STI’s And The Risks Of Contraception Grade 8

UNIT OVERVIEW

For it was you who formed my inward parts;  
You knit me together in my mother’s womb.  
I praise you, for I am fearfully and wonderfully made.  
Psalm 139:13-14

DURATION: Number of Lessons; number of hours

1. I Am Special and Valuable 40 minutes
2. Let’s Look Back 40 minutes
3. Other Major Sexually Transmitted Infections 50 minutes
4. You May Have Heard… 50 minutes

DESCRIPTION:
Although information about STI’s and artificial methods of birth control is found in the present Grade 8 Fully Alive program, in this revision much has been rephrased and new information added. Also, because of the complexity of the information, it is now introduced in grade seven and continued in grade eight.

BACKGROUND INFORMATION

These lessons about STI’s and the risks of contraception provide information to grade seven and eight students who are immersed in a culture that trivializes sexual expression with many mixed messages. Although they think they know about sex, they have no context for intimacy, nor the life experience to recognize it. Yet the teen years are a time of idealism and our task as Family Life educators is to help them formulate these ideals into lasting relationships and not short-circuit them with sexual experimentation.

Dealing with the very real dangers of STI’s is not to scare them away from sex; rather, it is to help them recognize the great responsibility our Creator has given us through this gift.

By the same token, we would be doing our young people a disservice if we ignored the fact of contraception. They at least know about condoms and the pill and have much misinformation. Therefore, in the context of abstinence and chastity, we can give them honest, factual information and help them realize that church teaching about pre-marital sex and contraception is wisdom that will keep them happier on their road to adulthood.
The Ontario Bishops recognize the challenge that Catholic teachers face as they live out their responsibility to ‘teach what the church teaches’. They point out that that ‘while we respect the moral judgments of people made in good faith, we cannot allow a currently imperfect understanding of God’s will to replace the true teaching of the church.’ (Guidelines for Family Life Education, #61)*

*Grade Eight Fully Alive, Teacher’s Manual, p. 94.

Although as adults we faithfully struggle with and authentically try to integrate into our lives Church teaching, it is vital to recognize and appreciate that our particular issues and struggles are not the same for 13 and 14 year olds. We can faithfully teach the best of Church wisdom and thus give our youth a solid foundation upon which to continue the life-long task of conscience formation. Jesus encourages us to give those in our care the best of foundations so that when the doubts and questions come, they will have strength to persevere. They will be

> Like one who built a house and dug deep and laid a foundation upon the rock;
> And when a flood rose,
> The torrent burst against that house and could not shake it,
> Because it had been well built.
> Luke 6:48

**OVERALL EXPECTATIONS**

By the end of grade 8, students will:

- Increase their knowledge, values and skills in order to support morally and physically good choices involving their sexuality (e.g., respect for life, ethical questions in relationships, Catholic teaching about contraception) *(adapted from ministry)*
- Deepen their understanding of abstinence as the only true positive choice for adolescents as a component of the virtue of chastity and the wisdom of Church teaching concerning abstinence *(ministry and FA)*
- Apply living skills (e.g., decision-making, problem solving, and refusal skills) to respond to matters related to sexuality *(ministry)*

Ontario Catholic Graduate Expectations

The Graduate is expected to be:

A caring family member who:

- Recognizes human intimacy and sexuality as God’s given gifts, to be used as the Creator intended.
ASSESSMENT AND EVALUATION

- Diagnostic assessment: Assess both individual and small group tasks based on a rubric that you have adapted from other subject areas for each specific task. The following suggestions are offered throughout the unit: poster, collage, editorial, opinion piece, illustration, design, poem, haiku or acrostic and class behaviour codes.
- Paper and Pencil task: Faq’s quiz (summative)
- Paper and Pencil task: assess evaluation quiz Further Thoughts About STI’s for understanding and reflection.
- Paper and Pencil task: Assess journals for 1) articulation, 2) the ability to grasp meaning from text and discussion, and 3) to reflect on the relevance to their lives.
- Personal Communication: use classroom discussion to assess student knowledge, understanding and participation.

LINKS TO FULLY ALIVE AND HEALTH AND PHYSICAL EDUCATION

The topic, Living in Harmony With Fertility, is found on pages 97-98 in both the Teachers’ Manual and the Student Text.
The two best known methods of natural family planning are mentioned here: Sympto-Thermal and Billings Ovulation.
They were not included in the revision because the focus is to expose the myth of ‘safe sex’ and to counteract that message which is so prevalent in the media.
Although, we are not really talking about marriage and spacing children in this unit, it is fine to cover this information if time permits. (Lesson IV, Fully Alive))


STI’s are taught in the Healthy Living section of the grade 8 Health and Physical Education program under Growth and Development. However, in order to present this information from the Catholic viewpoint, it would be better to use this Family Life material rather than that presented in the OPHEA curriculum.

SUGGESTIONS FOR ACCOMMODATIONS

- As per individual student’s IEP’s such strategies as flexible groupings, less content expectations, scribing, rephrasing, retelling, quizzes done orally, less content expectations, pictures rather than written work, etc. are some suggestions.
- Sometimes students will be present for only part of a lesson.
BLACK LINE MASTERS

1. Thoughts About STI’s
2. Faq’s Quiz

ADDITIONAL TEACHER RESOURCES (appropriate for student use also)

- Fully Alive, grade 8
- Catholic Youth Update has excellent 4 page articles on line. Access by typing Catholic Youth Update and then click on ‘Archive’ for these on line publications:
  1. Sexuality: A Gift With Strings Attached
  2. Safe Sex: What Does the Evidence Say
  3. STD’s: A Life and Death Issue
  4. Acquiring an Attitude About AIDS
  5. Boundaries: Respect in Relationships
- Catholic Update also has on line adult publications – Access by typing Catholic Update and then click on ‘Archives’ for the following: (these would be appropriate for youth but the language may be more difficult to understand)
  1. AIDS and the Consistent Ethic of Life

WEBSITES

These web sites and your local Public Health Department provide excellent information appropriate for teachers and parents/guardians about STI’s. However, any preventative measures associated with STI’s need to be viewed through the lens of Catholic teaching and conscience decision making. THESE RESOURCES ARE INTENDED FOR TEACHER USE, AND ARE NOT APPROPRIATE FOR USE BY GRADE 8 STUDENTS.

- The Society of Obstetricians and Gynaecologists of Canada: www.sexualityandu.ca
- American Social Health Association: www.iwannaknow.org
- American Social Health Association: www.ashastd.org
- Ministry of Health and Long Term Care: www.gov.on.ca/health
- www.tellsomeone.ca (information about HPV and related diseases)
STI’s and the Risks of Contraception

Lesson One

I AM SPECIAL AND VALUABLE

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DESCRIPTION

The lesson begins with an exercise to help students realize how valuable they are in the eyes of God. There is time for a journal response. The definition of STI and the 4 infections introduced in grade 7 are reviewed.

MATERIALS

- The words from Psalm 139 – see below
- Chart paper or chalkboard space
- A sign that says 999,999,999:1
- Journals

SPECIFIC EXPECTATIONS

1. Identify God’s plan for human sexuality and be encouraged to deepen their commitment to follow God’s plan. (adapted from 3.1, 3.2, 3.3 FA)
2. Develop an awareness of how the human person is a reflection of God (1.1FA)
3. Develop an awareness of the importance of self acceptance as a step in becoming a complete human (1.3FA)

ASSESSMENT OPPORTUNITIES

- An art lesson in which they design their names to reflect The Wonder of Me
- Illustrate/decorate 999,999,999:1
- Write a poem, haiku, acrostic entitled The Wonder of Me
- You may or may not decide to evaluate their journal response.
TEACHING/LEARNING STRATEGIES

1) Brainstorming
   a) Begin by asking students to think of their most valued possession.
   b) Brainstorm a list on blackboard or chart paper (some may not wish to share)
   c) Make sure to include all the money they may have saved over the years.
   d) Then ask if they would just hand over this valued possession or all their hard
      earned money (and never get it back) to a casual friend? A good friend? Someone
      you are going out with?

2) Next, display Psalm 139:13-14:
   
   For it was you who formed my inward parts;
   You knit me together in my mother's womb.
   I praise you, for I am fearfully and wonderfully made.
   
   a) Challenge them to realize that their bodies ARE their most precious and valuable
      possession.
   b) List reasons on chart paper titled I am Fearfully and Wonderfully Made
      i) The only one we’ll ever have
      ii) The totality of who we are – mind, feelings, spirit, personality, our very selves
      iii) Created and loved by God
      iv) Containing the gifted power of our sexuality as males or females

3) Then pose the following question and give a few minutes to think about it in silence:
   a) IF YOU WOULD HAVE TROUBLE HANDING OVER ALL YOUR MONEY
      OR MOST PRECIOUS POSSESSION TO SOMEONE, WHY WOULD YOU
      EVER CONSIDER HANDING YOUR BODY OVER TO SOMEONE?
   b) After a few moments of pondering, continue:

4) To help students truly appreciate how special each one is in the sight of God ask if
   they know what ‘odds’ are. For example, what are the odds of winning a lottery
   (maybe one in several million), etc.
   a) Then ask if they have any idea what the odds are that each one of us is who we
      are.
   b) Consider that there could be as many as 500,000,000 sperm cells in an ejaculation
      of semen and that the moment each one of us was conceived, only one sperm cell
      fertilized the egg; all the rest died.
c) That translates into odds of 499,999,999:1! Go back to the Scripture quote – God knew you even before you began, wanted you to be you (not one of the other 499,999,999 other babies you might have been at that moment, let alone if your parents had conceived a baby a day later).

d) So if you ever feel that you are not special, or wish you were someone else, think of how much God wanted you to be you and that your responsibility is to become the best you that you can be. Your body is not trivial; it is not a thing, as so much of the culture around us seems to say. It is important to pray daily that as you grow towards adulthood, God will help you make good and chaste decisions about expressing affection and sharing your body.

e) Unfortunately, so many movies, music videos and song lyrics suggest that your body isn’t as important as any of your possessions – that your body is trivial.

f) Respecting your body and choosing to wait until you have the God given right and responsibility to share it with your partner in marriage is a difficult choice. Some people may even make fun of you for choosing to wait until marriage to have sex. Choosing not to share your body in sexual intimacy is to choose abstinence, to live in chastity. But you will know deep in your heart of hearts that by choosing chastity, you will be able to give all your energy to developing fully into the best all-rounded person you can be. This is God’s challenge to you and with prayer, the sacraments, and the support of your family and good positive friends you can hold to this ideal.

5) Allow 10 minutes for a journal entry: *The Wonder of Me*
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Lesson 2

LET’S LOOK BACK

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DESCRIPTION

This lesson reviews the definition of STI’s, the meaning of abstinence and chastity, and the four infections introduced last year: Chlamydia, Human Papillomavirus, Hepatitis B, and HIV/AIDS.

MATERIALS

• the following information about STI’s on overhead.

NOTES TO THE TEACHER

• Impress upon your students that all the language you use concerning STI’s is medical language and proper terminology and that you trust that they are mature enough and dignified enough to handle it. Give them permission to be embarrassed and uncomfortable with some information but that you have enough respect for them to give them honest, accurate information.

• Discuss how they will handle their embarrassment in a respectful manner and provide a way for them to ask for clarification about anything they do not understand. (maybe anonymous question box)

• Sometimes it might be necessary to equate the medical or proper word with a more common slang term. But once you have done that, tell them from now on, you will all use correct terminology. E.g., consider all the weird and ‘cutesie’ words people use for penis. That actually shows that they really are not comfortable in talking about these private parts and functions of their bodies. Appeal to the courtesy and respect you have for them in dealing with these serious topics.

• To explain how STI’s are transmitted, the terms oral, anal, and vaginal sex are used. When defining ‘oral sex’, you can gently explain that it means using the mouth to kiss private parts. Most are quite disgusted with the thought. However there is a disturbing trend among some young teens to experiment with oral sex because they think it is not sex and that they are still virgins if they do it. We must help them understand that virginity is far more than an intact hymen and that oral sex is extremely intimate sexual behaviour – and wrong for them.
Of course, anal sex is a very dangerous practice, since tiny cuts (or fissures) caused by penetration are a direct way for infection to enter the bloodstream.

On the other hand, many young teens are rather frightened by what they might think is demanded of them sexually by the way sex is portrayed in the media. You will often see tangible relief when you explain that one never has to do something that is uncomfortable or upsetting – even with your marriage partner. Part of being sexual in marriage is the time and the right to discover how to give pleasure to each other in mutually pleasing ways. Force or coercion, even in marriage, is not only wrong for them, but fraught with potential health risks.

Don’t be afraid to laugh with them sometimes.

Again impress upon them that these topics are not to be shared with younger children. Certainly share with parents or guardians or trusted adult. They know we are dealing with these topics. You can talk seriously with each other too since we are all in this together but stay dignified and use language that honours their bodies.

The only ‘safe sex’ is abstinence until marriage and remaining faithful throughout your marriage. However, abstinence is more than avoiding vaginal intercourse. Oral sex, anal sex and skin-to-skin contact of the private parts are also sexual activities to be avoided not only because they can be means of STI transmission because they contravene the virtue of chastity.

What about French kissing and transmission? Generally speaking it is considered low risk behaviour. Even though HIV is found in saliva, the concentration is low. But cuts or open sores in or around the mouth could be an entry point for viruses. Herpes can be passed on through those open cuts. Also, French kissing (and you need to explain because not all students are aware) is right on the edge of intimate sexual activity. It could lead further, beyond the limits that they would be comfortable with.

SPECIFIC EXPECTATIONS

Students will deepen their understanding of abstinence as the only true positive choice for adolescents as a component of the virtue of chastity and the wisdom of Church teaching concerning abstinence (OPHEA and FA)

Students will identify methods of transmission, symptoms and high-risk behaviours related to STI’s, HIV and AIDS (OPHEA and FA)

ASSESSMENT OPPORTUNITIES

Wait until the following 3 lessons have been taught so that there is a more complete context for assessment.
TEACHING / LEARNING STRATEGIES

1) Review
   a) Introduce the review by saying:
      Although your parents, teachers, your church and all who love you hope you
      choose chastity because sex is such an awesome God-given power, there are very
      serious dangers involved in sexual activity that you need to know about.
      You began to discuss STI’s in grade seven, so let’s review some of the
      information you already know.

      (Some students will not have had these lessons last year, or may have not been
      ready to absorb all the information, so this review is important.)

2) What does STI mean? Other terms – STD or venereal disease.

3) How are they transmitted? All are transmitted by vaginal, oral or anal sex WITH
   SOMEONE WHO IS INFECTED (See teacher notes for how to talk about oral and
   anal sex.)

4) CHLAMYDIA – review from grade 7

5) HPV and new vaccine – review from grade 7

6) HEPATITIS B – review from grade 7

7) HIV/AIDS – review from grade 7
STI’s and the Risks of Contraceptions

Lesson Three

OTHER MAJOR SEXUALLY TRANSMITTED DISEASES

top

DESCRIPTION

This lesson provides information about syphilis, gonorrhea, genital herpes, HIV/AIDS, and some genital infections that are not STI’s.

MATERIALS

- Overheads of the STI information presented in this lesson
- Copies of Appendix I: Further Thoughts About STI’s

NOTES TO THE TEACHER

- Over the past decade, increases have been reported in the incidences of 3 nationally reported STI’s: Chlamydia, gonorrhea and syphilis.*

- A January 22, 2007 article from the Ottawa Citizen noted a drastic rise in syphilis rates in Canada. This disease was nearly eradicated less than a decade ago but has made a serious comeback. It is also spreading worldwide. One reason may be that it can be transmitted through oral sex which people do not take seriously enough

- ‘Party drugs’ (ecstasy, crystal meth) are increasingly being linked to promiscuous sexual behaviour*

- Anonymous partnering venues such as the internet are expanding*

- There are more than 75,000 diagnosed cases of HIV/AIDS in Canada and perhaps another 20,000 more who are unaware of their HIV infection. The number of women becoming infected with HIV continues to rise.**

- HIV infection is increasing in the heterosexual community.**

*Canadian Medical Association Journal, January 16, 2007

**Centre for Infectious Disease Prevention and Control, Health Canada 2006
Young women between the ages of 15-29 are at highest risk for developing an HPV (human papillomavirus) infection. Some HPV strains are linked to cervical cancer.

A new vaccine, Gardasil®, (Quadrivalent Human Papillomavirus Vaccine) has recently been discovered that protects against four HPV types, which together cause 70% of cervical cancers and 90% of genital warts.

On average, **one woman dies every day** from cervical cancer in Canada.

Failing to disclose HIV to a partner and subsequently infecting them with the virus is a criminal offence with a penalty of up to 25 years.

**SPECIFIC EXPECTATIONS**

**Students will continue to:**

- Identify methods of transmission, symptoms and high-risk behaviours related to STI’s, HIV and AIDS in a context of abstinence and chastity. (3.4FA and OPHEA)
- Identify several common genital infections that are not STI’s but that require treatment by a doctor. (new)

**ASSESSMENT OPPORTUNITIES**

- Black Line Master I: Further Thoughts About STI’s (this exercise was introduced in grade 7 and may be used again because of new information)
TEACHING/LEARNING STRATEGIES

Present and discuss the following information. It is best that this be a whole class activity in order to prevent and/or correct misinformation.

SYphilis

*Symptoms:
- May appear days or months after infection and may even disappear but the infection stays active in the body unless treated
- Painless sore around or in the vagina, on the penis, inside the mouth or near the anus
- Flu-like symptoms
- Rash on the palms of the hands, soles of the feet or over the whole body

Treatment:
- Syphilis is cured with antibiotics. The partner must be tested and treated too. It is possible to get syphilis again from a different partner WHO IS INFECTED.

Consequences if Untreated:
- Years later can cause paralysis, heart disease, brain damage, death.

Gonorrhea

*Symptoms:
- Sometimes too mild to notice
- Females: new or different discharge from the vagina, burning feeling when urinating, vaginal bleeding between periods
- Males: thick yellowish discharge from the penis, burning feeling when urinating, pain or swelling in the testicles

Treatment:
- Gonorrhea is cured with antibiotics. The partner must be tested and treated too. It is possible to get syphilis again from a different partner WHO IS INFECTED.

Consequences if Untreated:
- can lead to painful, long-term condition in women called PID (pelvic inflammatory disease)
- a serious eye infection or even blindness can be passed on to the baby of an infected woman during the birth process
- can cause sterility in both males and females (inability to ever have children)
- years later can cause a serious form of arthritis
GENITAL HERPES

- An STI that causes painful sores on or around the genitals.
- Spread by direct contact with open sores
- The virus that causes ‘cold sores’ around the mouth is not the same one that causes the genital sores.
- Genital herpes is not spread by toilet seats, bathtubs, swimming pools, or hot tubs.

*Symptoms

- Tingling or itching in the genital area. Then a cluster of tiny blisters will appear then burst leaving painful sores which last 2-3 weeks. Fever and headache may accompany first attack.
- Tender lumps in the groin for both males and females
- Oral sex with an infected person can cause the painful sores in the mouth as well as the genital area

Treatment

- No cure but medication can shorten the attacks and make sores less painful
- Sores may appear again from time to time
- Once you have it, you are infected for life and can infect a partner when the sores are present

Consequences

- Pain and recurring symptoms
- Can be passed to baby during birth if the sores are present. Herpes infection in babies can be life threatening.
- May involve a greater risk for cervical cancer (women)
HIV/AIDS

The Ontario Catholic Schools curriculum, *AIDS: A Catholic Educational Approach to HIV*, deals extensively with the subject from kindergarten through grade 12. If you do not have your own copy, the Teachers’ Manual should be in your school library. If not, contact your Board’s Religion department or The Institute for Catholic Education (ICE) at 416 962 0031 to obtain a copy.

In this *Fully Alive* section on HIV/AIDS, it might be best to start with what the students know already and dispel any myths or misinformation they have by drawing on the content from the Catholic Schools curriculum.

*All symptoms described could also be symptoms of other conditions that have nothing to do with STI’s. Only a doctor can tell by a blood or urine test. See notes about seeing a doctor.

COMMON CONDITIONS THAT ARE NOT STI’s

Yeast Infections

There is a delicate balance of healthy bacteria in the vagina but sometimes something disrupts that balance and causes a yeast infection. This has nothing to do with STI’s, and although they do not cause permanent harm, they are uncomfortable and need treatment. A heavy chunky discharge that smells bad might be a sign of a yeast infection. Treatment is very effective and takes a few days.

Things that can upset the vaginal balance: antibiotics for another illness, stress, too much sugar or chocolate, perfumes or deodorant sprays in the vaginal area, jeans or panties that are too tight and don’t allow any air circulation.
Epididymitis

- This is an inflammation of the male genitals (not STI related)
- Sometimes harmless bumps appear on the penis. Check with your doctor – they will always be glad to answer questions that could worry you.
- Underwear and very tight pants can cause inflammation and can also interfere with sperm production. Remember, sperm needs less than body temperature to develop).
Thoughts About STI’s

1. Some things that I already knew……

2. Some things that I learned…

3. Something that surprised me…

4. Something that made me feel sad…

5. Something that gave me hope…

6. A goal I have set for myself…

7. Something I will tell my parents/guardians or older siblings…

8. Something I had wrong…

9. Something I had never thought about before…

10. Abstinence is the only way to prevent an STI because…
STI’s and the Risks of Contraception

Lesson 4

YOU MAY HAVE HEARD…

top

DESCRIPTION

By presenting factual information about the risks of all forms of contraception in preventing STI’s, the myth of ‘safe sex’ is debunked.

MATERIALS

- Black Line Master 2
- Chart or Poster paper, markers
- Journals

NOTES TO THE TEACHER

- Fully Alive presents some of this information in Unit 3, Topic 4: The Gift of Fertility and one of the expectations is to explore methods of family planning in the light of Christian values (p. 93 TM)

- The focus of this revised lesson is to debunk the myth of ‘safe sex’ that students are getting from the media and point out the very grave dangers if contracting an STI even if they think these methods provide protection. Therefore we are not dealing with family planning per se, but the risks of contraception.

- The gift of fertility, God’s plan for sexuality, and Church teaching regarding contraception implicitly underlie all the factual information presented.

SPECIFIC EXPECTATIONS

Students will continue to:

- Deepen their understanding of abstinence as the only true positive choice for adolescents as a component of the virtue of chastity and the wisdom of Church teaching concerning abstinence (ministry and FA)
- Continue to develop an understanding of sexuality and Christian vision (3.1FA)
- Appreciate that there is no ‘safe sex’. (new)
ASSESSMENT OPPORTUNITIES

1. Small group activities: *WHY ABSTINENCE and TIPS FOR ABSTINENCE*
   
   2. Posters or collages with the same two themes. (rubrics – design, originality, message)
   
   3. Editorial or opinion piece about how the media portrays sex.
   
   4. Editorial or opinion piece about how sex is used to sell so many products.
   
   5. Ann Landers type column
   
   6. Faq’s Quiz: Black Line Master II
TEACHING/LEARNING STRATEGIES

1) The initial discussion identifying the only ‘safe sex’ is best introduced by you to the whole class with important statements recorded on the board for emphasis.
   a) YOU MAY HAVE HEARD IT SAID....
      - That if you practice ‘safe sex’, you won’t get an STI?
      - In fact, there is only one way to practice ‘safe sex’:
        Do not have intimate sexual activity before you are married.
        Marry someone with the same sexual history as you have and remain faithful to your marriage partner.
      - Then ask students to develop a list about things they have heard about ‘safe sex’

2) Before talking about these so called ‘safe sex’ methods, take time to have the students consider the following situations:
   - Would you go ice fishing if the ice were 8 cm thick and someone told you it was 85% safe?
   - Would you go rock climbing with no tether but someone said you only had a 20% chance of falling?
   - Would you get in a car that only had 80% braking power?
   - Think of some other scenarios that would have a 15 – 20% failure rate.
   - The last question comes after the so called ‘safe sex’ information.

Notes before continuing
   - Always begin the discussion by asking students what they know already so that you can clear up any misinformation.
   - Not all will know what a condom is so explain that it is a latex sheath that fits over the erect penis and prevents the semen from entering the vagina. Invariably, students at this age think that you can check for a hole in a condom by blowing it up to see if air leaks or by putting water in it. Dispel this fallacy by explaining that once a condom is unrolled, it is no longer able to be used.
   - If someone asks if there is a female condom you can say that such a device exists that goes into the vagina but it is very cumbersome and complicated.
   - The main methods that students will have heard about are in the student text. (condoms, the pill)
   - If they ask about a vasectomy or tubal ligation (getting your tubes tied), you need to explain that these methods permanently prevent pregnancy. Then our ability to become co-creators with God and be open to new life is thwarted.
   - Only doctors can perform these surgeries and only on older adults – not on teens.
   - Vasectomy: the tube is severed that allows the sperm cells to mix with the semen. Therefore, a man can still have sex, but there will be no sperm in the ejaculate. Absolutely NO protection against STI’s.
Tubal Ligation: the fallopian tubes are cut so that the ovum cannot go from the ovary to the fallopian tube where it would be fertilized. Again, absolutely No protection against STI’s.

There are a lot of commercials today about medication to help control Genital Herpes. Students must be told that Genital Herpes is not curable – one has it for life and can pass it on to a partner when lesions are present (and even sometimes when they are not). Medication may lengthen the time between outbreaks.

If the question of Natural Family Planning comes up, perhaps the best thing to say to grade 8 students is that studies have found ways to help determine when ovulation occurs and therefore our church encourages married couples (with the help of some training) to use this information to either get pregnant or space their children. There is absolutely no protection from STI’s.

Finally, present the following information about contraception through discussion.

None of the following methods can completely prevent pregnancy or the contracting of an STI. Unfortunately, there are many false claims about these methods allowing for safe, risk free, no worry sex. But even if these claims were true, (and they are not), you know that becoming involved in sexual activity as a teenager is just not God’s plan to enable you to become the vibrant, well rounded beautiful person God is calling you to be.

Barrier Methods

- Prevent the sperm from reaching the ovum

- The condom is worn over the erect penis. It could be defective, or break, or slip off. It can prevent pregnancy about 85% of the time. Remember a woman can only become pregnant a few days in each cycle when the ovum is present. *

- A condom will have a much higher failure rate for STI’s because you can get one any time you have sex with an infected partner. That means the danger of contracting an STI while using a condom becomes four times greater than that of becoming pregnant.*

- Also, genital herpes, pubic lice, and human papillomavirus can be spread by skin to skin contact with areas not covered by a condom. The latex can break down if stored at high temperatures (e.g., glove compartment of a car, a wallet), and if is past its expiry date.

- The diaphragm is a small rubber cup that the woman inserts into her body that covers the cervix or opening to the uterus. It must be fitted by a doctor and offers NO protection against STI’s

- Spermicides are a chemical foam or cream that is inserted into the vagina to kill sperm. Sometimes a sponge containing a spermicide is used but neither can prevent transmission of STI’s.
The Birth Control pill either stops ovulation or changes the mucus from the cervix so that sperm cannot get into the uterus. It offers NO protection against STI’s.

*AIDS: A Catholic Approach to HIV (p.10)

THE LAST QUESTION

After learning about these so-called ‘safe sex’ methods, would you risk becoming sexually active if you had a 30% (maybe as much as 40%) chance of contracting an STI?

In other words, out of 10 sexual encounters, 3 or 4 could infect the partner with an STI if the other person was infected. Remember, people do not always know they have an STI.

Offer students the opportunity to present their learning in one of the following forms:

i) Small group activities: \textit{WHY ABSTINENCE and TIPS FOR ABSTINENCE}

Suggestions for \textit{WHY ABSTINENCE}:

\begin{itemize}
  \item Sticking to your values and beliefs
  \item Respecting God’s plan for the gift of your sexuality
  \item No worries about pregnancy or getting an STI
  \item More time to build your relationship and grow together
  \item No worries about your reputation
  \item Feel better about making a decision that is best for your emotional growth
  \item No guilt, therefore much happier
  \item No fear of getting caught
  \item Finding fun and creative ways to express affection like handholding, kissing, hugging, doing fun things together
  \item No shame and regret if the relationship breaks up
\end{itemize}

Suggestions for \textit{TIPS FOR ABSTINENCE}:

\begin{itemize}
  \item Start planning now how you will use your gift of sexuality as you grow through your teen years
  \item Make sure you are clear what abstinence means to you
  \item Know ahead of time what your boundaries are (it’s a bit late when you are in the situation)
  \item If you do get in a situation which makes you uneasy or uncomfortable, have a back up plan that will change the mood
  \item Talk to your partner about how you want to express affection – if he or she won’t listen to or accept your wishes, they are not the partner for you
  \item Be aware of partners who pressure you to go farther than you want
  \item Hang out with a group of friends who have the same values and support each others’ decision for abstinence
  \item Don’t believe that everyone else is doing it
  \item Party safely – it’s a lot harder to stick with your decision if you use alcohol or drugs
  \item Go out in a group
  \item Do not go to someone’s house to be alone
  \item Prayer and the sacraments will help keep God’s plan for you front and centre.
\end{itemize}
ii) Posters or collages with the same two themes. (rubrics – design, originality, message)

iii) Editorial or opinion piece about how the media portrays sex.

iv) Editorial or opinion piece about how sex is used to sell so many products.

v) Ann Landers type column
FAQ’s Quiz
(can be treated as just true or false or students may be asked to explain why they chose their answer)

- A person can have an STI and not know it.
- It is normal for girls after puberty to have some vaginal discharge.
- Once you have been cured of an STI, you can not get it again.
- HIV is mainly present in blood, semen, vaginal secretions and perspiration.
- Chlamydia and gonorrhea can cause a severe condition called PID or pelvic inflammatory disease.
- Young teens cannot get an STI.
- A pregnant woman who has an STI can pass the disease on to her baby.
- Most STI’s go away without treatment if people wait long enough.
- STI’s that are not treated early enough can cause sterility.
- Birth control pills offer excellent protection from STI’s.
- If your partner is neat and clean and a nice person, you can’t get an STI from them.
- Chlamydia is the most common bacterial STI.
- The rates of STI’s in Canada are going up especially in the 15-24 year old range.
- There is a possibility of contracting an STI through tattooing or body piercing.
- You cannot get HIV/AIDS from a toilet seat.
- You might get an STI if you donate blood through the Canadian Blood Services.
FAQ’s Quiz
(can be treated as just true or false or students may be asked to explain why they chose their answer)

- A person can have an STI and not know it. (true)
- It is normal for girls after puberty to have some vaginal discharge. (true)
- Once you have been cured of an STI, you can not get it again. (false)
- HIV is mainly present in blood, semen, vaginal secretions and perspiration. (false – not really in perspiration)
- Chlamydia and gonorrhea can cause a severe condition called PID or pelvic inflammatory disease. (true)
- Young teens cannot get an STI. (false)
- A pregnant woman who has an STI can pass the disease on to her baby. (true)
- Most STI’s go away without treatment if people wait long enough. (false)
- STI’s that are not treated early enough can cause sterility. (true)
- Birth control pills offer excellent protection from STI’s. (false – no protection at all)
- If your partner is neat and clean and a nice person, you can’t get an STI from them. (false)
- Chlamydia is the most common bacterial STI. (true)
- The rates of STI’s in Canada are going up especially in the 15-24 year old range. (true)
- There is a possibility of contracting an STI through tattooing or body piercing. (true)
- You cannot get HIV/AIDS from a toilet seat. (true)
- You might get an STI if you donate blood through the Canadian Blood Services. (false)