

HUMAN RELATIONS MEDIA

41 Kensico Drive Mount Kisco NY 10549 1-800-431-2050

The Biggest Myths about STIs

DVD Version



HUMAN RELATIONS MEDIA

ISBN-13: 978-1-55548-912-0

THE BIGGEST MYTHS ABOUT STIs

Credits

Executive Producer

Anson W. Schloat

Producer

Peter Cochran

Teacher's Resource Book

Karin Rhines



Copyright 2013
Human Relations Media, Inc.

THE BIGGEST MYTHS ABOUT STIs

Table of Contents

Teacher Resources

DVD Menu	i
Introduction	1
Learning Objectives	2
Biographies of Featured Experts	3
Program Summary	4
NHES Performance Indicators (grades 6-8)	5
NHES Performance Indicators (grades 9-12)	7

Student Activities

1. Pre/Post Test	9
2. Dear Lucy	12
3. Myth Busting	13
4. What about STIs?	14
5. Help!	15

Student Fact Sheets

1. Condom Sense	16
2. What Is a Myth?	18
3. Teens and STIs	20
4. Diagnosis and Treatment	22
5. Resources	23

Other Programs from HRM	24
--------------------------------	----

THE BIGGEST MYTHS ABOUT STIs

DVD Menu

Main Menu

- **Play**

- **Chapter Selection**

From here, you can access many different paths of the DVD, beginning with the introduction and ending with the credits.

- 1.** Introduction
- 2.** “Trashy” People
- 3.** A Person’s Appearance
- 4.** Oral Sex
- 5.** Sex with a Virgin
- 6.** Lesbian Sex
- 7.** Getting an STI Again
- 8.** Checking Your Partner
- 9.** The Pill
- 10.** Sex in a Hot Tub
- 11.** Multiple Condoms
- 12.** Conclusion

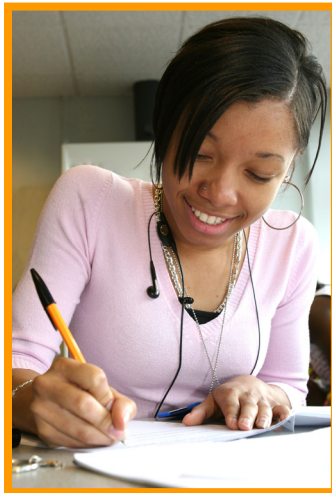
- **Teacher’s Resource Book**

A printable file of the accompanying Teacher’s Resource Book is available on the DVD. Load the DVD onto a computer that has a DVD disk drive and Adobe Acrobat Reader.

For PC users: From the “Start” menu, click on “Computer,” then right click on your DVD disk drive and select “Explore.” Double click on the PDF document to open the Teacher’s Resource Book.

For Mac users: In “Finder,” click on the DVD under “Devices.” Then click on the PDF document to open the Teacher’s Resource Book.

TEACHER RESOURCES



Myths have been with us since the dawn of human history. These early myths were stories created to explain the unexplainable: lightning and thunder, volcanic eruptions, drought and devastating floods. As scientific discovery provided alternate explanations, these myths about natural phenomena usually fell out of fashion. Social phenomena were also addressed by myth in such things as creation stories, especially stories explaining the differences between men and women. It should come as no surprise even thousands of years later that humans retain the capacity to create and believe in myths. And it should come as even less surprise that sex is a favorite topic of myth. Today we often use the term “myth” as a synonym for falsehood or lie. It is true that today’s sexual myths are scientifically inaccurate, but the more important concern is why people believe them.

By the time they reach their teen years, most people have enough science knowledge to recognize that lightning is not a thunderbolt hurled by an angry god or that persistent drought is not punishment by a celestial being disappointed in the behavior of humans. They can enjoy the stories for what they are: imaginative explanations of common phenomena. They may even be able to provide a detailed explanation of why these myths are not scientifically accurate.

Yet today many people, including teenagers, create and perpetuate myths about sex. Like our earliest ancestors, they are trying to find explanations; in this case for what they are feeling as they develop into sexual beings. Teens that have had good sex education courses are able to dispel sexual myths; those who lack the information to evaluate sexual myths are at risk of being harmed by them. Sexual myths have always had the characteristic of spreading like wildfire. A generation ago, this meant that a myth could spread through a thousand teens over a few weeks or months. Today, the Internet makes the dissemination of new myths to millions of teens almost instantaneous. STI myths are dangerous. If left unchallenged and unclarified, they can kill.

STI myths clearly demonstrate the importance of arming students with accurate information about sexual matters. About half of all STIs are in young people 15-24 years old—more than nine million new cases each year. Some—chlamydia, syphilis, gonorrhea—can be treated successfully if detected early. Others, notably HPV, are usually successfully eliminated from the body by the immune system. In those people unable to clear HPV from their bodies, cervical and other reproductive system cancers may result. With many infectious diseases, having them once provides immunity against having them again. This is not the case with these STIs; a person can be repeatedly infected. Other STIs are for life. Herpes isn’t life threatening, but its periodic flares can be painful and it is possible to pass it on to sex partners. HIV still infects thousands of people, including many teens, in the United States each year. Although HIV can now be treated as a chronic infection because of improved medications, most HIV-infected individuals have on-going health challenges and a shortened lifespan.

After watching the video *The Biggest Myths about STIs* and participating in the class activities included in this Teacher's Resource Book, your students will be able to:

- explain how myths about STIs come about
- identify at least three common myths about STIs
- provide facts to dispel these STI myths
- identify other myths they may have about STIs and correct them
- explain the reasons why condoms prevent transmission of some, but not all, STIs
- identify HPV, herpes and syphilis as the STIs that can be transmitted skin-to-skin

David L. Bell, MD

*Assistant Clinical Professor of Population and Family Health
Assistant Clinical Professor of Pediatrics, College of Physicians and Surgeons
Columbia University
Mailman School of Public Health
MPH, University of California at Berkeley
MD, University of Texas*

Dr. Bell is an adolescent medicine physician and works primarily with ages 12-24. He is currently on the board of directors of the Guttmacher Institute. He has consulted for numerous government and private initiatives and has appeared on MTV, BET, and CBS promoting male health issues.

Jane Bogart, MA

*Certified Health Education Specialist
BS, Cornell University
MA, Teachers College, Columbia University*

Currently finishing her doctorate in health education at Teachers College, Jane Bogart is the Director for Student Wellness at Columbia University. She oversees the education and outreach related to sexuality and relationships, alcohol and other drugs, emotional health and stress management, and nutrition and fitness.

Francisco Ramirez, MPH

*MPH, Columbia University, Mailman School of Public Health
2007 Rosenfield Scholar in Sexual and Reproductive Health*

For 15 years, Francisco Ramirez has dedicated his career to responding to sexual health and public health needs of diverse communities worldwide. He also serves as a prominent voice in the media on sexual health. He is MTV's contributor to the award-winning *MTV Staying Alive* campaign and a Global Correspondent for *MTV Voices*.

Elizabeth Schroeder, EdD, MSW

Executive Director, Answer Sex Ed Honestly, Rutgers University

Elizabeth Schroeder is an internationally recognized expert in the field of sexuality education and youth development who has trained thousands of youth-serving professionals, adolescents and parents around the world. She is the recipient of numerous awards. She is the co-founding editor of the *American Journal of Sexuality Education* and has written extensively about sexuality and relationship issues.

The program is organized around interviews with teens. They are asked questions about STIs including who gets them and how they are transmitted. Francisco Rameriz, who will be familiar to students who watch MTV, is the interviewer and narrator. Mr. Rameriz is a public health consultant who works with global organizations and does segments on MTV about teens and sex.

The interviews provide an opportunity for the interviewed teens to discuss each myth with one another and with Mr. Rameriz. The teens' responses highlight the delicate, often confusing, mix of fact and fiction that most teens have about sex and STIs. Mr. Rameriz skillfully steers the teens to the accurate analysis of each myth. The STI myths explored in this video are:

Only "trashy" people get an STI.

You can tell by looking at somebody whether he or she has an STI.

You can't get an STI from oral sex.

You can't get an STI from having sex with a virgin.

A girl can't get an STI from having sex with another girl.

Once you've had an STI, there's no change of getting it again.

If you get checked and you're STI-free, your partner doesn't need to get checked as well.

The pill protects you against STIs.

You can't get an STI if you have sex in a pool or hot tub.

Two condoms are better than one.

Interspersed in the interviews are segments by STI experts to provide deeper medical and scientific explanations of why the myths are in error, including ideas rarely addressed in educational materials. In one segment, Elizabeth Schroeder explains why you can't tell if a person has an STI by looking. She explains that the photos students are often shown of STI sores and rashes show extreme symptoms that are the late stages of the disease. Since they don't see anything resembling the photos on a partner's body, they assume that the partner does not have an STI. In another segment, the health care providers talk about what teens mean when they say someone is a virgin. They discuss different sexual behaviors that can lead to STI transmission by someone who has not had vaginal intercourse and is still considered a virgin, but has participated in other sexual activity that could infect him or her.

After exploring these myths, the teens discuss where myths come from and how teens use the myths so they don't have to worry about STIs or to justify decision they have made. The medical providers then discuss the importance of getting medical attention if a teen thinks he or she might have been exposed to an STI. They talk about the options in providers the teens have: family doctor, family planning clinics, health departments. In the final segment of the video, Mr. Ramirez raises another myth: "Everybody is having sex." The program closes with a lively discussion of this myth by the teens.

The video and print materials in *The Biggest Myths about STIs* are compatible with the Performance Indicators of the **National Health Education Standards** (grades 6 - 8) as indicated below.

National Health Education Standard 1: *Students will comprehend concepts related to health promotion and disease prevention to enhance health.*

Performance indicators for grades 6 - 8

- 1.8.1 Analyze the relationship between healthy behaviors and personal health.
- 1.8.3 Analyze how the environment affects personal health.
- 1.8.5 Describe ways to reduce or prevent injuries and other adolescent health problems.
- 1.8.6 Explain how appropriate health care can promote personal health.
- 1.8.7 Describe the benefits of and barriers to practicing healthy behaviors.
- 1.8.8 Examine the likelihood of injury or illness if engaging in unhealthy behaviors.
- 1.8.9 Examine the potential seriousness of injury or illness if engaging in unhealthy behaviors.

National Health Education Standard 2: *Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.*

Performance indicators for grades 6 - 8

- 2.8.2 Describe the influence of culture on health beliefs, practices, and behaviors.
- 2.8.3 Describe how peers influence healthy and unhealthy behaviors.
- 2.8.4 Analyze how the school and community can affect personal health practices and behaviors
- 2.8.7 Explain how the perceptions of norms influence healthy and unhealthy behaviors.
- 2.8.8 Explain the influence of personal values and beliefs on individual health practices and behaviors.

National Health Education Standard 3: *Students will demonstrate the ability to access valid information, products, and services to enhance health.*

Performance indicators for grades 6 - 8

- 3.8.1 Analyze the validity of health information, products, and services.
- 3.8.2 Access valid health information from home, school, and community.
- 3.8.3 Determine the accessibility of products that enhance health.
- 3.8.4 Describe situations that may require professional health services.
- 3.8.5 Locate valid and reliable health products and services.

National Health Education Standard 4: *Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.*

Performance indicators for grades 6 - 8

- 4.8.1 Apply effective verbal and nonverbal communication skills to enhance health.
- 4.8.4 Demonstrate how to ask for assistance to enhance the health of self and others.

National Health Education Standard 5: *Students will demonstrate the ability to use decision-making skills to enhance health.*

Performance indicators for grades 6 - 8

- 5.8.2 Determine when health-related situations require the application of a thoughtful decision-making process.
- 5.8.5 Predict the potential short-term impact of each alternative on self and others.
- 5.8.6 Choose healthy alternatives over unhealthy alternatives when making a decision.
- 5.8.7 Analyze the outcomes of a health-related decision.

National Health Education Standard 6: *Students will demonstrate the ability to use goal-setting skills to enhance health.*

Performance indicators for grades 6 - 8

- 6.8.1 Assess personal health practices.
- 6.8.2 Develop a goal to adopt, maintain, or improve a personal health practice.
- 6.8.3 Apply strategies and skills needed to attain a personal health goal.
- 6.8.4 Describe how personal health goals can vary with changing abilities, priorities, and responsibilities.

National Health Education Standard 7: *Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.*

Performance indicators for grades 6 - 8

- 7.8.1 Explain the importance of assuming responsibility for personal health behaviors.
- 7.8.2 Demonstrate healthy practices and behaviors that will maintain or improve the health of self and others.
- 7.8.3 Demonstrate behaviors to avoid or reduce health risks to self and others.

National Health Education Standard 8: *Students will demonstrate the ability to advocate for personal, family, and community health.*

Performance indicators for grades 6 - 8

- 8.8.1 State a health-enhancing position on a topic and support it with accurate information.
- 8.8.2 Demonstrate how to influence and support others to make positive health choices.

The video and print materials in *The Biggest Myths about STIs* are compatible with the Performance Indicators of the **National Health Education Standards** (grades 9 - 12) as indicated below.

National Health Education Standard 1: *Students will comprehend concepts related to health promotion and disease prevention to enhance health.*

Performance indicators for grades 9 - 12

- 1.12.1 Predict how healthy behaviors can affect health status.
- 1.12.2 Describe the interrelationships of emotional, intellectual, physical, and social health.
- 1.12.3 Analyze how environment and personal health are interrelated.
- 1.12.4 Analyze how genetics and family history can impact personal health.
- 1.12.5 Propose ways to reduce or prevent injuries and health problems.
- 1.12.6 Analyze the relationship between access to health care and health status.
- 1.12.7 Compare and contrast the benefits of and barriers to practicing a variety of healthy behaviors.
- 1.12.8 Analyze personal susceptibility to injury, illness, or death if engaging in unhealthy behaviors.
- 1.12.9 Analyze the potential severity of injury or illness if engaging in unhealthy behaviors.

National Health Education Standard 2: *Students will analyze the influence of family, peers, culture, media, technology, and other factors on health behaviors.*

Performance indicators for grades 9 - 12

- 2.12.2 Analyze how the culture supports and challenges health beliefs, practices, and behaviors.
- 2.12.3 Analyze how peers influence healthy and unhealthy behaviors.
- 2.12.4 Evaluate how the school and community can affect personal health practice and behaviors.
- 2.12.7 Analyze how the perceptions of norms influence healthy and unhealthy behaviors.
- 2.12.8 Analyze the influence of personal values and beliefs on individual health practices and behaviors.

National Health Education Standard 3: *Students will demonstrate the ability to access valid information, products, and services to enhance health.*

Performance indicators for grades 9 - 12

- 3.12.1 Evaluate the validity of health information, products, and services.
- 3.12.2 Use resources from home, school, and community that provide valid health information.
- 3.12.3 Determine the accessibility of products and services that enhance health.
- 3.12.4 Determine when professional health services may be required.
- 3.12.5 Access valid and reliable health products and services.

National Health Education Standard 4: *Students will demonstrate the ability to use interpersonal communication skills to enhance health and avoid or reduce health risks.*

Performance indicators for grades 9 - 12

- 4.12.1 Use skills for communicating effectively with family, peers, and others to enhance health.
- 4.12.4 Demonstrate how to ask for and offer assistance to enhance the health of self and others.

National Health Education Standard 5: *Students will demonstrate the ability to use decision-making skills to enhance health.*

Performance indicators for grades 9 - 12

- 5.12.2 Determine the value of applying a thoughtful decision-making process in health-related situations.
- 5.12.5 Predict the potential short-term and long-term impact of each alternative on self and others.
- 5.12.6 Defend the healthy choice when making decisions.
- 5.12.7 Evaluate the effectiveness of health-related decisions.

National Health Education Standard 6: *Students will demonstrate the ability to use goal-setting skills to enhance health.*

Performance indicators for grades 9 - 12

- 6.12.1 Assess personal health practices and overall health status.
- 6.12.2 Develop a plan to attain a personal health goal that addresses strengths, needs, and risks.
- 6.12.3 Implement strategies and monitor progress in achieving a personal health goal.
- 6.12.4 Formulate an effective long-term personal health plan.

National Health Education Standard 7: *Students will demonstrate the ability to practice health-enhancing behaviors and avoid or reduce health risks.*

Performance indicators for grades 9 - 12

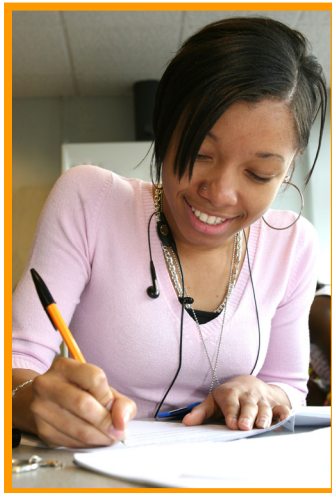
- 7.12.1 Analyze the role of individual responsibility for enhancing health.
- 7.12.2 Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others.
- 7.12.3 Demonstrate a variety of behaviors to avoid or reduce health risks to self and others.

National Health Education Standard 8: *Students will demonstrate the ability to advocate for personal, family, and community health.*

Performance indicators for grades 9 - 12

- 8.12.1 Utilize accurate peer and societal norms to formulate a health-enhancing message.
- 8.12.2 Demonstrate how to influence and support others to make positive health choices.

STUDENT ACTIVITIES



Name: _____

ACTIVITY 1A

PRE/POST TEST

1. STI stands for _____.
 - a. Some Terrible Illness
 - b. Seasonal Tick-bite Itching
 - c. Sexually Transmitted Infection
 - d. Socially Tarnished Image

2. A person with an STI looks _____.
 - a. trashy
 - b. dirty
 - c. sick
 - d. like me

3. Symptoms of an STI _____.
 - a. occur within hours of infection
 - b. usually start with a rash
 - c. usually cause painful urination
 - d. are often absent

4. STIs can be transmitted through _____.
 - a. vaginal sex only.
 - b. vaginal and anal sex only.
 - c. vaginal and oral sex only.
 - d. vaginal, anal and oral sex.

5. How often can a person have an STI?
 - a. Just once, then you have immunity to all STIs.
 - b. As often as they come in contact with an STI.
 - c. Once for each type of STI.
 - d. Never if they practice safer sex.

This activity is continued on the next page.

Name: _____

ACTIVITY 1B

PRE/POST TEST

- 6.** You can't get an STI if you _____ .
- a. have sex with a virgin
 - b. know your partner
 - c. are abstinent
 - d. always use condoms
- 7.** Why is it important for teens to know about STI myths?
- a. To get accurate information from myths to protect themselves against STIs.
 - b. To protect themselves from false information in myths.
 - c. To keep up-to-date on STI facts.
 - d. To feel comfortable about sex.
- 8.** STIs can be spread _____ .
- a. male to female
 - b. male to male
 - c. female to female
 - d. All of the above
- 9.** For sexually active individuals, the risk of STIs can be reduced by using _____ .
- a. birth control pills
 - b. an IUD
 - c. condoms
 - d. spermicide
- 10.** Individuals who think they may have been exposed to an STI should _____ .
- a. see a doctor
 - b. take long, hot baths
 - c. keep it a secret from their partner
 - d. find medicine at a drug store

The Answer Key for this activity appears on the next page.

Name: _____

Pre/Post Test Answer Key

- 1. c**
- 2. d**
- 3. d**
- 4. d**
- 5. b**
- 6. c**
- 7. b**
- 8. d**
- 9. c**
- 10. a**

Name: _____

ACTIVITY 2

DEAR LUCY

What worries teens about STIs? The letters below raise common concerns. Use your knowledge of STI facts and STI myths to give advice to each writer. Write your answers on the back of this page or on a separate sheet of paper.



Hey Lucy,

I love your column and read it every week, but I never thought I'd be writing you. My boyfriend has been pressuring me to have sex with him for months. I finally gave in, but only oral. Now I have a sore throat and my glands are swollen. He didn't use a condom. Did he give me something? I thought oral was safe.

Sincerely, Regretful

Dear Lucy,

My boyfriend's family has a big swimming pool. He wants to have sex in it without a condom. I'm taking the pill so I can't get pregnant, but what about diseases and stuff? He says the chlorine will kill everything, but I'm not so sure.

Signed, Feeling Under Water

Hi Lucy,

My best friend has been seeing a really great girl for a couple of months and he's ready to have sex with her. He hates condoms and says she's taking precautions about pregnancy. I've told him that it isn't just pregnancy, it's STIs too, but he won't listen. He tells me that she's pretty and comes from a good family so she couldn't have anything like that. And he thinks the pill will prevent diseases. What can I say to him to change his mind?

From a Concerned Friend

Dear Lucy,

Here's one I bet you've never heard. Most of my friends have trouble getting their guys to use condoms. But my boyfriend is Mr. Super Cautious. He's so afraid of STIs that he uses not one condom, but two. I really appreciate that he's so careful, but I heard somewhere that you shouldn't use two at once. Now I can't remember the reason. Should I worry that we're being too careful?

Respectfully, Safety First

Name: _____

ACTIVITY 3

MYTH BUSTING

In the video, you were introduced to myths about STIs—things that might sound reasonable, but just aren't true. You probably have heard some of those myths already, but others may have been new to you. What other myths about STIs have you heard?

Part 1: In small groups (or as a whole class) put together a list of STI myths that were not discussed in the video. Your list can include things you absolutely know are myths as well as statements that may or may not be myths. List them on the back of this page.

Part 2: Work in groups of three to four students. Research one of the myths (or possible myths) that you listed in Part 1 above. Each person in the group should consult a different reference book or website to collect information. Are some parts true while others are false? Why is the myth you've chosen false? Use the table below to put together your information.

Our group is investigating this myth:		
	Reference source used	Information
Student 1:		
Student 2:		
Student 3:		
Student 4:		
We have concluded this is / is not a myth because:		

Part 3: Use the information you've collected to communicate your findings to others. You may want to make a poster or draw a cartoon. Be sure to identify the myth in your presentation and give at least two factual proofs that it is untrue.

Name: _____

ACTIVITY 4

WHAT ABOUT STIs?

The video you watched examined many myths about STIs, but it did not give you specific details about the different STIs. In this activity, you will work in small groups to find out those details. The table below lists the most well known STIs seen in the United States. Each group should research a different STI. When everyone is finished, display the results.

chlamydia genital herpes gonorrhea hepatitis B HIV HPV syphilis

Complete the chart below to learn about your STI.

Name of STI	
What causes it?	
How many people in the US have this each year?	
How many teens in the US have this each year?	
How is it passed from person to person?	
What are the symptoms?	
How long from infection to symptoms?	
Are symptoms always present?	
How is it prevented?	
How is it treated?	



Each year, millions of people are infected with an STI. Many of them later pass it on to someone else. Some of these people are careless and irresponsible, but most are not. Since many people can have an STI but not have symptoms, it's possible to pass the infection to a partner without knowing it.

So what can sexually active people do if they want to be responsible about STIs? First, they should see a doctor at least once a year for a checkup and STI testing. They should be honest with the doctor about what they are doing to prevent STIs and about the number of partners they have. Second, they should stay informed about STIs, especially STI myths. For teens, the first part can be difficult. They may feel awkward talking about sex, or they may be afraid that their parents will find out. So where can they go and protect their privacy? In the United States, teens are allowed to get reproductive health care without their parents being notified. There are many types of clinics that provide reproductive health care. Some of them are specially designed to meet the needs of teens.

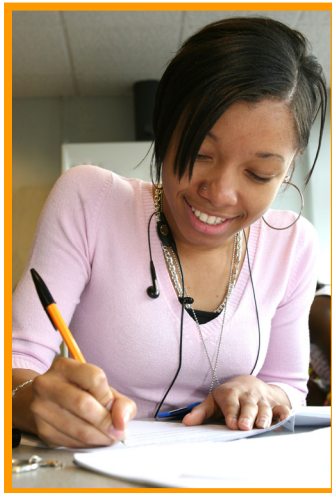
Part 1: Investigate the reproductive health services in your community that work with teens. You can work individually or in small groups. Be sure to ask the questions below. You may add other questions that are important to you as well. When you finish your research, compile the results so that everyone in class has useful information.

- Do you provide STI services to teens?
- Do you inform the parents of a teen patient?
- What STI services do you offer?
- How much do you charge?
- What are your hours?

Part 2: Where will you go to get information you can trust? The Internet is an important source of information for most teens, so start there. There are many good trustworthy sites that provide information about lots of different health issues of concern to teens. Work in small groups to identify a list of these sites. Give each site a grade or stars or some way to rate how useful it is to teens. Share your results with your class. Here are some things to consider in your rating system:

- Is the information accurate?
- Is it easy to find things on the site?
- Does it explain things clearly?
- Does it look interesting and inviting?
- Does it help users find local resources?

STUDENT FACT SHEETS



Name: _____

Total abstinence from any kind of genital contact is the only way to be sure to prevent STIs. But for most people at some point in their lives, they have sex. So what are they to do to behave responsibly?

As you learned in the video, herpes, syphilis and HPV can be spread by skin-to-skin contact, so even using a condom doesn't give total protection. While that is true, condoms still play a very important role in reducing the spread of STIs. Latex condoms can prevent the spread of chlamydia, gonorrhea and HIV. They can reduce the spread of other STIs, but not completely prevent them. Condoms sometimes break or slip off so they are not foolproof, but they are still much better than no protection at all.

Here are five rules for condom use:



- 1. Use a condom**
- 2. Use it correctly**
- 3. With every partner**
- 4. Every time**
- 5. No exceptions**

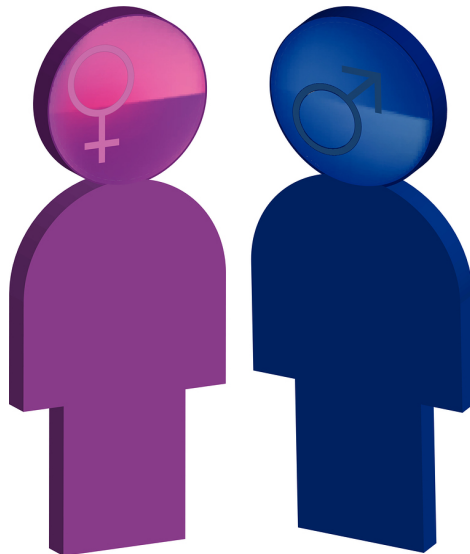
What does it mean to use a condom “correctly?” Successful condom users develop good habits about condom use.

- They select latex condoms because these condoms don't have tiny pores in them that natural skin condoms have.
- They check the condom package before they open it. They check the expiration date. Is the condom still good? They press on the package to see if it will “press” back. If yes, there are no holes in the package and the condom is good. If it is past its expiration date or if the packages goes flat when pressed, they discard the condom and get another one.
- They open the package carefully so they don't damage the condom.

This fact sheet is continued on the next page.

Name: _____

- They leave space at the tip of the condom for when they ejaculate so the condom doesn't break.
- They roll the condom all the way down to the base of the penis so it is less likely to come off.
- If they use a lubricant, they use one that is water-based. Oil-based lubricants such as lotion weaken the latex of the condom.
- After sex, they carefully remove the condom while they still have an erection (so it doesn't slip off and spill semen on their partner) and put it in a waste basket; never the toilet.



This seems like a lot to remember, but using a condom properly is a lot like other healthful behaviors. The first time people brush their teeth or shave or do other routine personal hygiene activities they aren't very good at them. With practice they get much better. For people who choose to be sexually active, proper condom use can help keep them and their partners safe from STIs. Doing it right is worth the effort.

Name: _____

If you do an Internet search of the question “What is a myth?” you’ll get many hits. One of the simplest definitions is that a myth is a story with a purpose. Others say that a myth is a story that explains a natural or social phenomenon for which there is no apparent explanation. For example, most cultures have myths about their origins and why they dress and behave as they do.



There are many myths about natural phenomena such as lightning and thunder, volcanic eruptions, tornadoes, hurricanes and torrential downpours. These phenomena frightened people and sometimes even killed them. Stories that explained these things as the behavior of angry gods warring with one another or punishing humans helped early humans make sense of their environment.

As humans gathered more and better information about their surroundings and developed better tools to help, science was born. Over time, scientific explanations of natural phenomena replaced the myths of early humans.

Today when we call something a myth, we usually mean that it is untrue. There are myths about diet and nutrition, myths about fitness, myths about how to be popular and, of course, myths about sex. As you saw in the video, there are many myths about STIs. There are also myths about pregnancy:

- You can’t get pregnant the first time.
- You can’t get pregnant if you have sex standing up.

And the most common myth among teens:

- Everyone is doing it.

Myths about sex ran rampant during the early days of the AIDS epidemic. At that time, the test for HIV wasn’t very good and there were few medications to treat AIDS. There were still questions about how, other than sex, people might get infected with HIV. The news showed pictures of young men with wasted bodies in the final stages of the disease.

This fact sheet is continued on the next page.

Name: _____

People were uninformed, and they were frightened. AIDS myths sprang up everywhere, such as:

- Only gay men can get AIDS.
- I can tell by looking if someone has AIDS.
- Nice women can't get AIDS.
- You can get AIDS by sitting next to someone who has it.

All of these proved to be untrue, but some, like other STI myths, are still heard today.

So why are there sex myths? One explanation is that people who want to have sex don't want to scare themselves with facts. They create stories that explain how their special powers protect them. For example, "I can tell by looking if a person has an STI." People who believe this myth may engage in risky behaviors that actually put them at risk for an STI instead of keeping themselves safe!

So the next time someone tells you something about sex that doesn't seem quite right, check it out, it might just be a myth.

Sources: <http://library.thinkquest.org/J002356F/myth.htm> and <http://www.thefreedictionary.com/Myth>

Name: _____

As a teenager, you have heard other teens say “everyone is doing it” about sex. You have also heard a lot about ways a person can stay safe while “doing it” such as:

You can't get an STI (or get pregnant) the first time you have sex.

You can tell by looking if someone has an STI.

You can't get an STI from oral sex.

These are myths, untruths, tall tales—all of them, including “everyone is doing it.” **So let's look at what is true.** The Centers for Disease Control and Prevention (CDC) is the national public health department. It keeps track of the number of people that have specific diseases each year, including some STIs. It also does surveys of people's behavior to find out how it relates to diseases. The CDC asks teens about their behaviors around sex and drugs.

The most recent teen survey was in 2011. It found the following:

- 47% had had sexual intercourse at some time.
- 6% had sexual intercourse for the first time before age 13 years.
- 15% had sexual intercourse with four or more persons during their life.
- 34% had sexual intercourse with at least one person during the 3 months before the survey.
- 40% did not use a condom during last sexual intercourse.
- 22% drank alcohol or used drugs before last sexual intercourse.

You probably know that teens aren't always totally honest when they fill out a survey. Some say that they didn't do a certain behavior when they have and others brag that they've done something they haven't done. These two behaviors tend to cancel one another out, so we can have a good deal of confidence in the results.

This fact sheet is continued on the next page.

Name: _____

So what does this survey tell us? First, not everyone is doing it. Just under half of all teens are having sex. Second, it tells us that **more than half of teens are using condoms**, which is good for preventing both STIs and pregnancy. This is the good news.

There is not-so-good news as well. The survey tells us that many sexually active teens are putting themselves at risk for STIs by having multiple partners, not using condoms and using alcohol or drugs before sex. Almost a quarter of all teens who are sexually active used alcohol or drugs. This lowered their ability to make good judgments about protecting themselves and their partner.

The CDC does these surveys so they can understand what they see in the statistics on teens and STIs. Here are some of their numbers:

- Almost nine million cases of STIs each year are among 15-24 year olds. That's almost half of all new STI cases each year.
- An estimated 8,300 young people aged 13-24 years in the 40 states reporting to CDC had HIV infection in 2009.
- The highest rates of gonorrhea are in teen women; the second highest rates are in teen men.
- STIs can't be prevented altogether because accidents happen. But by understanding the risks and developing strategies to stay safe, teens can help themselves and their friends reduce their chances of getting an STI.

Source: CDC.gov

Name: _____

It can be difficult to know if you have an STI. Many infected people have no symptoms. Women are especially vulnerable because they are more likely than men to have no symptoms.

But women, including teens, are far more likely to get regular routine reproductive health care than men are. This is important because during these appointments women are screened for STIs. If they are found to be infected, their partners can be brought in for testing and both are treated. This method is a powerful way to reduce the spread of STIs.

This table provides information on diagnosis and treatment—and lack of treatment—for common STIs.

STI	Diagnosis	Treatment	Without Treatment
Chlamydia	Women: annual screening if sexually active until 26 years old, urine test or swab of fluids from the cervix and/or vagina. Men: urine test or swab of fluids from the urethra or rectum for testing.	Can be cured with antibiotics.	Serious infection in women can lead to pelvic inflammatory disease, pregnancy in the fallopian tubes and infertility.
Genital Herpes	Cells and/or fluids are swabbed from the blisters for testing.	Cannot be cured; antivirals can be taken during periods flare-ups to relieve the symptoms or daily to reduce the chance of transmission.	Flare-ups may be more severe; transmission risk may be higher. Those with mild symptoms and infrequent flare-ups may choose this option.
Gonorrhea	Urine test or swab of fluids from urethra, cervix, rectum or throat for testing.	Can be cured with antibiotics, but many strains are becoming resistant to numerous antibiotics.	Women: pelvic inflammatory disease, pregnancy in the fallopian tubes, and infertility. Men: inflammation of the tubes attached to the testes; rarely infertility.
Hepatitis B	Identified by blood test; less common now that most children receive hepatitis B immunization.	Cannot be cured; antivirals can be used to prevent or reduce damage to the liver.	Fatal liver damage.
HIV	Blood or fluid from cheek cells inside the mouth are tested; if cell fluid tests positive, a blood test is done to confirm.	Cannot be cured; antivirals can reduce symptoms and extend life.	Eventually leads to destruction of key parts of the immune system which makes the person vulnerable to infections and death.
HPV	Women: Cells and/or fluids are swabbed from the cervix for testing. Men: no test. For both, vaccines are available that can reduce the chance of infection.	None; in most cases the immune system clears the body of infection; reinfection can occur; if HPV causes genital warts, the warts can be treated or removed.	If the body cannot clear the infection cervical cancer and other reproductive system cancers can occur.
Syphilis	Cells and/or fluids are swabbed from a syphilis sore or blood or spinal fluid is drawn depending on the test used.	Can be cured with antibiotics if caught early.	Symptoms disappear but syphilis remains in the body; after 10-20 years it can lead to nervous system damage including blindness, paralysis and death.

Sources: CDC.gov and WebMD.com

Name: _____

Avert.org

<http://www.avert.org/teens-diseases.htm>

This began as an HIV/AIDS website for teens, but has expanded to include a lot of useful information about STIs; it is easy to use.

Centers for Disease Control and Prevention (CDC)

<http://www.cdc.gov/std/default.htm>

This government website provides basic information, prevention information and statistics on diseases in the United States.

Every Day Health

<http://www.everydayhealth.com/sexual-health/std-facts.aspx>

An easy to use site with a good section on STIs.

Kidshealth

http://kidshealth.org/teen/sexual_health/stds/std_warts.html#

The Teens section of this website provides health information for teens that is clear and easy to understand.

Planned Parenthood

<http://www.plannedparenthood.org/health-topics/stds-hiv-safer-sex/hpv-4272.htm>

This not-for-profit website provides information on topics related to reproductive health for both women and men.

WebMD

<http://www.webmd.com>

This website provides a wide range of medical information including symptoms, testing and treatment.

**More Titles in Health
for Grades 7 - College**

HPV: What Every Teen Needs to Know

Am I Normal? Teens and Emotional Health

Teen Depression: Signs Symptoms and Getting Help

Hallmarks of Good Mental Health

Common Psychological Disorders of Adolescence

Curriculum in a Box: Mental Health

Confronting Sexual Harassment: What Every Student Needs to Know

Understanding and Preventing Sexual Violence

Making Healthy Choices: Fighting Teen Obesity

Digital Literacy: Cyber Safety and Security

Digital Literacy: Cyber Ethics and Etiquette

Underage Drinking: Is It Worth It?

It's Never Too Late: Stopping Teen Suicide

Stress: The Good, the Bad and the Healthy

Essential Health Comprehensive High School Health Curriculum

**free
lesson plans
available**

Visit our website for detailed descriptions of the above programs.

Human Relations Media
41 Kensico Drive
Mount Kisco, NY 10549

Phone: 800 / 431-2050
Fax: 914 / 244-0485
Web: www.hrmvideo.com
Email: service@hrmvideo.com