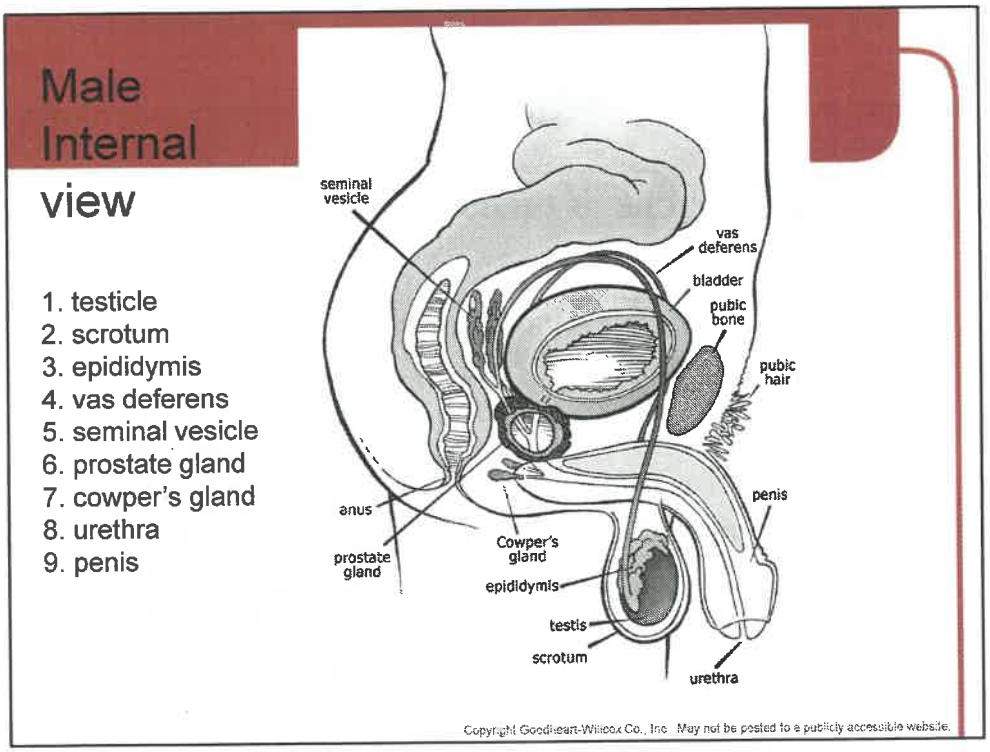


The Male Reproductive System



Testosterone

- This hormone is produced by the testes.
- It controls the physical development of men.
  - Facial hair
  - Deep voice
  - Broad shoulders
  - Ability to produce sperm



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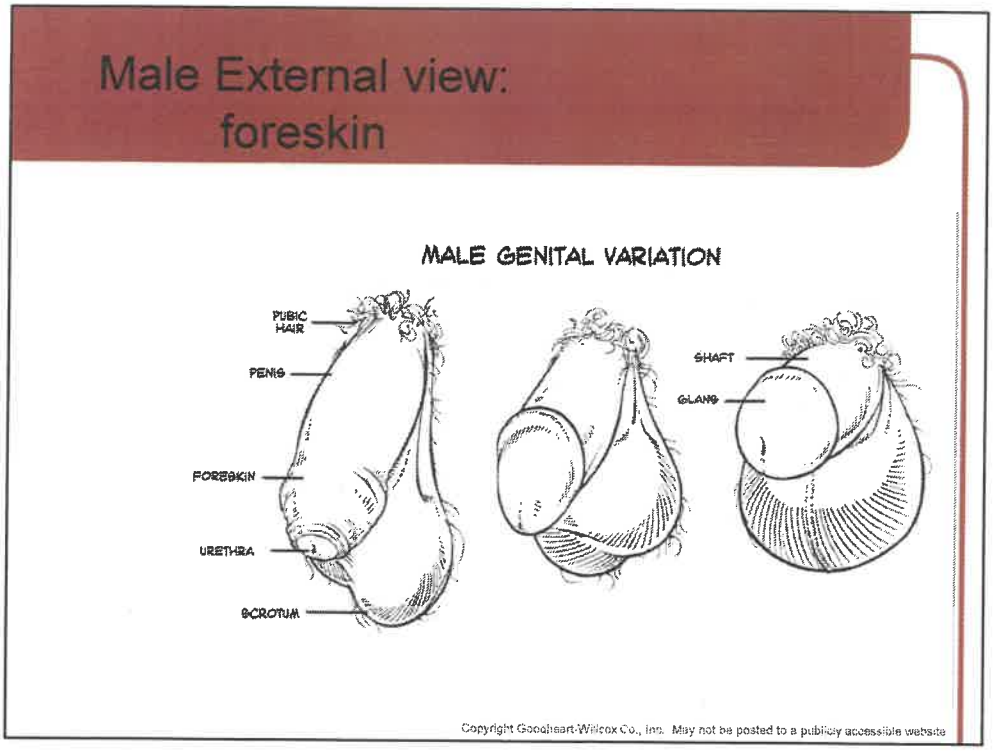


See ***High School FLASH*** lesson 2, page 3-6 for teacher notes.

The curriculum is online: www.kingcounty.gov/health/FLASH

Male Reproductive System Disorders

- **Prostatitis**: inflammation or infection of the prostate, leads to pain and blood in the urine
- **Epididymitis**: inflammation of the epididymis, the organ that stores immature sperm
- **Orchitis**: inflammation of the testes

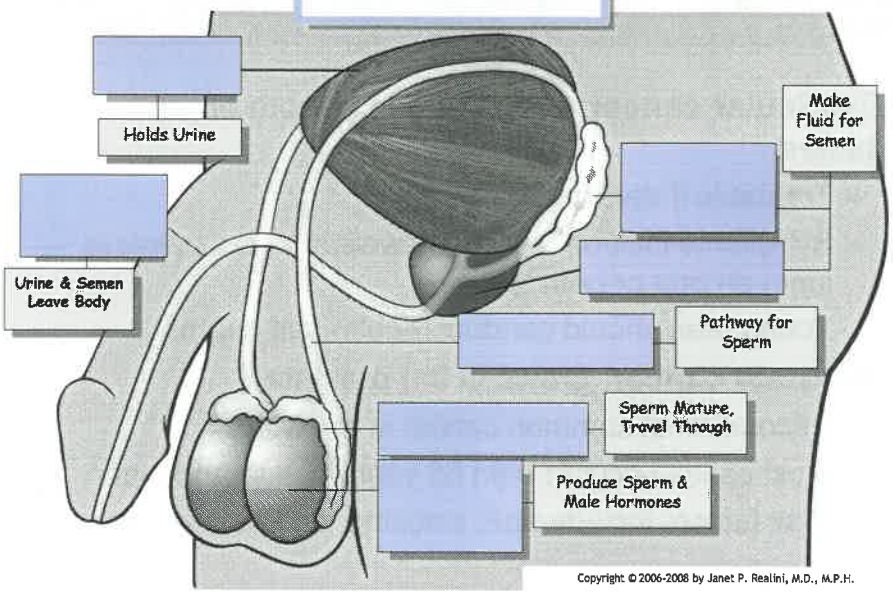
shutterstock.com/Monkey Business Images

Male Cancers

- **Testicular cancer**: grows in one or both of the testes
  - Treatable if detected early
  - Symptoms include testicular swelling and a painless lump on one or both testicles
  - Young men should conduct regular self-exams
- **Prostate cancer**: grows in the prostate
  - Second most common cancer in the world
  - Most cases occur in men 65 years of age and older
  - Risk factors include age, smoking, and high-fat diet

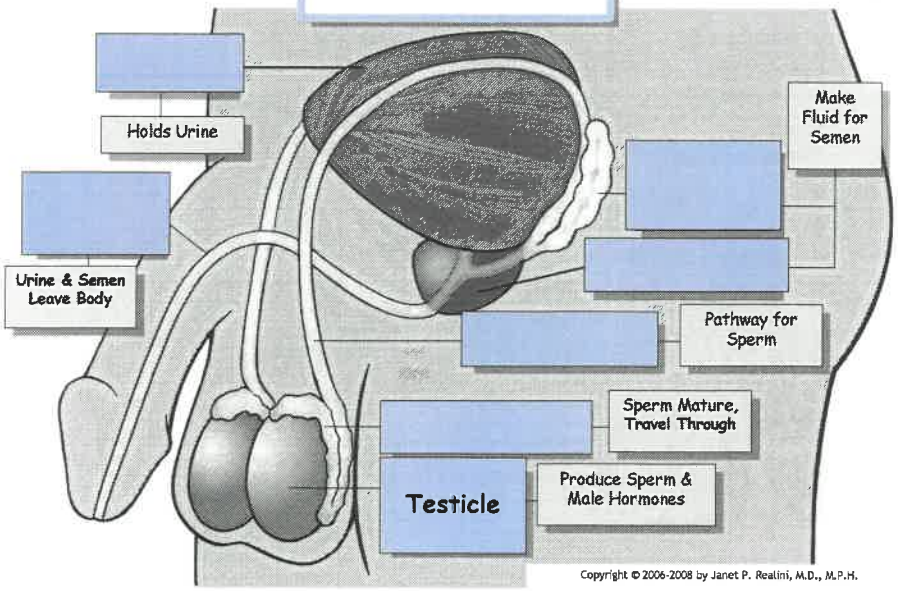
ANATOMY DIAGRAM for Poster or Transparency, for ACTIVITY 2.2

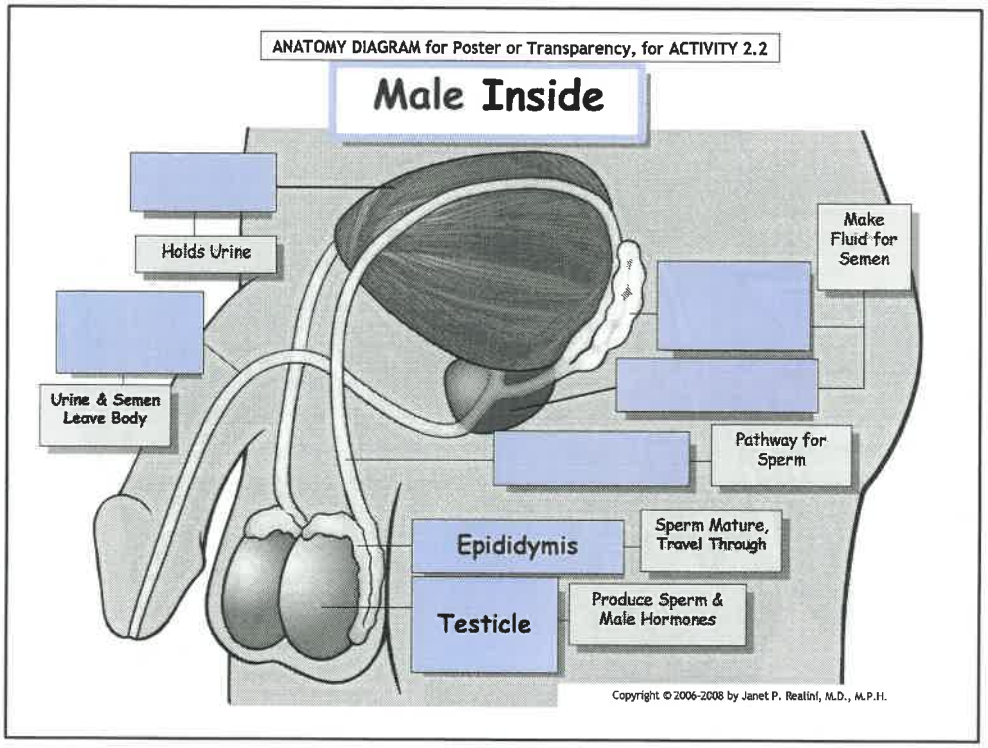
Male Inside



ANATOMY DIAGRAM for Poster or Transparency, for ACTIVITY 2.2

Male Inside




ANATOMY DIAGRAM for Poster or Transparency, for ACTIVITY 2.2
Male Inside
Holds Urine
Urine & Semen Leave Body
Make Fluid for Semen
Pathway for Sperm
Epididymis
Sperm Mature, Travel Through
Testicle
Produce Sperm & Male Hormones
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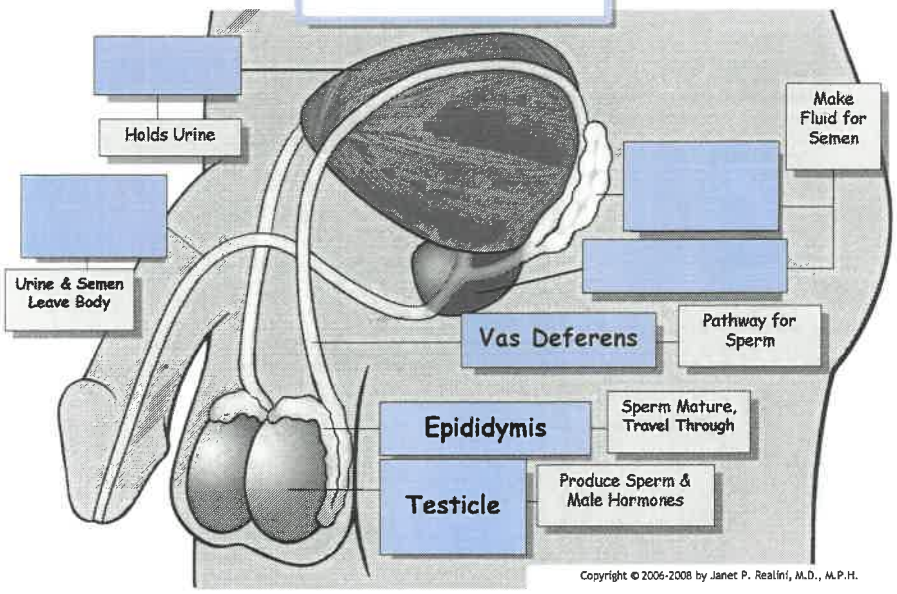
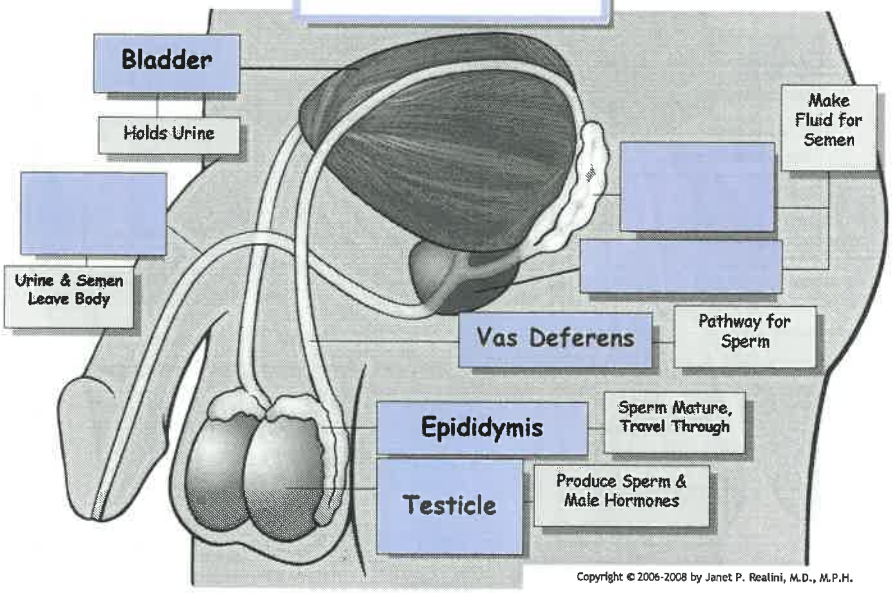
ANATOMY DIAGRAM for Poster or Transparency, for ACTIVITY 2.2

Male Inside



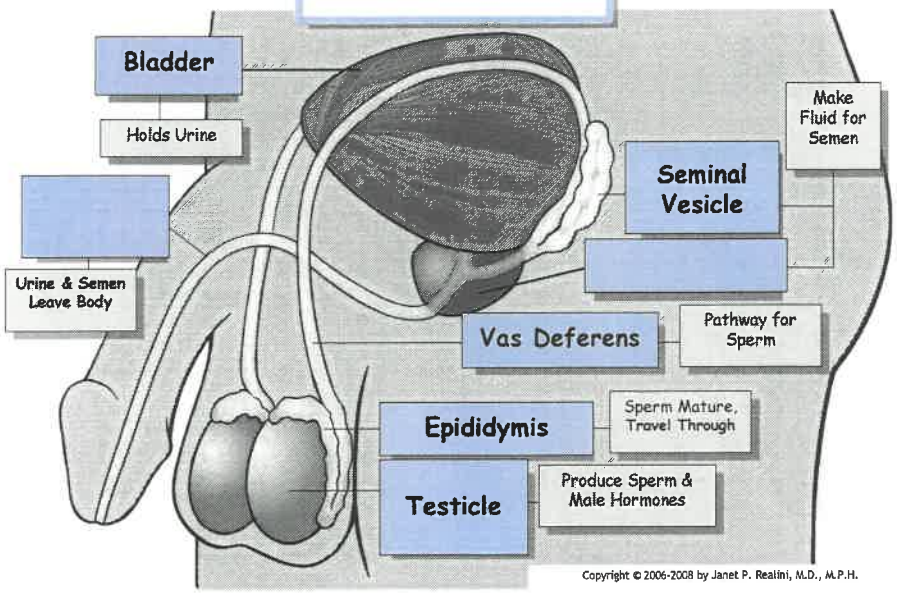
ANATOMY DIAGRAM for Poster or Transparency, for ACTIVITY 2.2

Male Inside



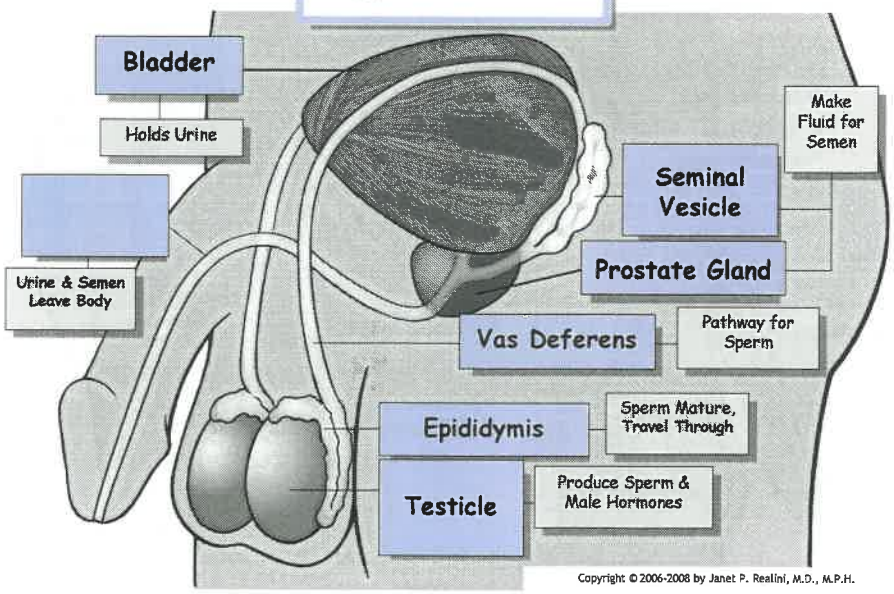
ANATOMY DIAGRAM for Poster or Transparency, for ACTIVITY 2.2

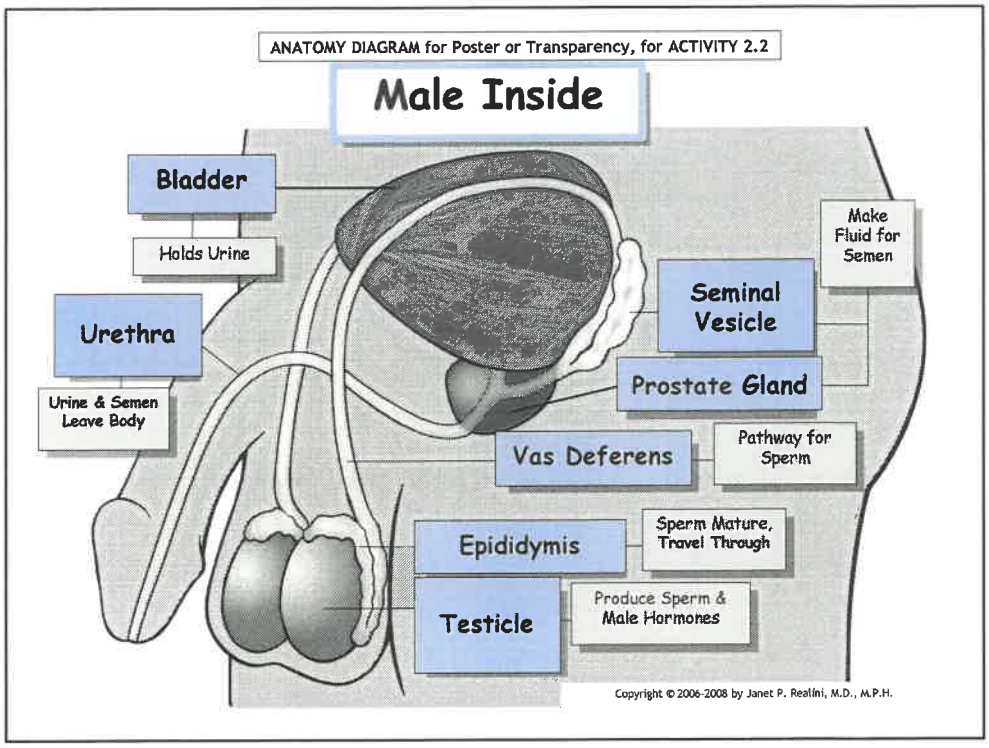
Male Inside



ANATOMY DIAGRAM for Poster or Transparency, for ACTIVITY 2.2

Male Inside




ANATOMY DIAGRAM for Poster or Transparency, for ACTIVITY 2.2
Male Inside
Bladder
Holds Urine
Urethra
Urine & Semen Leave Body
Make Fluid for Semen
Seminal Vesicle
Prostate Gland
Vas Deferens
Pathway for Sperm
Epididymis
Sperm Mature, Travel Through
Testicle
Produce Sperm & Male Hormones
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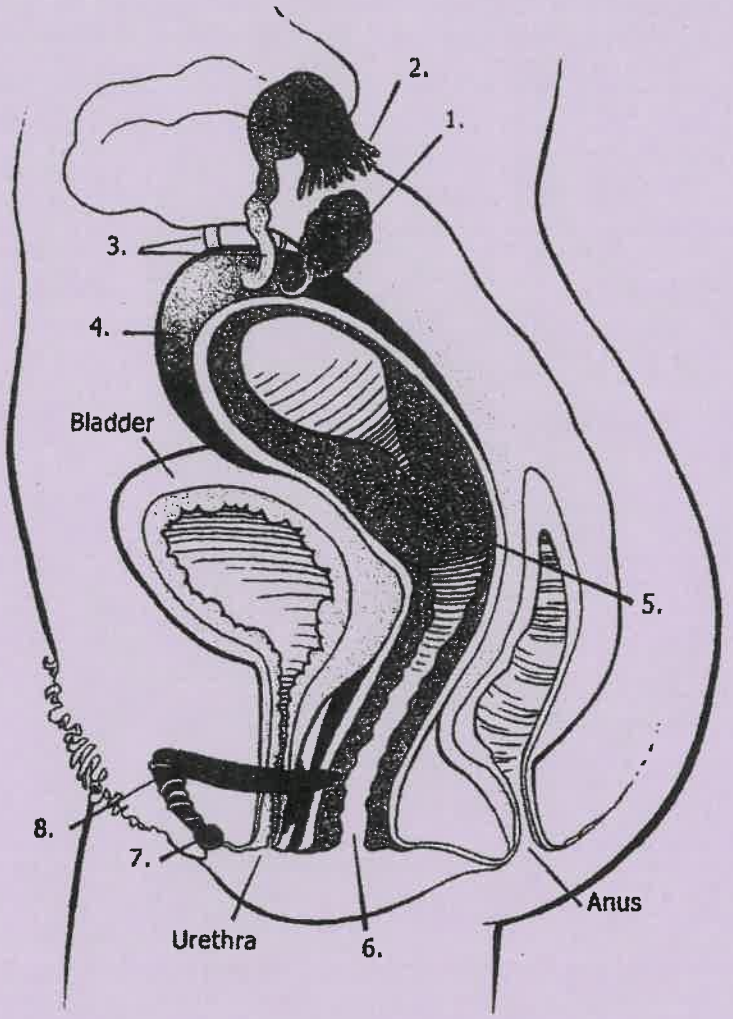
Reproductive System Visual 4

Female (Internal)

cervix
clitoris
egg cells
estrogen
Fallopian tubes
hymen
labia
menstruation
ovaries
ovulation
ovum
progesterone
puberty
sperm cell
uterus
vagina

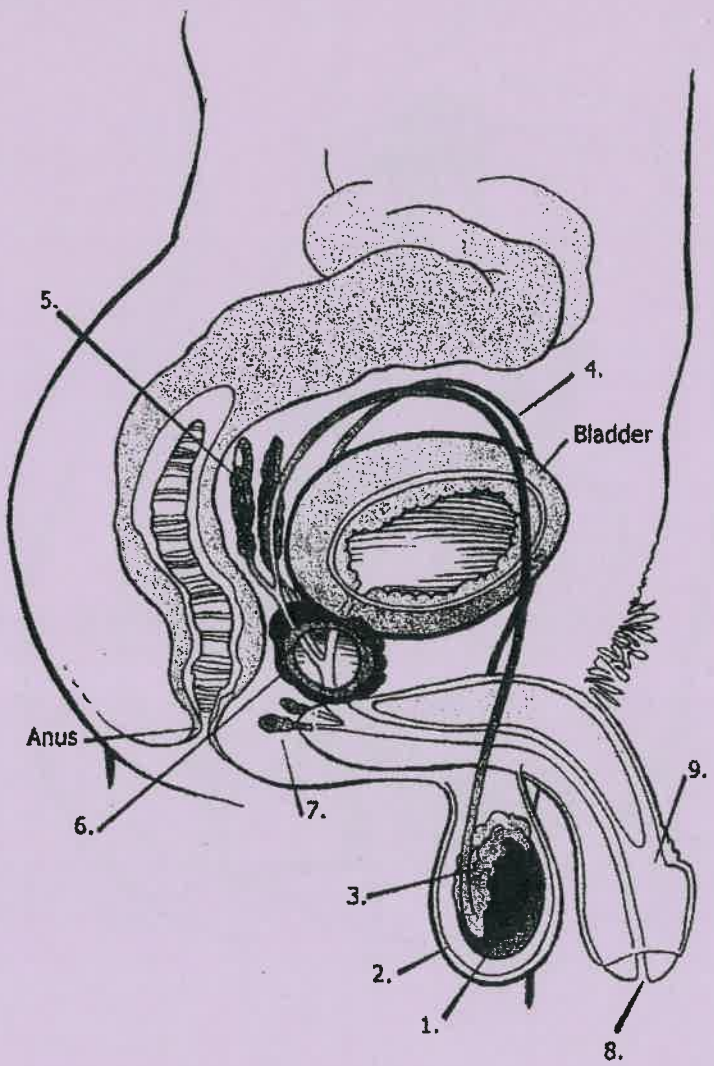


1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

Reproductive System Worksheet 3

Male (Internal)

Cowper's gland
epididymis
erection
nocturnal emissions
orgasm
penis
prostate
scrotum
semen
seminal vesicle
sperm
testes
urine
urethra
vas deferens



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

Activities

1. Warm up

Display warm up as bell work.

Question: There are many changes to the body that happen during a pregnancy. List as many as you can.

Possible answers:

- No period
- Tender, swollen breasts
- Feeling tired
- Nausea or vomiting
- Urinating more often
- Like or dislike certain foods
- More sensitive to smell
- Sometimes no symptoms at all

2. Explain purpose of lesson

Today's class will focus on pregnancy, building on what we learned about the reproductive system. We will cover some of the basics about pregnancy including conception, how people know they're pregnant, the stages of pregnancy and having a healthy pregnancy.

3. Briefly cover the process of conception

Project and discuss *Visual 1, Visual 2,* and *Visual 3.*

Visual 1: Sperm and Egg

- *The human body is made of billions of cells: brain cells, blood cells, bone cells and many more. This includes egg cells and sperm cells. It takes an egg cell and a sperm cell to start a pregnancy.*
- *The egg cell and sperm cell are different from all the other cells in the human body. They have half as many chromosomes. Chromosomes are the parts inside a cell that determine which characteristics are passed from generation to generation.*
- *When sperm and egg join, their chromosomes form into pairs, making them like all the other body cells, with 2 pairs of 23 chromosomes, for a total of 46.*

Visual 2: The First Week

- *Egg cell and sperm cell can join in a few different ways: through vaginal intercourse, donation of sperm to a woman, or the help of medical technology.*
- *When a man ejaculates during vaginal intercourse, a teaspoon of semen goes in the woman's vagina. The semen contains about 300 million sperm. Thousands enter the uterus, with help from the fluid in the woman's cervix, and travel toward the Fallopian tubes. It takes 2 days for sperm to begin reaching a Fallopian tube.*
- *If the woman recently ovulated and an egg cell is present, only one sperm cell may enter the egg. Fertilization is complete when the egg cell and sperm cell have joined.*

- *Over half of all fertilized eggs die for various reasons[1,2] If the fertilized egg doesn't die, then, within 12 hours, it begins to divide, becoming two cells, then four, then eight. As it is dividing, it travels down the fallopian tube toward the uterus.*
- *By the fourth or fifth day, the fertilized egg is only the size of a grain of sand. It enters the uterus and burrows into the rich lining. This nesting process is called implantation.*
- *Now conception is complete.*

Visual 3: Sex Determination

- *Every cell in the human body has a pair of sex chromosomes. These two chromosomes determine a person's biological sex.*
- *People with an X chromosome and Y chromosome are biologically male. People with two X chromosomes are biologically female.*
- *Remember that egg and sperm cells only have half the chromosomes of other cells. Half of a man's sperm cells have an X chromosome, the other half have a Y chromosome. All of the woman's egg cells have an X chromosome.*
- *When an egg joins a sperm with a Y chromosome, the newly formed cell is biologically male.*
- *When an egg joins a sperm with an X chromosome, the newly formed cell is biologically female.*

4. Brainstorm early signs of pregnancy

Have students brainstorm the early signs of pregnancy. Write the pregnancy symptoms on the board as students suggest them, providing additional information as needed.

Provide local resources for pregnancy testing by distributing the *Sexual Health Resources* (*King County, National*, or the local one you developed), or clinic brochures, and review state laws for confidential pregnancy testing.

What are some common signs of pregnancy? Let's brainstorm them as a class. (Write students suggestions on the board and add information as needed.)

No period:
Most of the time, periods stop from the beginning of pregnancy, but not always.

Tender, swollen breasts:
As early as 2 weeks after conception, hormone changes may make the breasts feel tender, sore, fuller or heavier.

Feeling tired:
Hormone changes during pregnancy can make a person feel sleepy and less energetic.

Nausea:
Sometimes called "morning sickness," nausea can happen any time of the day. It also comes from the hormone changes of pregnancy. It can include vomiting or not.

Urinate more often:
The feeling of having to go to the bathroom a lot can also be a symptom of pregnancy. This sensation sometimes stops and then comes back later in the pregnancy.

If people they might be pregnant, even without any of these symptoms, they should get a pregnancy test. A pregnancy test can be done at a clinic or purchased at a drug store to be used at home. It takes about 5 minutes to get the results. At a clinic, the person pees into a cup and a medical staff person runs the test. In a home test, the person pees on the plastic stick that comes with the test. The test can be done 7-10 days after pregnancy begins.

How can people know they are getting a pregnancy test at a reliable clinic?

Answer:

- Clinic has medical staff, such as doctors, nurse practitioners or physician assistants.
- Staff will provide information about places that will help them if they choose to become a parent, have an abortion, or make an adoption plan, without giving personal opinions, or trying to promote a particular choice.

For teachers in King County, Washington:
Hand out *Sexual Health Resources in King County.*
Teens in Washington State can get a pregnancy test confidentially.

For teachers in other parts of the country:
Use *Developing a Local Sexual Health Resources List: Teacher Guide* to develop a local resource sheet or hand out *Sexual Health Resources in the U.S.* Call your local family planning clinic to acquire brochures and learn about relevant state laws. Many state laws are listed at www.guttmacher.org.

5. Briefly describe each trimester of pregnancy

Using *Visual 4*, summarize the main events of each trimester of pregnancy, including fetal development, prenatal care and pregnancy options.

Visual 4: Fetal Development
For the first 2 months, the set of developing cells is called an embryo. After that, it is called a fetus. People often use the word "baby" during pregnancy, but baby *refers to the time after birth. Pregnancies are often described in 3-month periods of time or "trimesters."*

The first trimester *of pregnancy is the first 3 months after conception.*

- *During this time, all the organs begin to develop. This is when the embryo is most at risk for damage from infections and substances such as alcohol and nicotine.*[3]
- *The term "prenatal care" means taking care of the pregnant woman's health, which is very important right from the start of the pregnancy. Trying to eat well, rest, take vitamins, exercise, and avoid alcohol, nicotine and other drugs are all important things to do. Seeing a prenatal doctor or midwife is also important at this time.*
- *The first trimester is also when most abortions take place.* Abortion *is ending a pregnancy with the help of a doctor. It is the most common medical procedure in the United States*[4]*. People have many different beliefs and feelings about abortion.*
- *By the end of the first trimester, the fetus weighs about 1 ounce, about the weight of a quarter.*

The second trimester *is the next 3 months of pregnancy.*

- *During this time, the organs continue to grow and mature.*

- *By the end of the 6th month, the fetus weighs just under 2 pounds, about as much as a can of soda. It is unable to survive outside the uterus without extraordinary medical attention.*
- *Prenatal care is still very important at this time.*

***The third trimester** is the last 3 months of pregnancy until birth.*

- *During this last trimester, the fetus's brain and lungs continue to mature. The fetus begins to open and close its eyes, suck its thumb, and respond to light and sound.*
- *By the end of the third trimester, when the baby is born, the average weight is 7½ pounds, though many babies are smaller or larger.*
- *It's important to know about laws that protect newborns. These are often called "safe harbor" or "safe haven" laws. Every state allows people in crisis to hand over their newborns to the proper authorities, such as a hospital or fire station, anonymously and without getting in trouble. The purpose of these laws is to protect infants and make sure that there is someone to take care of them.*

***At any time in a pregnancy**, an adoption plan can be made.*

- Adoption *is when people become the legal parent of a child that is not their biological son or daughter. Adoption is more common than many people think; over 2% of all U.S. children are adopted.[5] If there is an adoption plan in place, the baby will go to live with the adoptive parents after it is born.*

6. Play "Two Truths and a Lie" game

Hand out the *Two Truths and a Lie* worksheet to each student. Divide the class into teams of three to four people. The teacher reads a statement, and all the teams huddle to decide which statement is untrue (the "lie"). Teams write their answer on a piece of blank paper (1, 2 or 3), and show their answers at the same time. Each team with a correct answer gets a point. Have students correct their worksheets, after each answer is given.

Conclude the lesson.

Today we have talked about how pregnancy happens, and how people know they are pregnant. Later, we will discuss how to prevent pregnancy.

7. Assign homework

Allow students to choose between the individual or family homework and explain the assignments as needed.

Individual Homework: Pregnancy

Family Homework: Pregnancy, available in English, Spanish, Russian, Chinese, Vietnamese and Arabic under Links for Families.

8. Exit ticket

Hand out the *Lesson 3 Exit Ticket.*

6. *Labia*
   - *The labia are two folds of skin around the openings of the urethra and vagina. The top of the labia meet at the clitoris.*
   - *The outer labia have pubic hair.*
   - *The labia also provide sensation.*

4. Review the internal reproductive organs

Show students *Reproductive System Visual 3 and Visual 4*. Describe the names and functions of the organs in the male and female reproductive systems (internal views) while students take notes on the *Reproductive System Worksheet 3 and Worksheet 4*.

Show *Visual 3: Male (Internal)* and describe the parts.

First describe the body parts that are not part of the reproductive system. They are already labeled.

This is a side view drawing of the male reproductive system, with the body facing to the right.

The anus and bladder are not part of the reproductive system, but they are located nearby. They are already labeled on the worksheet.

- *The anus is where bowel movements pass out of the body.*
- *It also provides sensation.*
- *The bladder is where urine is stored.*

Then describe the male reproductive organs in the order that they are involved with ejaculation.

1. *Testicles*
2. *Scrotum*
   - *There are two testicles located inside the scrotum.*
   - *During puberty, the testicles start producing sperm, which are the male sex cells.*
   - *During puberty, the testicles also start producing the testosterone, which is the male sex hormone.*
   - *The process of sperm leaving the body is called ejaculation.*

3. *Epididymis*
   - *The epididymis is located toward the back of each testicle.*
   - *Sperm mature here before leaving the body.*

4. *Vas deferens*
   - *When sperm leave the epididymis, they travel through long tubes called the vas deferens.*
   - *In the vas deferens, the sperm pass by different glands that add liquids.*
   - *The combination of sperm and liquids is called semen.*

5. *Seminal vesicles (two)*
6. *Prostate gland (one)*
7. *Cowper's glands (two)*
   - *Liquid from the seminal vesicles and prostate gland become part of the semen.*
   - *Liquid from the Cowper's glands is also called pre-ejaculate because it leaves the body before the other fluids. It protects sperm from the acid in urine.*

8. *Urethra*
9. *Penis*
   - *During ejaculation, the urethra is the tube that carries semen out of the body through the penis.*
   - *The urethra also carries urine out of the body, but it cannot carry both urine and semen at the same time.*

Show *Visual 4: Female (Internal)* and describe the parts.

First describe the body parts that are not part of the reproductive system. They are already labeled.

This is a side view drawing of the female reproductive system, with the body facing to the left.

The anus, bladder and urethra are not part of the female reproductive system, but they are located nearby. They are already labeled on the worksheet.

- *The anus is where bowel movements pass out of the body.*
- *It also provides sensation.*
- *The bladder is where urine is stored.*
- *The urethra is the tube that carries urine out of the body.*

Then describe the female reproductive organs in the order that they are involved with ovulation and menstruation. Remind the class that ovulation is the process of the egg leaving the ovary, and menstruation is the process of blood and tissue leaving the body.

1. *Ovary*
   - *There are two ovaries in the reproductive system.*
   - *The ovaries are where eggs are produced and mature. The egg is also called the ovum. It is the female sex cell. Girls are born with eggs already in their ovaries.*
   - *During puberty, the ovaries begin producing estrogen, which is the female sex hormone.*
   - *Ovulation is the process of a mature egg leaving the ovary.*

2. *Fimbria*
3. *Fallopian tubes*
   - *The fimbria are the fringe-like ends of the fallopian tube.*
   - *When the mature egg leaves the ovary, the fimbria guide it into the fallopian tube.*
   - *The egg then travels through the fallopian tube to the uterus.*

4. *Uterus*

- *The uterus is made of muscular walls*
- *Fertilization is when the egg cell and sperm cell join. Pregnancy will begin when the joined cells attach to the lining of the uterus, which has built up a rich lining of tissue and blood. It takes about 9 months until a baby will be born.*
- *If an egg cell and sperm cell do not join, the lining of the uterus will dribble out of the body over the next few days. This is called menstruation or a period.*
- *It happens about once a month, starting in puberty and ending during menopause.*

5. *Cervix*
   - *The cervix is the bottom section of the uterus.*
   - *It produces fluid that has a different consistency and color at different times of the menstrual cycle. For example, cervical fluid is wetter and more stretchy during ovulation.*

6. *Vagina*
   - *The small opening of the cervix is at the back of the vagina.*
   - *During menstruation, the menstrual fluid leaves the uterus by flowing through the cervix and vagina, and out of the body.*
   - *During childbirth, the baby also travels from the uterus, through the cervix and vagina, and out of the body.*

7. *Glans of clitoris*
8. *Shaft of clitoris*
   - *The clitoris provides sensation. It has two parts: the shaft and glans.*
   - *The shaft is inside the body. The glans is outside, making it part of the genitals.*
   - *The glans of the clitoris is in front of the openings of the urethra and vagina.*

5. Define sexual response system terms.

Show the *Visual 5: Human Sexual Response* and briefly explain the 3 components: desire, arousal, release.

Now we're going to talk about human sexual response. Genitals are only one part of the sexual response system. It also includes emotions, the brain, hormones, the senses and the entire body.

Three important aspects of sexual response are desire, arousal and release.

Desire *is the feeling of wanting to be sexually close to someone.*
- *A person who feels desire may or may not decide to be involved in sexual activity.*

Arousal *is the experience of being sexually excited.*
- *Arousal can result from a person's thoughts and attractions, as well as from sexual activity with another person or during masturbation. People may have very different emotions during arousal depending on the circumstances.*
- *For women, arousal often includes the clitoris becoming erect, the vagina getting wetter, and the labia swelling.*
- *For men, arousal often includes the penis becoming erect, the scrotum moving closer to the body, and a small amount of fluid being released from the penis.*

Individual Homework: Anatomy

Name: _____ **Period:** _____

1. Do most people's bodies have 1 or 2 of each body part listed below? The first one is done for you as an example.

Cervix	(1)	2	Scrotum	1	2
Clitoris	1	2	Testicle	1	2
Epididymis	1	2	Urethra	1	2
Fallopian tube	1	2	Uterus	1	2
Labia	1	2	Vagina	1	2
Ovary	1	2	Vas deferens	1	2
Penis	1	2	Vulva	1	2

2. Write the word that describes each body process listed below.

   A. The process of sperm leaving the body

   B. The process of the egg leaving the ovary

   C. The process of blood and tissue leaving the uterus when a woman is not pregnant

Draw a line connecting the body parts and processes that have similar roles in male and female bodies.

Egg	Ejaculation
Testicle	Sperm
Ovulation	Shaft of Clitoris
Shaft of Penis	Fallopian Tube
Vas Deferens	Ovary
Glans of Penis	Glans of Clitoris

1. Circle the correct statements below:

   A. The shapes and sizes of bodies and body parts vary greatly from person to person.
   B. There is a wide range of normal anatomy.
   C. Physical differences between people should be respected.
   D. Physical differences between people are usually the sign of a serious medical problem.

2. Fill in the correct term.

   Ejaculation
   Ovulation
   Semen
   Testicle
   Urethra
   Vagina
   Vulva

   A. The process of the egg leaving the ovary:

   B. The process of sperm leaving the body:

   C. Another word for the female genitals:

   D. A passageway into the body for sperm, and a passageway out of the body for vaginal fluids, menstrual fluids and a baby during childbirth:

   E. In females, where urine leaves the body; in males, where urine and semen leave the body:

   F. Where testosterone and sperm are produced, starting in puberty:

   G. The liquid containing sperm and other fluids:

On your own piece of paper, read the article The Surprising Science of How Pregnancy Begins and answer the following.

1. What is ovulation? How many eggs is a person with ovaries born with?
2. Draw and label the anatomy of the human egg.
3. What does estrogen thicken?
4. Draw and label the anatomy of the sperm.
5. What hormone is released one week after implantation and can be detected by a pregnancy test?

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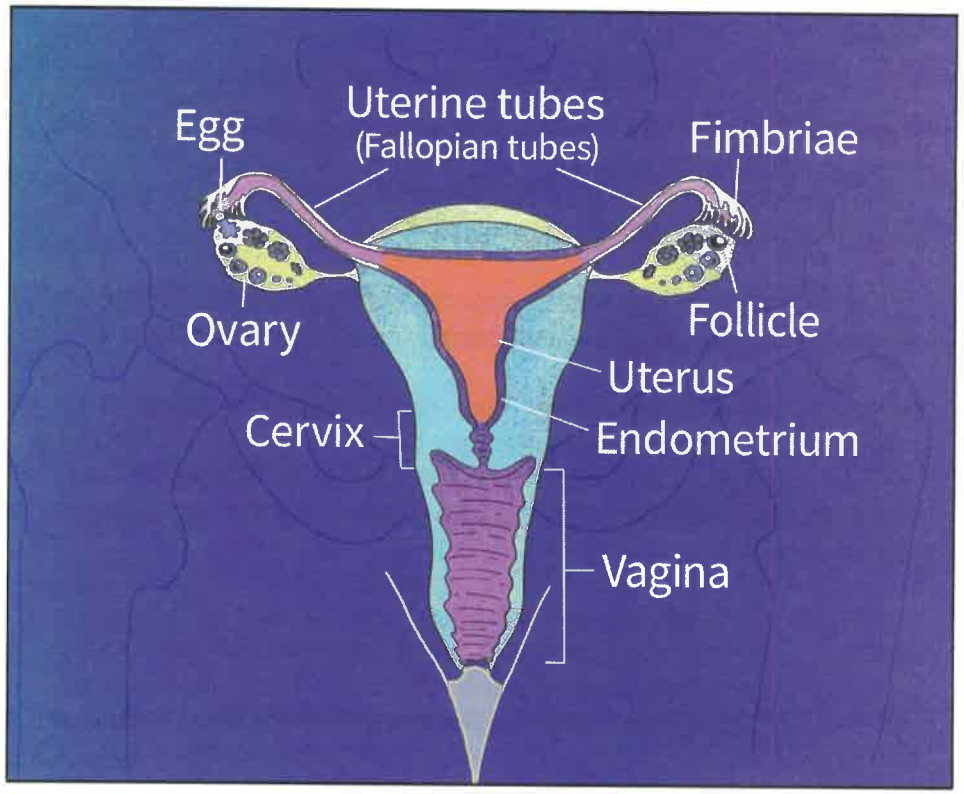
View the story online at:
https://www.npr.org/sections/health-shots/2023/04/12/1159753316/pregnancy-start-conception

npr

A visual guide to the surprising science of how pregnancy begins



By Selena Simmons-Duffin
and LA Johnson

DAY 0
OVULATION

Pregnancy is often talked about as though it's a light switch. You're a regular person walking around and then a switch flips — presto, you're pregnant.

The reality is more nuanced.

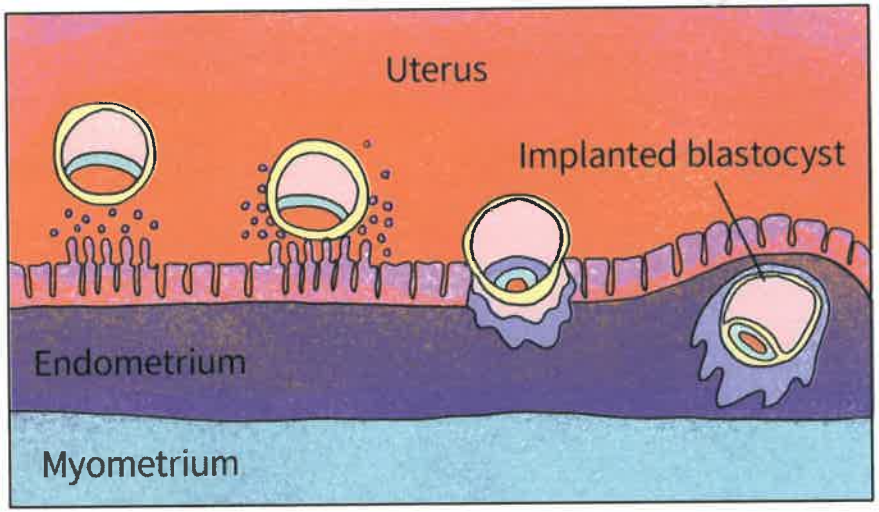
"Sex ed really oversimplified it: 'The egg has been fertilized and it has implanted,'" says Carmel Shachar, who runs the Petrie-Flom Center for Health Law Policy, Biotechnology, and Bioethics at Harvard Law School. "What people don't realize is that there's a whole, very complex journey before that, that honestly usually is invisible."

Lots of steps need to happen, she says, from the time an egg and sperm meet to the moment a person tests positive on a pregnancy test.

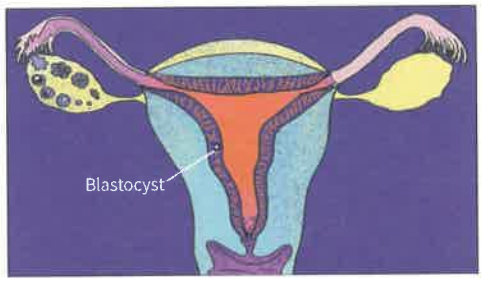
The more scientists learn, the more they realize that the start of pregnancy isn't a moment, but a process that often ends before it really begins. As many as 1 in 3 fertilized eggs either won't implant or will end in miscarriage. In fact, most pregnancy loss happens before the fertilized egg implants.

Defining exactly when a pregnancy begins is a hot topic in some state legislatures and U.S. courts at the moment. While federal law has long said pregnancy starts after a fertilized egg has implanted in the uterus, state law in Kentucky, for example, calls someone pregnant as soon as a sperm meets the egg.

With so much riding on biology that's often misunderstood, let's break down what is known: Here's how the run-up to a pregnancy begins in that very first week of action, from the minute a single egg, the size of a grain of table salt, bursts forth from an ovary.



For all the fascinating things scientists know about how all this happens, there's still so much that's not yet well understood. Early pregnancy remains something of a black box. At the moment, there's limited technology to be able to observe — let alone intervene — in very early pregnancy, which is why so many of the details are still unknown. "It's happening inside a person, and it's very difficult to study without disturbing the pregnancy," notes Shachar, the Harvard bioethicist.

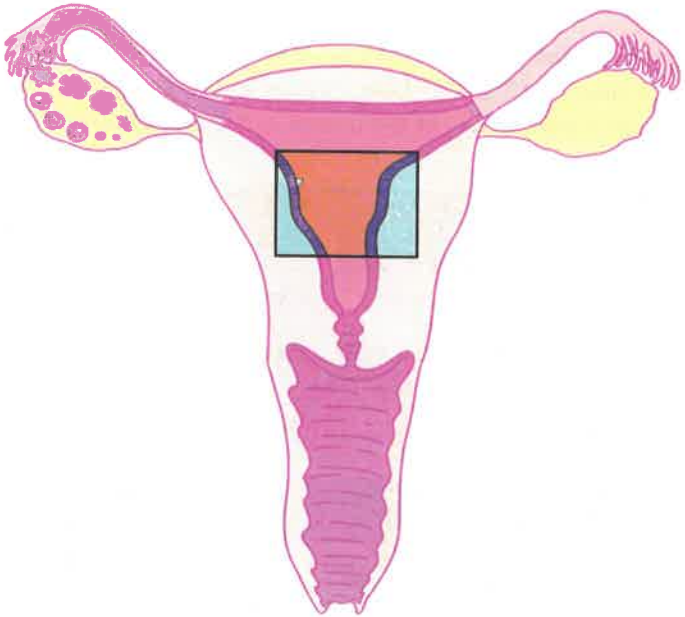


That's a challenge for laws that try to regulate pregnancy, Shachar says. "The take-away is that a lot of legislation in this area doesn't reflect scientific knowledge, especially because laws don't work well with scientific uncertainty."

As science and politics continue to clash over when life begins, understanding the process of early pregnancy as fully as possible is more important than ever.

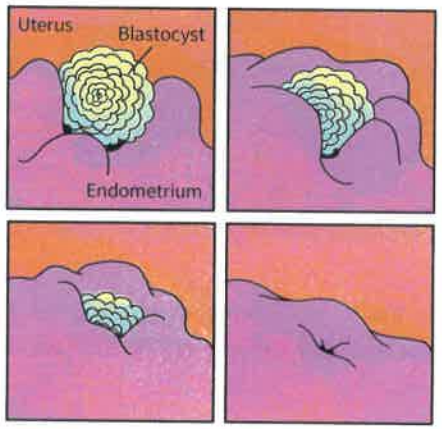
Thanks to the many scientists who offered guidance and advice for this story, including Ripla Arora of Michigan State University, David Miller of the University of Illinois Urbana-Champaign and Joanne Muter of the University of Warwick, among others.

DAY 6
IMPLANTATION BEGINS

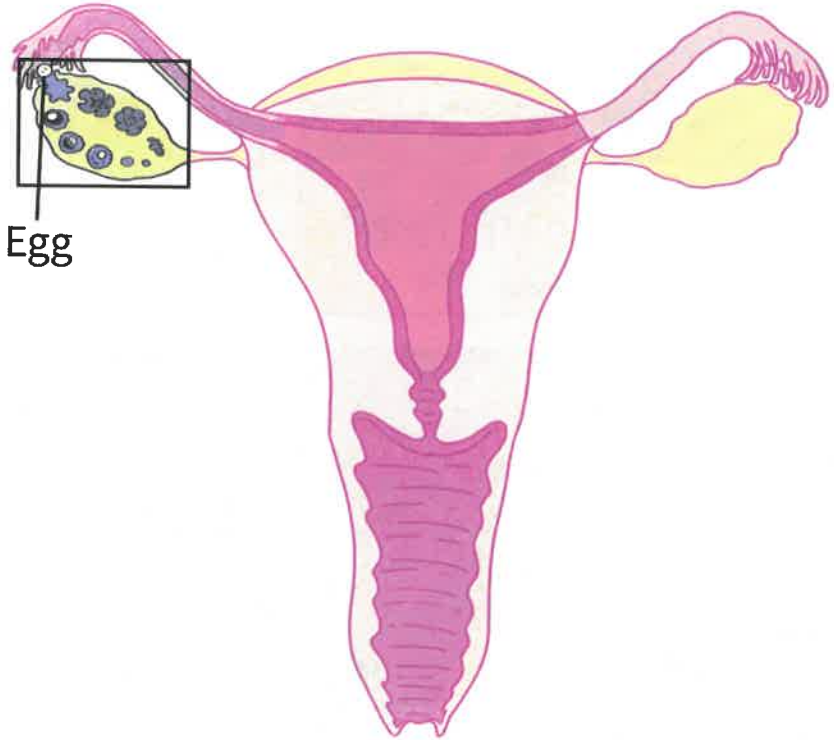


Voilà — this is implantation, considered the start of pregnancy under U.S. federal law.

At this point — about a week after ovulation — the person who has had all these changes happening inside their body still has no idea it has been going on. It will take an additional week after implantation (at the earliest) before there's enough of a hormone called hCG in their urine to turn a home pregnancy test positive.



That's right around the time some people with very regular cycles might notice that their period is late.

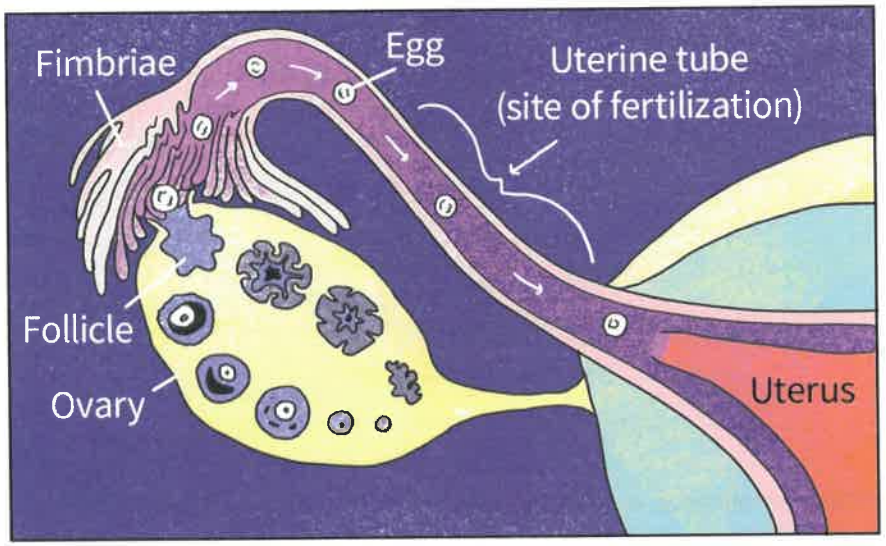


Starting at puberty, a process called ovulation begins. That's when — roughly once a month — a single mature egg breaks through its surrounding capsule, or follicle, and is released from one of the ovaries.

If you were born with ovaries, you were born with all the eggs you'll ever have — roughly 1 million to 2 million. Each month, about 1,000 eggs are activated but never develop further, while one (or sometimes a couple) fully matures. This happens until menopause, usually several decades later, when there aren't many eggs left.

***FUN FACT!**

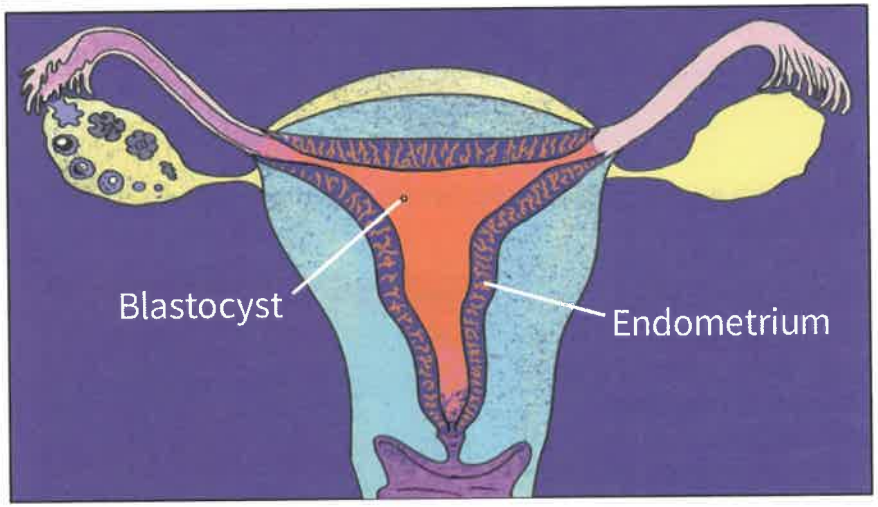
The egg cell — about the size of a grain of table salt — is one of the largest human cells and can be seen with the naked eye.



After it's released from the follicle, the egg is scooped up and enveloped by the nearby, fingerlike projections (also known as fimbriae) at the end of one of the two slender uterine tubes (sometimes called fallopian tubes) that lead to the uterus.

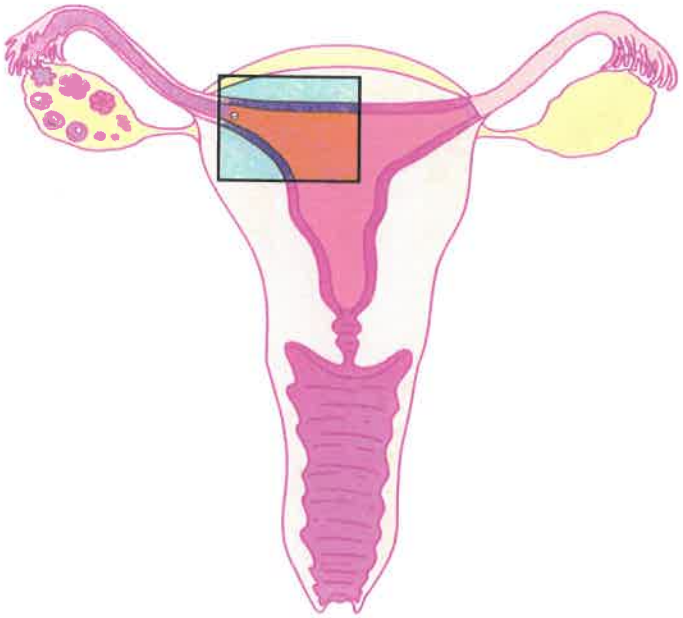
The egg is protected by two layers. The inner one is called the zona pellucida, a jelly cushion of protein. The outer layer is called the corona radiata — a sunlike array of helper cells that have been nurturing the egg inside the ovary. These protective layers become even more important later.

The blastocyst has now traveled all the way down the uterine tube. Around this time, the bundle of cells breaks out of its zona covering so it's able to implant in the lining of the uterus — the endometrium.

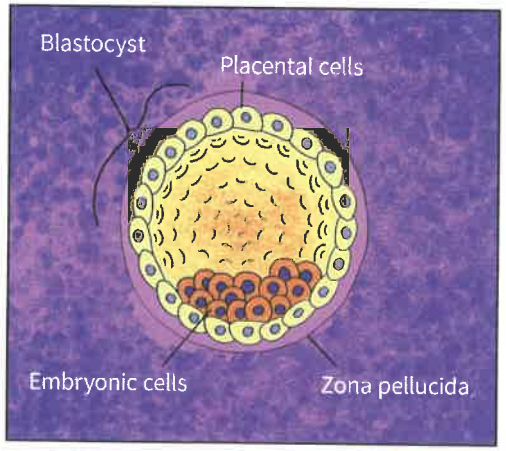


Now inside the uterus, a week or so after ovulation, the blastocyst has about four days to implant in the soft-tissue lining of the uterus.

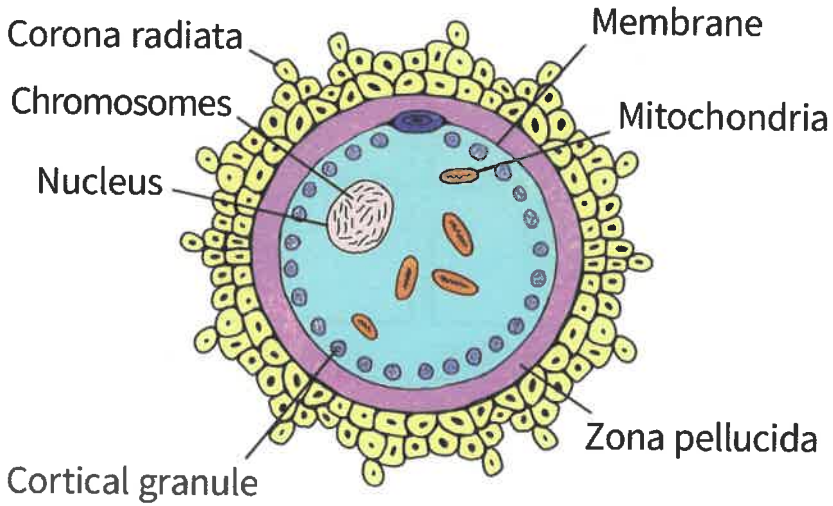
DAY 5
ENTERING THE UTERUS



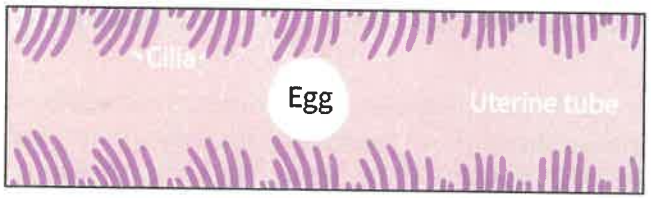
Four days after fertilization, the fertilized egg has become a blastocyst — a bundle of cells with certain structures. Some will become the placenta, and others the embryo.



ANATOMY OF THE HUMAN EGG

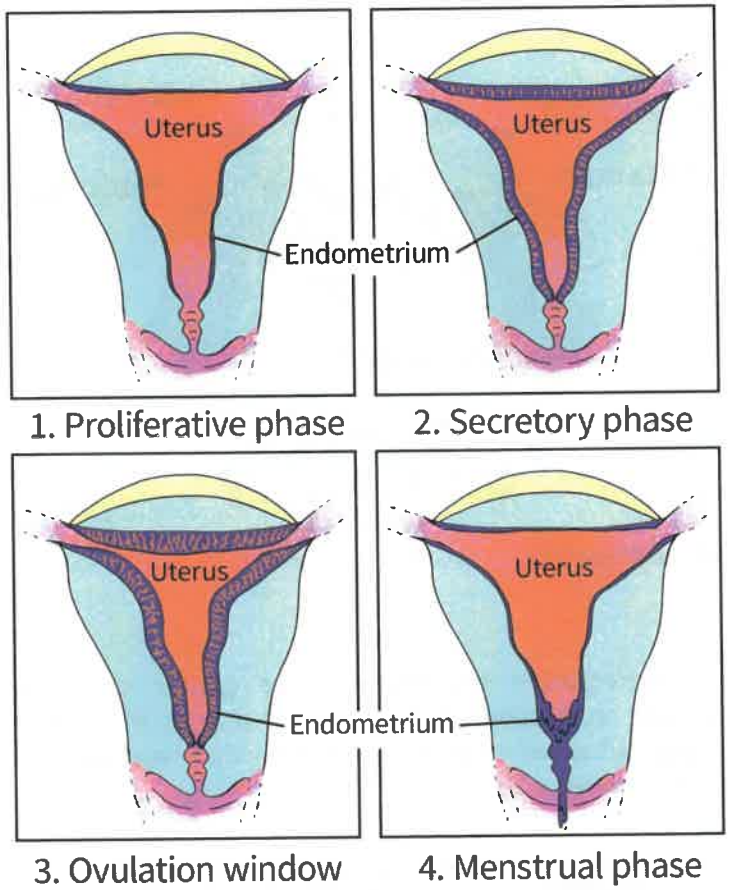


(Assisted reproductive technologies have greatly expanded how ovulation and fertilization can happen so that many more people can have babies. What we're describing here is what happens when that assistance isn't needed.)



The uterine tube acts as a kind of pulsing walkway; it's lined with cilia (small hairlike structures) that beat rhythmically, moving the egg along. Once the egg leaves the ovary, there's only a short window — less than 24 hours — for fertilization to happen.

THE 28-DAY CYCLE OF THE ENDOMETRIUM



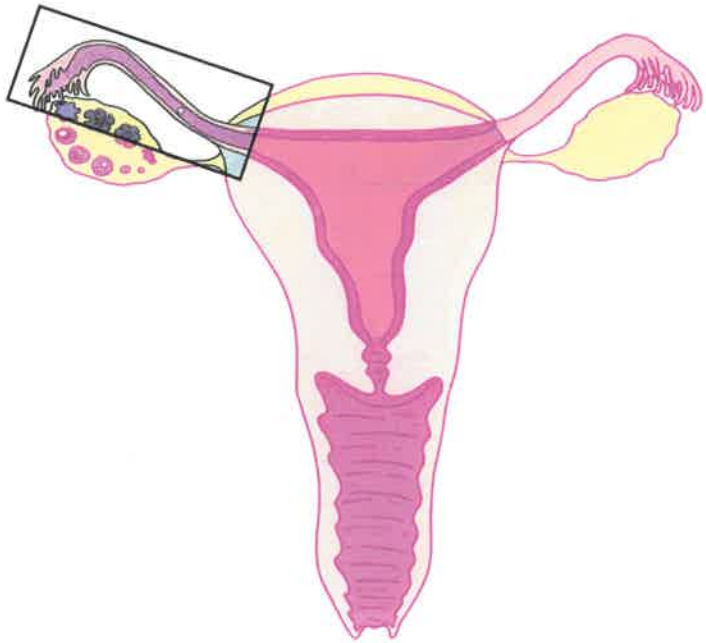
1. Proliferative phase
2. Secretory phase
3. Ovulation window
4. Menstrual phase

Meanwhile, a lot has been happening in the uterus. For weeks, rising levels of the hormone estrogen have prompted a thickening of the endometrium — that's the cushiony lining of the uterus. The endometrium is one of the fastest-growing tissues in the body — in a monthlong menstrual cycle, it can grow to eight times its initial thickness.

If sexual intercourse happens the same day as ovulation (or even several days beforehand), that's when sperm may enter the picture.

Every ejaculation contains tens of millions of sperm, and sperm can survive up to five days or so inside the uterus or uterine tubes.

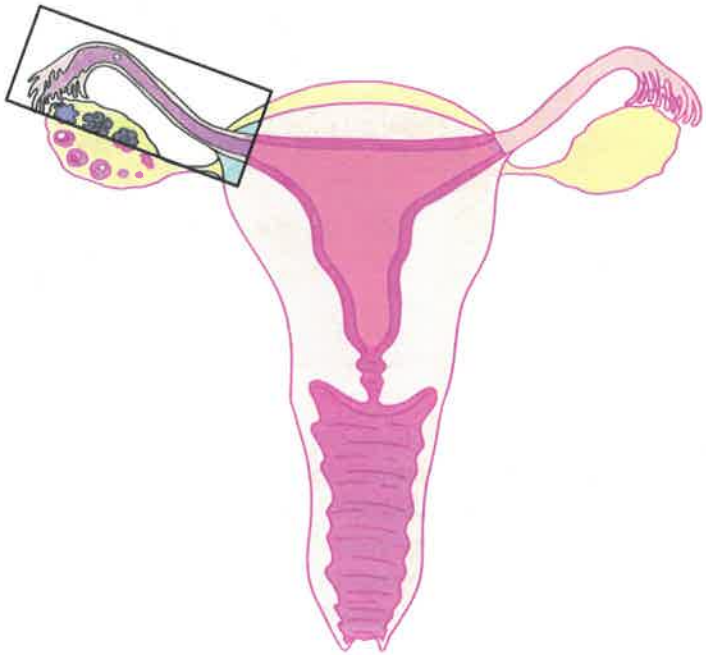
DAYS 3 AND 4
TRAVEL TIME



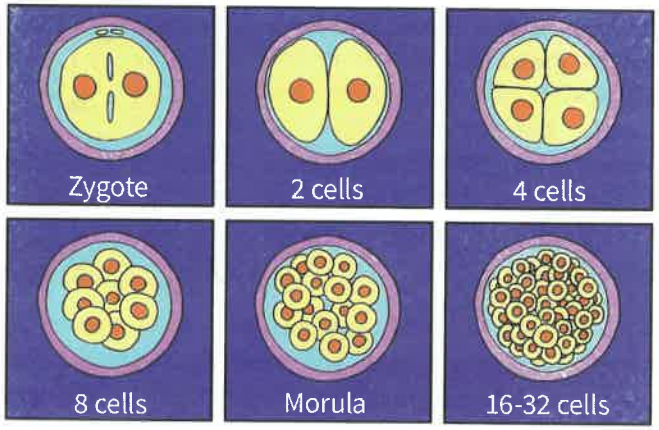
The eight-to-32-cell stage looks kind of like a berry, so the bundle is called a morula, which is Latin for mulberry.

Even as the morula continues to divide into dozens of cells and then hundreds, its outer case, the now-hardened zona, keeps it from expanding in size — so it's still only about as big as a grain of salt. That's crucial to keep the little ball of cells from getting stuck as it moves through the slender uterine tube.

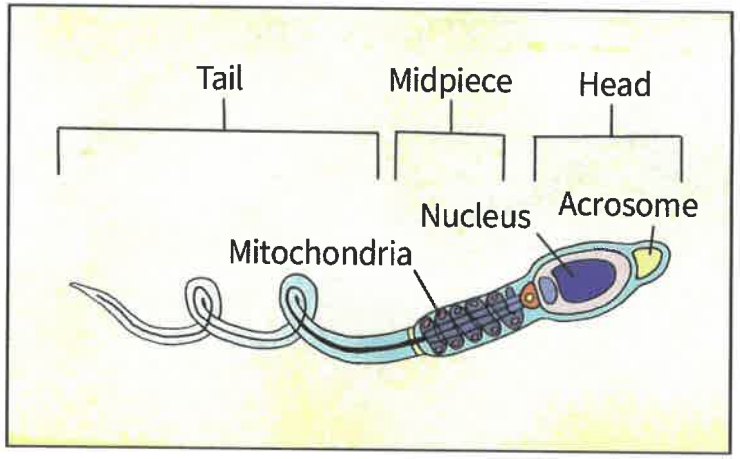
DAY 2
DIVISION



Very quickly, the one-celled zygote starts to divide and travel again through the uterine tube. One cell becomes two, then four, then eight, then 16. The cells of the corona radiata that had been surrounding the egg start to fall off, disperse and eventually disappear.



ANATOMY OF A SPERM



Now, despite what you may have heard, sperm cells are not a mighty infantry on a self-propelled mission to get to the passive egg.

Those little tails do give sperm some mobility by moving in a corkscrew motion, but sperm don't have enough energy or directional ability to get to an egg on their own.

In fact, most sperm don't get very far. Crossing the uterus to get to the egg in whichever uterine tube it is in means navigating an immense distance with lots of crevices to get lost in and immune cells to evade.

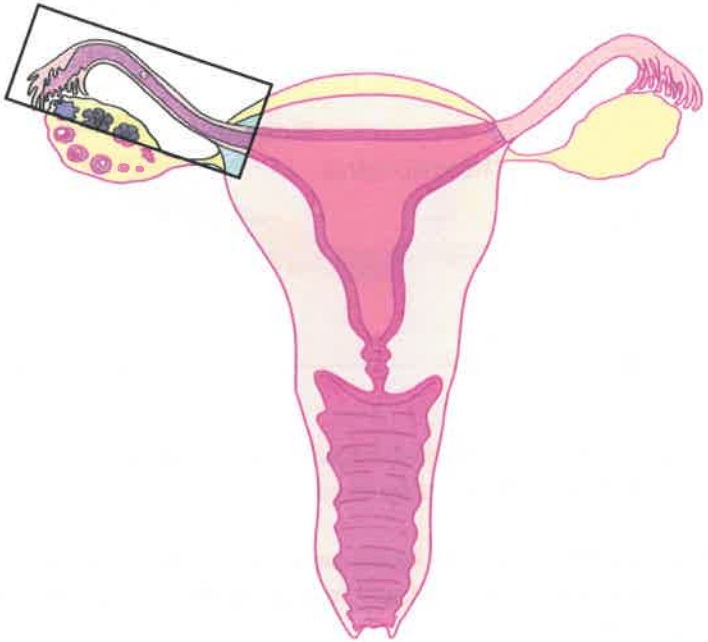
Scientists think waves of fluid inside the uterus, body heat, chemical signals, beating cilia and muscular contractions of the uterus (possibly from sex) play a role in how quickly sperm get to one of the uterine tubes. Some can get there within an hour of intercourse!

***FUN FACT!**

A sperm is one of the smallest human cells — about the size of a grain of pollen, or 0.055 mm long.

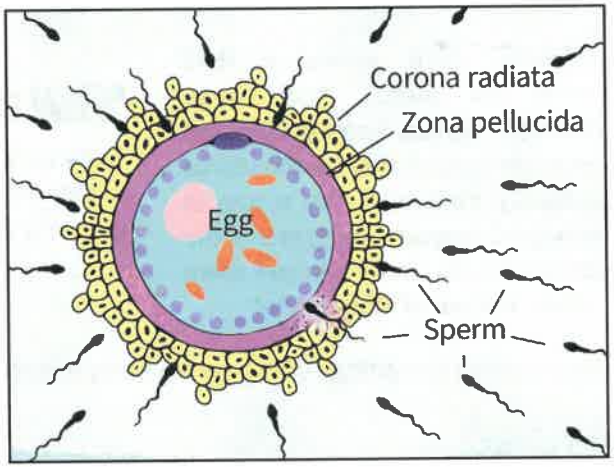
Only a small percentage of the sperm make it that far.

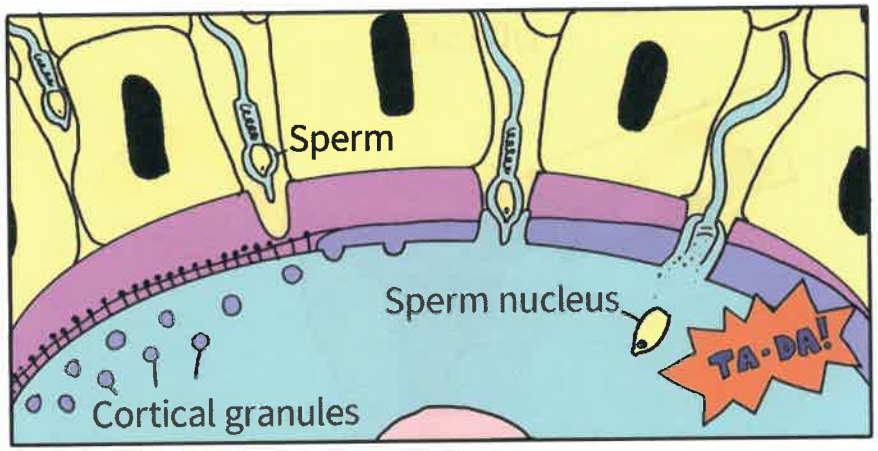
DAY 1
FERTILIZATION



Once inside the uterine tube, the sperm become hyperactivated (for reasons researchers still don't understand) and begin to move more vigorously.

When they reach the egg, the sperm still aren't done. There are those two layers that encapsulate the egg — the corona radiata and the jellylike zona pellucida — to get through before fertilization can happen.

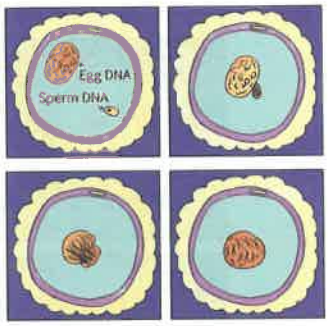




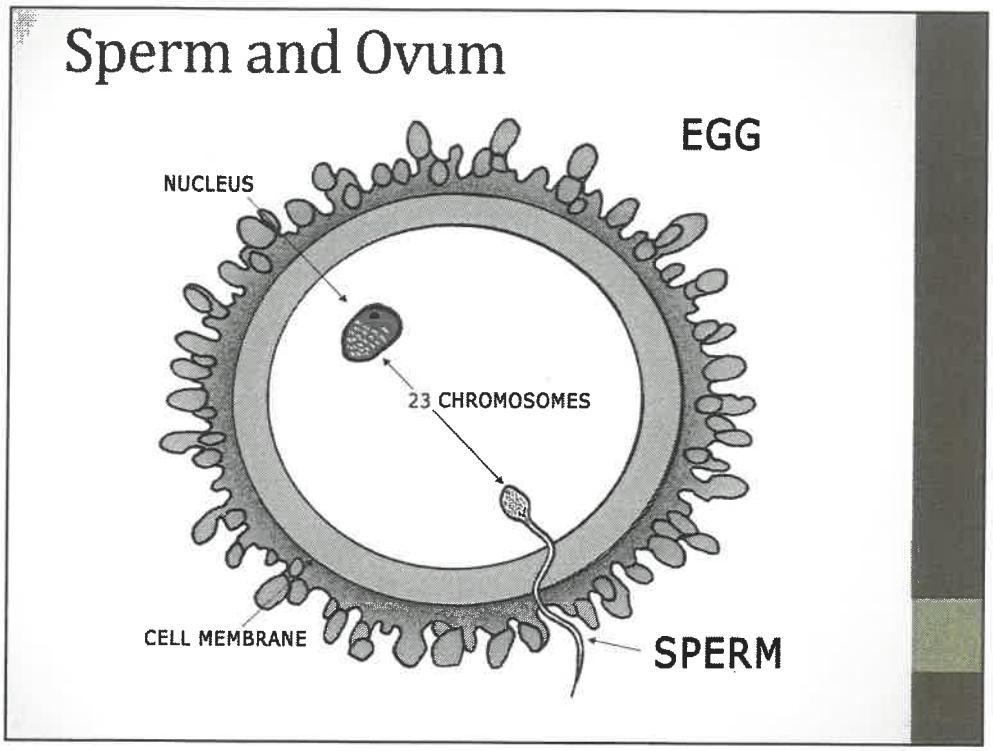
Enzymes released by the sperm help break down these layers. When the first sperm gets through the corona radiata, through the zona pellucida and, finally, through the membrane of the egg itself, the egg releases enzymes that quickly harden the zona. No other sperm can get in at this point. The first sperm that reaches the egg and attaches to its outer membrane releases its genetic material into the egg.

This is the moment of fertilization, otherwise known as conception. It has been less than a day since the egg was released from the ovary, and there are still many uncertainties to overcome before this fertilized egg becomes an embryo.

The egg and sperm each have 23 chromosomes (most other cells in the body have 46 — in 23 pairs). Through the process of fertilization, the 23 chromosomes from the egg and the 23 from the sperm join together and mix a bit to create a new, unique genetic blueprint.

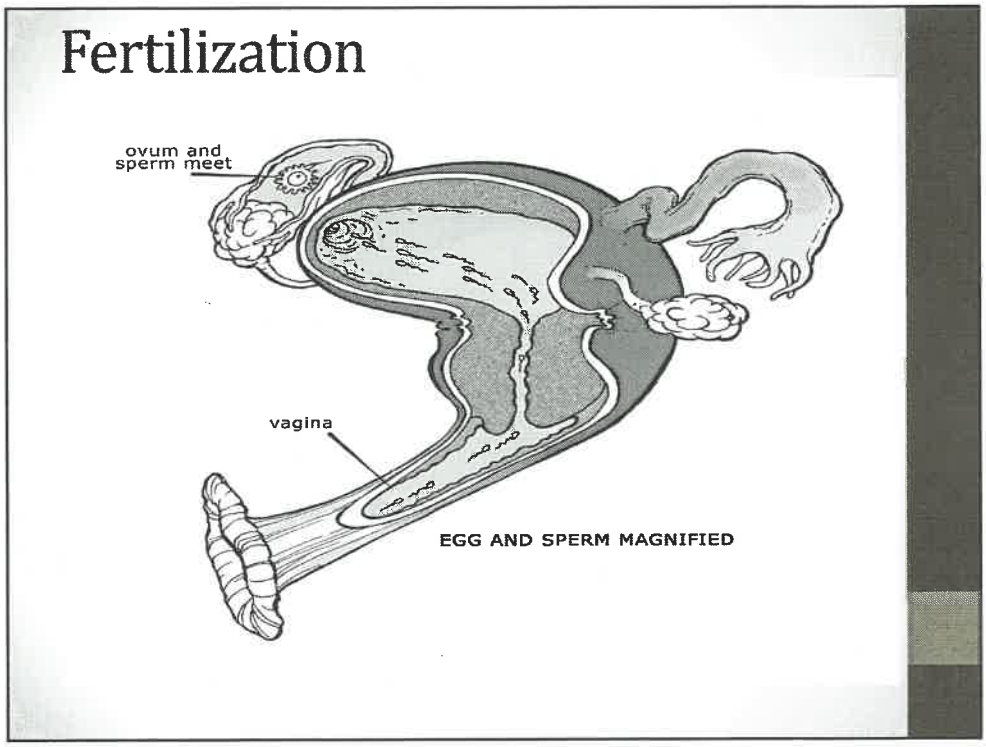


The egg, now fertilized and containing its new set of 23 pairs of chromosomes, is called a zygote. The genes that will influence hundreds of characteristics — ranging from biological sex to hair color and eye color — are determined instantly.



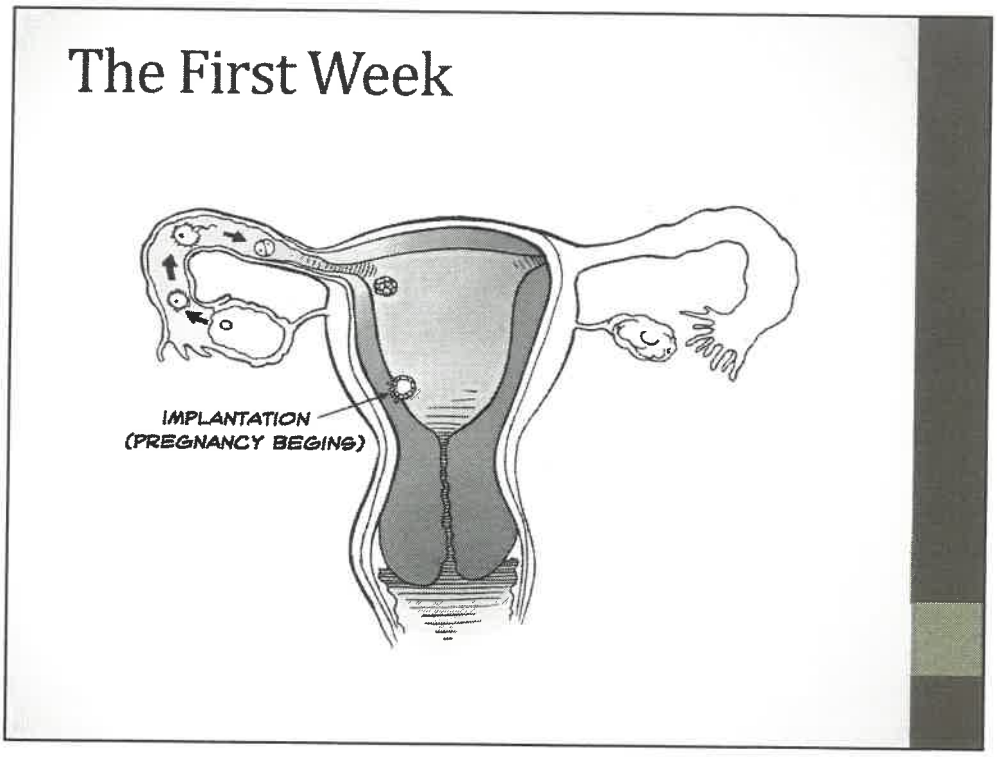
See ***High School FLASH*** lesson 3, page 4 for teacher notes.

The curriculum is online: www.kingcounty.gov/health/FLASH



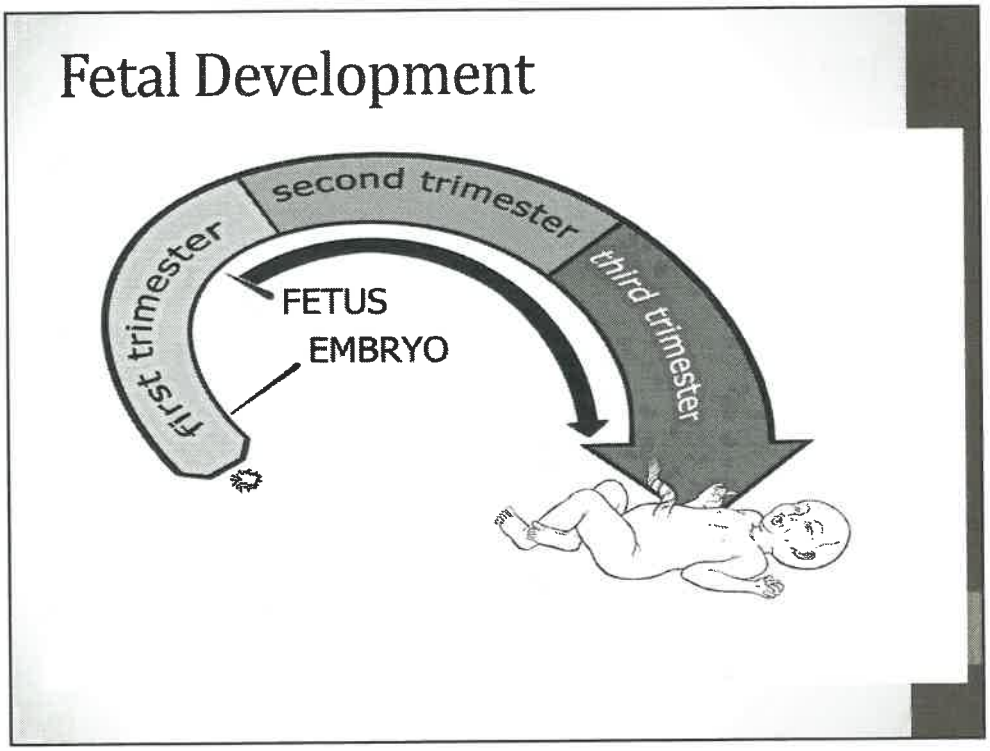
See ***High School FLASH*** lesson 3, page 4-5 for teacher notes.

The curriculum is online: www.kingcounty.gov/health/FLASH



See ***High School FLASH*** lesson 3, page 5 for teacher notes.

The curriculum is online: www.kingcounty.gov/health/FLASH



See ***High School FLASH*** lesson 3, page 6-7 for teacher notes.

The curriculum is online: www.kingcounty.gov/health/FLASH

Pregnancy

Life in the womb (9 months in 4 minutes) HD

Edit

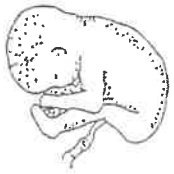
https://safeshare.tv/x/ss61b21ff4c3fc5

Name _____ Date _____

PREGNANCY AND CHILDBIRTH STAGES (SE-19)

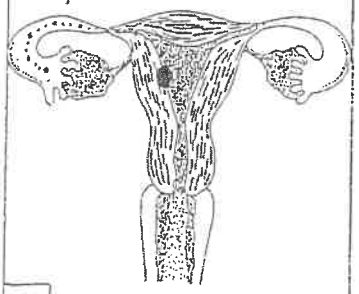
DIRECTIONS: Number the stages of pregnancy and childbirth in the correct order.

EMBRYO is now called a FETUS.

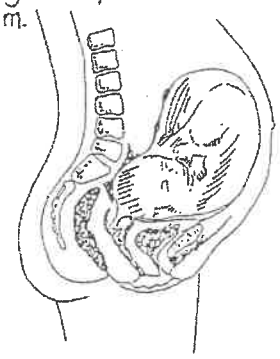


Cells multiply to form the placenta.

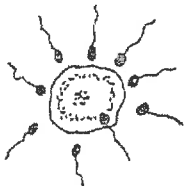
The fertilized egg implants itself.



Pregnancy is full term.

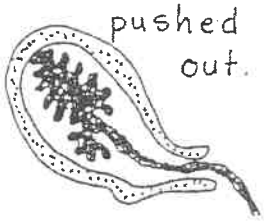


The egg cell and sperm cell join.

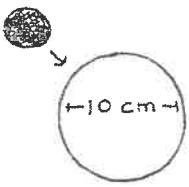


Baby is referred to as an EMBRYO.

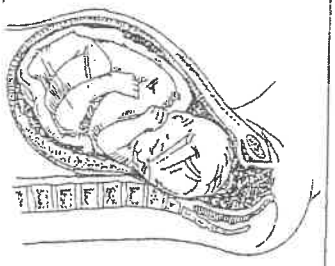
Placenta and umbilical cord are pushed out.



Labor: The cervix dilates to 10 cm.



The baby is pushed out.



Name _____ Date _____

Lesson 20.5

Diseases and Disorders of the Reproductive System

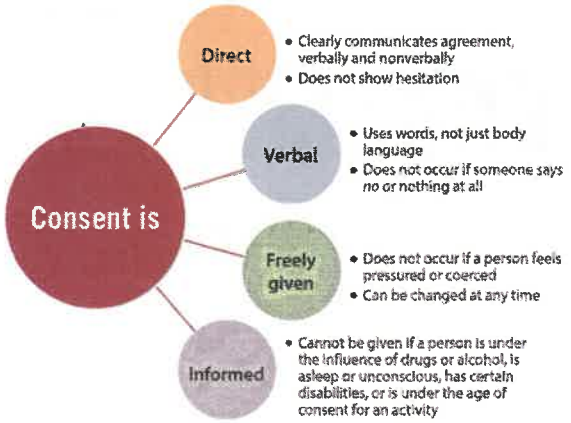
Both the male and female reproductive systems can be vulnerable to a variety of diseases and disorders. Using the information you learned in this chapter, fill in the missing information in the table below.

Disease/Disorder	Male or Female	Definition	Symptoms	Treatments
Endometriosis				
Prostatitis				
Ovarian cysts				
Epididymitis				
Orchitis				
Testicular cancer				
Premenstrual syndrome (PMS)				

CONSENT

WHAT IS CONSENT?

direct, verbal, freely given agreement that occurs when someone clearly says yes



IF THE PERSON IS…

Drunk

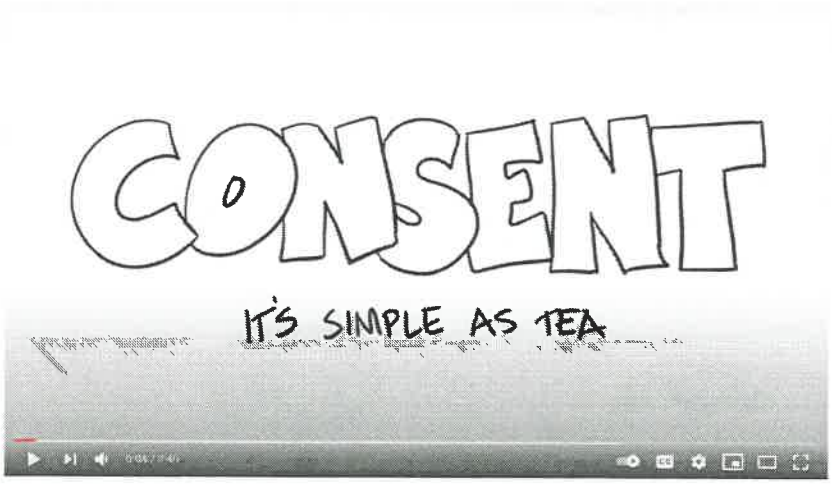
Asleep

Silent

High

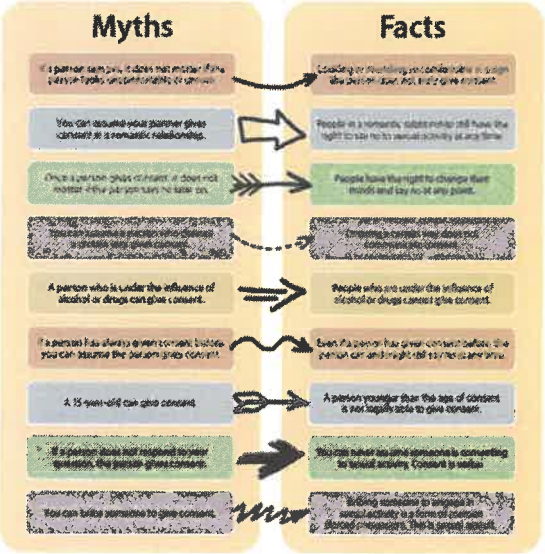
Refusing

… there is **NO CONSENT**



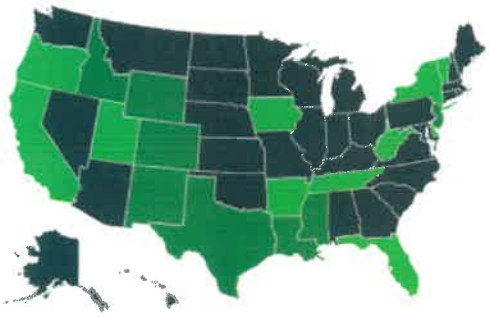
https://www.youtube.com/watch?v=fGoWLWS4-kU&t=2s

MYTHS VS FACTS



https://www.g-wonlinetextbooks.com/comprehensive-health-skills-high-school-cws-2023/~~Attachments/ch15_02/animation01.htm

STATE LAWS



Age of Consent across the United States

The Age of Consent ranges state-by-state from 16 to 18 years old across the United States. Click the map to view any state's age of consent laws.

Age Of Consent:

- 16 years old
- 17 years old
- 18 years old

BYSTANDER & BYSTANDER EFFECT

- people who are present at a situation but does not participate or intervene
- situation in which a bystander is less likely to intervene and stop violent, harmful, or unsafe behavior because the person thinks someone else will

Discuss and ask for examples

BYSTANDER

- What are 3 INTERVENTIONS used in the video? (What "saying no" strategies were used?)

https://www.youtube.com/watch?v=BCqkJSXCu-E

ASSIGNMENT

- Is it Consent? – turn in when done
- On the back on the consent worksheet
  - Research consequences related to the age of consent in WA

Name _____ Date _____

Lesson 19.4

The Importance of Consent

Consent is a direct, verbal agreement that occurs when someone clearly says yes. Consent does not occur if someone says no *or does* not *say anything at all. Under certain situations, some people are not legally capable of giving consent. Review the section on consent in your textbook. Then read the following scenarios to determine whether consent has been given in each. Explain each answer.*

1. Fifteen-year-old Jenny is excited to be at a party thrown by a group of college students. A college student named Brad approaches Jenny, and she is surprised that he wants to talk to her. Brad asks if she wants to have sex. Jenny agrees. Has consent been given? Why or why not?

_____

_____

_____

_____

_____

_____

2. Ben, who is 26 years old, is at a party. By the time guests begin to leave, Ben is so intoxicated that he can barely stand up. On the way upstairs, Ben tells his friend Cassie that he likes her dress. Cassie is surprised because she always liked Ben but assumed he didn't like her. She asks him if he'd like to have sex, and he mumbles an agreement. Has consent been given? Why or why not?

_____

_____

_____

_____

_____

_____

3. After a party, 22-year-old Brianna is left alone with her boyfriend, Jake. Jake asks if she wants to have sex. Brianna knows that she doesn't want to have sex, but when she tells Jake, Jake makes fun of her, calling her a "prude." Feeling pressured and embarrassed, Brianna gives in. Has consent been given? Why or why not?

_____

_____

_____

_____

_____

_____

your peers would. In almost every case, you thought your peers would feel less strongly than you did about the issues. That's interesting, because, of course, your peers also answered the survey, and you all are thinking the same things for the most part.

This is important, because sometimes we make decisions based on what we think our peers are doing. For instance, research shows that people sometimes feel pressured to have sex because they think that's what their peers are doing, when, in fact, the majority of teens aren't having sex. I am glad you all had a chance to see that your peers' feelings about sexual responsibility and sexual violence are not that different from yours.

4. Define sexual assault, coercion and consent

Begin with an open ended question about why people have the right to refuse sexual contact. Then, lead a class discussion to generate definitions of sexual assault, coercion and consent. Summarize students' comments to create the following final definitions/statements, and be sure to address the questions listed under each one.

Why people have the right to refuse sexual contact: People have the right to refuse sexual contact because no one, under any circumstances, is required to have sex if he or she doesn't want to.

Sexual assault: Coercing or forcing another person into sexual contact.

- What are some types of sexual assault?

Coercion: The use of manipulation to persuade people to do something they may not want to do, such as being sexual or performing certain sexual acts.

- What are tactics someone might use to coerce another person into doing something that person may not normally want to do?
- Why is it wrong to coerce someone into sexual activity?

Consent: Permission or agreement to engage in sexual activity.

- Why should people always make sure they have consent before engaging in sexual activity?

Could someone tell me why people always have the right to refuse sexual contact? Why do people not have to have sex if they don't want to?

Good. As we work through this lesson, always remember that people have the right to refuse sexual contact, because no one, under any circumstances, is required to have sex who doesn't want to.

What is the definition of sexual assault?
Coercing or forcing another person into sexual contact.

What are some types of sexual assault? (Make sure examples include both touching and non-touching offenses, and at the minimum include the items listed below.)

- Rape
- Incest
- Sexual harassment
- Child sexual abuse

What is coercion?
The use of manipulation to persuade people to do something they may not want to do – such as being sexual or performing certain sexual acts.

What are tactics someone might use to coerce another person into doing something that person may not normally want to do?
Examples include:

- Manipulation
- Abusing a position of power
- Older person taking advantage of a younger person
- Alcohol and other drugs

Unlike what many people believe, sexual assault, including rape, doesn't usually involve extreme physical force or injury. Often emotional manipulation, coercion, or alcohol and other drugs are used as tools to assault.

Why is it wrong to coerce someone into sexual activity?
If someone is coerced that is not consent.

What is consent?
Permission or agreement to engage in sexual activity.

Why should people always make sure they have consent before sexual activity?
Using force or coercion to make someone have sex, or having sex with someone without that person's consent, is sexual assault.

5. Review sexual assault laws

Review your state laws, especially noting how consent and coercion are handled, and whether forced oral, anal and vaginal sex can all be considered sexual assault. Also specifically note at what ages it is illegal for two people to have sex. In some states, there is simply an age of consent. In other states, specific age differences are spelled out. Hand out the *State Laws & Resources* handout.

Note: Adapt the script to fit your state laws.

Washington State law says: "'consent' means that at the time of the act of sexual intercourse or sexual contact, there are actual words or conduct indicating freely given agreement to have sexual intercourse or sexual contact."

What does this mean? If someone forces someone else to have sex, that is rape. If someone has sex with a person who says no or shows he/she doesn't want to have sex, that is also rape. The law says "actual words or conduct," so consent can be verbal or nonverbal.

Consent is important. Washington State law also specifies that certain people cannot give consent. Who do you think is not legally able to consent?

Anyone who is mentally incapacitated due to alcohol or other drugs cannot give consent. Anyone who is physically helpless, unconscious or asleep cannot give consent. So, if

someone has sex with a person in these situations, it is also rape.

A couple of final points about consent: just because someone consents to one type of sexual activity does not mean that person has consented to other types of sexual activity. Also, just because someone has agreed to a sexual act in the past, does not mean that person will always agree to it.

Sex is also legal or illegal depending on the age of the two people having sex. Even if there is consent, sex or sexual touching is illegal if either person is under a certain age. In other words, an older person may not have sex with someone who is much younger. Washington calls these laws "rape of a child." In some other states it is called "statutory rape," which basically means the same thing.

Here are the age differences in Washington State: (Read handout.)

6. Discuss power imbalance and age differences

(*Note:* Pay close attention to time—you will need 20 minutes to complete the Scenarios Activity. You may need to abbreviate the following discussion or skip to the small group activity if the students have had a lot of questions.)

After discussing the specific age difference in your state, lead a discussion with students about why it might be a bad idea, or why they think it is illegal, for a person to have sex with someone several years younger or older.

So, just as an example, it is illegal for a 20 year old to have sex with a 15 year old. Although most people would agree that a 30 year old should not have sex with a 15 year old, sometimes people believe that when the age difference is a little closer the law may be unfair. In that situation, they ask questions such as, "What if the two people are really in love, or have been going out a long time? What if the 15 year old's parents know and approve of the relationship?" But, even in these situations, it is still illegal for several reasons. What do you think those reasons are? Why might it be a bad idea for a much older person to be in a sexual relationship with a much younger person?

Make sure discussion raises the following points, even if you have to add them yourself:

- An older person probably knows more, and can use that knowledge to influence or take advantage of a younger person.
- The younger person may assume that the older person knows more, whether or not that is true. The younger person is likely to believe what the older person says, which gives the older person a lot of opportunity to manipulate or lie to the younger person.
- The older person has access to things the younger person doesn't, such as a car, an apartment, a job, alcohol, etc. This can make the older person seem very attractive as a dating partner, and may cause the younger person to overlook serious concerns about the older person.
- Because the older person has more independence (perhaps an apartment or car, or no curfew if still living at home), it makes it easier to involve the younger person in a risky situation, such as being alone together in an apartment, being around alcohol or drugs, being out late, etc.

For all of these reasons and more, teens who have dating partners who are much older than

Coercion and Consent Scenarios

1. Desiree and Naomi are best friends and are at a party together. Desiree notices that Naomi is drinking a lot and starting to slur her words. Jackson, a cute guy at the party, approaches Naomi, who is totally drunk. Jackson asks Naomi if she wants to hook up. Naomi nods her head and is led upstairs by Jackson. Desiree can see that Naomi is stumbling up the stairs.

   - What do you think about this situation?
   - Is consent possible in this situation? Why or why not?
   - Would it be different if both Jackson and Naomi were intoxicated?
   - What could Desiree do to help her friend? What could one of Jackson's friends do?

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2. Jamal and Leila have been dating for 6 months. Jamal feels he is ready to have sex. Jamal invites Leila over to his house one weekend night when his parents are out of town. Alone in the house, Jamal talks with Leila about wanting to have sex and Leila tells him she's not ready. A little later while making out in Jamal's room, he asks her again about having sex. Leila shakes her head no and looks away. Jamal is disappointed but goes no further.

   - Was there consent in this scenario? What did the person say or do to let you know?
   - What do you think about Leila and Jamal's relationship?

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3. Rob and Elena are in the library, working on a school report. At the computer station, Rob begins to give Elena a backrub. "This research is boring," he says. Elena shrugs her shoulders under his hands. Rob puts his arms around her from behind and pulls her close to him. Elena leans forward and hisses, "Cut it out, you're going to get us in trouble." Rob pulls her into the corner. As Elena puts her hands on his chest and tries to push him away, he pulls her to him and kisses her.

   - Was there consent in this scenario? What did the person say or do to let you know?
   - If you have time, read and discuss Scenario 4.

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4. Rob and Elena are in the library, working on a school report. At the computer station, Rob begins to give Elena a backrub. "This research is boring," he says. Elena turns around and grins at him. "Yeah, it is, compared to what we could be doing," she says. Rob puts his arms around her and pulls her close to him. Elena puts her arms around his neck and laughs, "Cut it out, you're going to get us in trouble." Rob pulls her into the corner. Giggling, they kiss.

   - Was there consent in this scenario? What did the person say or do to let you know?
   - If you have time, read and discuss Scenario 3.

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5. Tyra walked Monica home after they saw a movie together Friday night. When they got to Monica's house, they stood talking for a while. When Tyra gave Monica a hug goodnight, Monica responded with a quick kiss on the lips. Tyra smiled and said, "Can we do that again?" Monica laughed, and they kissed for a long time. They went inside and kept kissing. Tyra wanted to go further but couldn't really tell what Monica wanted by her body language.

   - Was there consent for the kiss? What did the person say or do to let you know?
   - Was there consent to do anything further sexually?
   - What should Tyra do in this situation?

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6. Ciera is 23 years old. She is a teacher and the girls' basketball coach at Lake High School. She has been coaching the boys' basketball team lately because the boys' coach has been out sick. Some of the girls notice that Ciera is kind of flirtatious with some of the guys on the boys' team. She has also been offering a few of the boys private coaching sessions, but tells them to keep it a secret, so the girls don't get jealous. A member of the boys' team tells his friend Taylor that he and Ciera hooked up last weekend.

   - What do you think about this situation?
   - Is consent possible in this situation? Why or why not?
   - What would you do if you were Taylor?

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they are are more likely to get an STD ,[11] to become pregnant, or get someone pregnant while still a teen.[12]

7. Facilitate scenarios activity

(*Note:* Allow 20 minutes for this activity. If you are short on time, you can choose only a few scenarios.)

Divide the class into 6 groups. Hand out a *Coercion and Consent Scenarios* worksheet to each group and assign each group 1 of the scenarios to discuss. Allow small groups to discuss for 5-6 minutes. When finished, take turns asking the small groups to read their scenario and report to the class. Debrief points for each scenario can be found in the script.

Scenario 1:

- *Naomi is highly intoxicated and therefore cannot consent. Even if her words ("uh-huh") indicate yes, the fact that she is drunk means that she cannot consent.*
- *If they were both intoxicated, neither person can legally consent to sex. Technically, it is possible that either could be charged with rape. However, the one who initiates the sexual contact or who gives the other person alcohol may be more likely to be held responsible for rape. Also, people who are intoxicated are less likely to protect themselves against STDs, including HIV, and pregnancy.*
- *Ideally, a friend would step in and help intervene. Some ways to do this include: distracting them, staying by Naomi's side, pretending they need to come help someone who is sick, telling Jackson that it's not a good idea to hook up because Naomi is drunk.*

Scenario 2:

- *Jamal really wants to have sex (he asks twice), but he is respectful when Leila communicates her boundaries (with words and later with body language).*
- Note: Students may indicate that this appears to be a healthy relationship because Jamal and Leila have honest and clear communication.

Scenario 3:

- *There are several cues that indicate that Elena is not consenting, including: she shrugs her shoulders when he first touches her, she "hisses" and tells him to cut it out, she tries to push him away.*

Scenario 4:

- *This scenario is similar to Scenario 3, but important details are different. In this scenario, both people are consenting. We know this due to several factors: he touches her shoulders, she grins when he first touches her, she indicates that they could be doing something else, he pulls her close, she laughs, they both giggle, they kiss.*
- *She does say "cut it out," which means no. So, it is not entirely clear what she wants because in this moment, her body language says yes, and her words say no. It would be clearer if they were to ask each other directly, "Can I kiss you?"*
- *He assumes consent in this case because her "yes" cues far outweigh her "no" cues*

Scenario 5:

- *There is consent for the kiss.*
- *There are several cues: Tyra gave a hug, Monica gave a quick kiss, Tyra asked if they could kiss again, Monica laughed and they kissed again.*

- *There is no consent to do anything further at this point, therefore Tyra should ask. She could say, "Do you want to go further?" or "What do you want to do next?" or "Can I take your shirt off?"*

Scenario 6

- *Consent is not possible in this scenario because of the age difference and because of Ciera's position of power (she is in a supervisory position as a coach).*
- *Even if the boy wanted to have sex and consented, Washington State law says that technically he cannot consent if she is in a position of power and he is more than 5 years younger. (Note: State laws may vary. Tailor the discussion to reflect the laws in your state.)*
- *Even if the law isn't broken, Ciera is still breaking ethical rules for coaches and is risking her job.*
- *Ideally, Taylor or other students who heard these rumors would report to a trusted adult or to police. It may be very difficult to report because there may be a lot of peer pressure to stay quiet about it*

8. Summarize

Summarize the lesson and answer any questions students still have about sexual violence.

Today we discussed sexual assault, coercion and consent. It was helpful to work through some scenarios to show that we all do know what consent looks like even in different situations. This information is useful to keep us safe and also keep us from hurting other people.

9. Assign homework

Allow students to choose between the individual or family homework and explain the assignments as needed.

Individual Homework: Being a Resource and Finding Resources

Family Homework: Talking about Sexual Violence Prevention, available in English, Spanish, Russian, Chinese, Vietnamese and Arabic.

10. Exit ticket

Hand out the *Lesson 7 Exit Ticket.*

Prompt: List 1 or 2 things someone can do to ensure there is consent for a kiss.

Possible answers:

- Ask if it is OK to kiss and wait for the other person to say yes.
- Initiate a short kiss, and wait to see if the other person initiates a second kiss.
- Read the other person's nonverbal cues. For example, a person can show consent physically by leaning in, embracing the other person or returning the kiss. Physical signs of non-consent include turning away, pushing the other person away, stiffening up and keeping arms crossed in front of the body.

Name _____ Date _____

Lesson 19.4

Taking Precautions

Teenagers are especially vulnerable to unwanted sexual activity, sexual abuse, and date rape. It is important to remember that being a victim of sexual assault is never *your fault. You should, however, do everything in your power to ensure your personal safety. Read each of the scenarios presented below and identify what each person should do to ensure his or her safety and avoid becoming a victim of sexual assault. Refer to the Skills for Health and Wellness feature on page 579 of your textbook if you need help.*

1. Bianca is at a party that a few of her friends are throwing for graduation. She is talking to a boy named Steve, who is very charming and interesting. So far, it seems that Steve and Bianca share a lot of interests and hobbies. Bianca is enjoying herself until Steve suddenly says that he has to show her something in the kitchen. Bianca thinks this is strange, and it seems even stranger when Steve insists that she put down her drink so he can take her hand and lead her into the kitchen. What should Bianca do?

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2. Damien and Rosalie are studying for an exam in their health class. They are at Rosalie's house, and her parents are out for the evening. Before Damien and Rosalie have finished their practice test, Rosalie suggests that they take some pictures. She removes her smartphone from her backpack, turns on the camera, and tells Damien to remove his clothes. "No," he replies, "I don't want any pictures of myself like that floating in cyberspace." Rosalie is insistent. Damien is worried she won't take no for an answer. What should Damien do?

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3. Ellie is hanging out with some friends and with the boy she has a crush on, Jacob. Everyone is getting along well and having a good time. Ellie and Jacob spend a long time chatting with each other. As it gets late, several people begin to arrange carpools to get back home. Jacob offers to drive Ellie home. Ellie appreciates the offer, but she doesn't know Jacob very well. Although she has had a crush on him for a while, tonight is the first time she's gotten to talk to him properly. What should Ellie do?

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