

Healthy Relationships and Human Sexuality

Amelia Kasten

HERS 321

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Dear Parent or Guardian,

This letter is to inform you that next week we will be beginning a unit on Healthy Relationships and Human Sexuality in Health class. Your child will be receiving age-appropriate, medically accurate information on the following topics as part of this unit: communication, reproductive health, prenatal growth and development, teenage pregnancies and parenthood, abstinence, talking with their parents, contraception, love and infatuation, healthy relationships, sexual harassment and sexual assault, refusal skills, sexually transmitted infections, and HIV and AIDS.

Your child will be encouraged to discuss the topics we will be covering in class with you at home. Enclosed with this letter you will find a brochure entitled, “How Do I Talk To My Kids About Sex?” from the Birds and the Bees Project. You may find this brochure helpful in facilitating conversations with your child about sexuality and reproductive health.

If you have any questions about the upcoming lessons, please contact me at (507)457-5240 or akasten8589@winona.edu.

Sincerely,

Ms. Kasten
Health Teacher

National Health Education Standards

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

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

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

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

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

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

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

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

MN Health Education Standards

In grades K-8 health instruction must be given each year or by district – determined grade bands.

Grade 9-12 instruction must be provided to all students at least once. Districts determine periodic standards revision cycle.

Edina School District Graduation Requirement:

Grades 10-12: Health-One semester

Supplies

Whiteboard
Whiteboard Markers
Paper
Writing Utensil
Large Glass Bowl
1 gallon Whole Milk
1 package of 4 different colored food-coloring bottles
Bottle of Dawn Dish Soap
Media Influence Powerpoint
Male and Female Silhouettes Worksheets
Large Human Body Cut Outs or Drawn on Whiteboard
Pieces of Paper with various Reproductive Parts on them (5 sets of each)
Male and Female Silhouettes Transparencies
Reproductive Vocabulary Challenge Transparency and Worksheets
Overhead Projector
1 envelope with pieces of paper with the female reproductive organs
1 envelope with pieces of paper with the male reproductive organs
Bucket to put slips of paper in
Research materials for students to use (texts, library, internet, brochures)
Cup of Rice
A 5 pound bag of rice
40 pounds of rice
CD Player
Soft romantic music
Scented candles and matches
One dice for each student (total of 20-30)
One plastic cup for each student (total of 20-30)
Abstinent... Yes? No? Maybe? Worksheet (20-30 total)
Abstinent... Yes? No? Maybe? Transparency
Abstinence Information Transparency (Tackmann, 31)
15 Re-sealable plastic bags numbered 1-15 in order of effectiveness
1 bag of white navy beans (2 cups)
1 bag of red beans (1 cup)
15 envelopes, each with 15 pieces of paper in them with one type of contraceptive method on each piece.
Birth Control Methods Transparency (Tackmann, 27)
20-30 Abstinence vs. Contraception Worksheet (Tackmann, 28)
20-30 Contraception Method Guided Notes (Tackmann, 29)
Condom
Banana
Models of various contraceptive methods – if available otherwise use pictures
Contraceptive Lecture Powerpoint
Are we in LOVE? Transparency (Tackmann, 32)
Clues to Distinguish Infatuation from Love Transparency (Tackmann)
Are You in Love or Infatuated? Letter (Tackmann)

Warning Signs of an Unhealthy Relationship Transparency (Tackmann)
Love vs. Infatuation Graphic Organizer Transparency (Tackmann)
20-30 Are we in LOVE? Worksheets (Tackmann)
20-30 Clues to Distinguish Infatuation from Love Charts (Tackmann)
20-30 Are You in Love or Infatuated? Letters (Tackmann)
20-30 Love vs. Infatuation Graphic Organizer (Tackmann)
Decorate room with multiple hearts
TV/VCR
Video: It's Not Only Murder (Tackmann; Hazelden)
17 cards with 17 sexual harassment behaviors on each set of cards (4-5 sets of cards)
Jeopardy Review Powerpoint
Sexuality Unit Test

Vocabulary List

Scientific Language – type of language style that is designed for accuracy
Childhood Language – type of language style that is designed to hide embarrassment
Street/Slang Language – type of language style that is designed to be informal and to be used by specific cultural subgroups
Common Language – type of language style that is designed to communicate information plainly
Penis – external male sexual organ through which sperm leave the body
Vagina – hollow, muscular passage leading from the uterus to the outside of the body; female organ of intercourse; birth canal
Masturbation – manual (or non-manual) self-stimulation of the genitals, often resulting in orgasm
Vaginal Sex – intercourse via the vagina
Oral Sex – sexual contact between the mouth and the genitals or anus
Anal Sex – intercourse via the anus
Breasts – the outer, front part of the thorax, or the front part of the body from the neck to the abdomen
Menstruation – discharge of blood from the vagina as a result of the shedding of the uterine lining at the end of the menstrual cycle
Testicles – male genital glands
Synonyms – words meaning the same
Sex Appeal – immediate appeal or obvious potential to interest or excite others, as by appearance, style, or charm
Testes – organ that produces sperm and testosterone
Testosterone – male hormones
Fetus – last 7 months of prenatal development
Semen – fluid ejaculated from the penis
Fertilization – sperm cells join egg cell
Erection – when the penis becomes engorged with blood and hardens
Egg Cells – cells produced in the ovaries
Ejaculation – when the semen leaves the penis
Puberty – begins about 12-13 years of age
Embryo – first 2 months of development in the uterus
Estrogen – a hormone produced in the ovaries
Clitoris – female erectile tissues between the labia
Sperm Cells – cells produced in the testes
Placenta – organ that nourishes the fetus
Prostate Gland – adds a chemical fluid to the semen
Cowpers Glands – internal male reproductive organs that secrete a clear, lubricating fluid in to the urethra
Scrotum – sac that regulates the temperature of the testes
Urinary Bladder – a distensible, muscular and membranous sac, in which the urine is retained until it is discharged from the body
Epididymus – stores immature sperm cells

Urethra – the canal through which urine from the bladder leaves the body; in the male also brings semen out of the body through the penis

Vas Deferens – two tubes that carries sperm from the epididymus into the urethra

Seminal Vesicle – adds a sugary fluid to semen

Foreskin – the loose fold of skin that covers the glands of the penis

Ovum – female gamete (egg cell)

Ovary – gland that produces the egg cells and hormones

Labia – folds of skin outside the vagina

Fallopian Tube – pair of canals that transport ova from the ovaries to the uterus; where fertilization takes place

Uterus – house fetus during pregnancy

Endometrium – mucous membrane lining the uterus

Cervix – entrance to the uterus; narrow, lower end of the uterus that opens into the vagina

Hymen – a fold of mucous membrane partly closing the external orifice of the vagina in a virgin

Sperm – male gamete produced by the testes and transported outside the body through ejaculation

Abstinence – not engaging in any sexual activity that may result in becoming pregnant, getting someone pregnant, or spreading or contracting an STI or HIV OR abstaining from oral, anal, and vaginal intercourse.

Sexually Transmitted Disease (STD) – a disease caused by pathogens that are transmitted from an infected person to an uninfected person during intimate sexual contact

Contraceptives – a device, drug, form of preventing pregnancy

Virginity – state of not having sexual intercourse

Lunelle – an injection containing the synthetic hormones estrogen and progestin

NuvaRing – a monthly birth-control option in the shape of a ring that is inserted into the vagina and left there for up to 3 weeks

Contraceptive Patch – like a square band-aid, is applied to the abdomen, buttocks, upper arm, or upper torso; is changed each week for a schedule of 3 weeks on and 1 week off; works by slowly releasing a combination of estrogen and progestin hormones through the skin. These hormones prevent ovulation and thicken the cervical mucus, creating a barrier to prevent sperm from entering the uterus.

Sterilization – a surgical procedure to end a person’s reproductive capability

Norplant – made up of six tiny silicone rods that contain progestin; these rods are implanted under the skin of your upper arm where they are left for as long as five years. The implant procedure can be done in the doctor’s office and takes about 10 minutes

Depo-Provera – is a hormone injection that lasts for 3 months to prevent pregnancy

The Pill – a daily pill that contains hormones to change the way the body works and prevents pregnancy

Intrauterine Device (IUD) – a device inserted into the uterus through the cervix to prevent pregnancy by interfering with implantation

Condom – a latex sheath worn over the penis during sexual acts to prevent conception and/or the transmission of disease; some condoms contain a spermicidal lubricant

Diaphragm/Cervical Cap – bowl-like rubber cup with a flexible rim that is inserted into the vagina to cover the cervix and prevent the passage of sperm into the uterus during

sexual intercourse; used with a spermicidal foam or jelly, it serves as both a chemical and physical barrier to sperm

Spermicidal Foams/Jellies – contains chemicals that stop sperm from moving

Natural Family Planning – a method used to help a couple determine when sexual intercourse can and cannot result in pregnancy

Withdrawal – a guy removes his penis from the vagina just before he ejaculates

Barrier Methods – birth-control devices that block the meeting of egg and sperm, either by physical barriers, such as condoms, diaphragms, or cervical caps, or by chemical barriers, such as spermicide, or both

Hormonal Methods – birth-control methods that act on the hormonal system

Permanent Methods – birth-control methods that are surgical procedures

Love – a profoundly tender, passionate affection for another person

Infatuation – to inspire or possess with a foolish or unreasoning passion

Sexual Assault – conduct of a sexual or indecent nature toward another person that is accompanied by actual or threatened physical force or that induces fear, shame, or mental suffering

Sexual Harassment – unwelcome sexual advances made by an employer or superior, esp. when compliance is made a condition of continued employment or advancement

Intervention – the act or fact of intervening

“Breaking Down Communication Barriers”

Goal: Students will learn the different language styles that are used when talking about sexuality.

Behavioral Objectives:

Students will be able to identify the four different types of languages of sexuality.
Students will be able to identify at least 3 problems that could occur if they do not have the same communication style as their parents/guardians and/or their sexual partner.

Time: 50 minutes

Integration: Communication Skills, Biology

Materials:

Paper
Writing Utensil
Whiteboard
Whiteboard Markers

Vocabulary:

Scientific Language – type of language style that is designed for accuracy
Childhood Language – type of language style that is designed to hide embarrassment
Street/Slang Language – type of language style that is designed to be informal and to be used by specific cultural subgroups
Common Language – type of language style that is designed to communicate information plainly
Penis – external male sexual organ through which sperm leave the body
Vagina – hollow, muscular passage leading from the uterus to the outside of the body
Masturbation – manual (or non-manual) self-stimulation of the genitals, often resulting in orgasm
Vaginal Sex – intercourse via the vagina
Oral Sex – sexual contact between the mouth and the genitals or anus
Anal Sex – intercourse via the anus
Breasts – the outer, front part of the thorax, or the front part of the body from the neck to the abdomen
Menstruation – discharge of blood from the vagina as a result of the shedding of the uterine lining at the end of the menstrual cycle
Testicles – male genital glands
Synonyms – words meaning the same

Procedure:

Hook: 10 minutes

- Students will brainstorm the different ways that we talk about sexuality, or sexual things.
 - What types of language do we use with different people or in different situations?

Awareness building: 10 minutes

- Put the Headings: Scientific Language – Childhood Language – Street/Slang Language – Common Language on the Whiteboard
- Discuss what each type of language is and examples of each.
 - Scientific Language: designed for accuracy, words such as “fallopian tubes” or “sexual intercourse”
 - Childhood Language: designed to hide embarrassment or to avoid explicit conversation, words such as “wee wee” or “number two”
 - Street/Slang Language: designed to be informal and to be used by specific cultural subgroups, words or phrases such as “getting it on” or “boob”
 - Common Language: designed to communicate information plainly, words or phrases such as “making love” or “having sex”

Hands-on Activity: 20 minutes

- Put students into small groups
- Explain that this exercise is to increase their ease in talking about sexuality.
- Instructions:
 - I will say a sexual word and as soon as it is given, each group is to brainstorm and write down all the synonyms for that word, using any or all of the four languages (Scientific, Childhood, Street/Slang, Common)
 - Have each group choose one person to be the recorder (the person who writes the words down as quickly as they can)
 - When I call “time” students are to stop. The goal is to generate the longest list.
- Each group needs some sheets of paper and a writing utensil.
- Give out the first word – after two minutes call “time” – have each group count up the amount of words they have – the group with the most words reads their list off as the teacher writes them up on the white board under the designated type of Language – have the other groups add any of the words they did not have on their paper – repeat until get through all of the words
- Words:
 - Penis
 - Vagina
 - Masturbation
 - Vaginal Sex
 - Oral Sex
 - Anal Sex
 - Breasts
 - Menstruation
 - Testicles
 - Girlfriend/Boyfriend

- Discuss the following:
 - How did you feel when we first started this activity?
 - What happened to your feelings of comfort level as the exercise progressed?
 - Which words were difficult to say or hear? What made it difficult?
 - How did you feel about saying or hearing the words from people of your same gender? Opposite gender?
 - What differences did you notice in words for female and males? Do certain types of words have a more negative or positive association?
 - What kinds of words are you most comfortable with/least comfortable with?
- Words have different meanings for different people. Some feel that street language is totally negative, while others use that language in loving ways in the context of their relationship.
- Discuss the following:
 - What problems might occur if you and your parents/guardians had different styles of communication specific to sex?
 - What problems might occur if someone and their sexual partner have different styles?
 - What are the benefits for people who are able to talk about sexuality in an open manner?

Closure: 10 minutes

- As a class mutually agree on the type of language that is the most respectful to use and agree to use in the classroom.

Assessment:

Ticket out the door:

Students are to write down what type of language they feel most comfortable using with their parents/guardians, health care person, friends, and hypothetical sexual partner.

Home & Family Involvement:

Encourage students to go home and talk with their parents/guardians on what type of language is appropriate and respectful to use with them.

Resources:

Madsen, N., Danzeisen, A., & Johnsen, J. (2006) *Educator's Guide to Reproductive Health*. Minneapolis/St. Paul, MN.

Health Education Standard & Performance Indicators:

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

2.12.1. Analyze how family influences the health of individuals.

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 impact personal health practice and behaviors.

2.12.5. Evaluate the effect of media on personal and family health.

2.12.7. Analyze how the perceptions of norms influence healthy and unhealthy behaviors.

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

4.12.1. Utilize skills for communicating effectively with family, peers, and others to enhance health.

4.12.3. Demonstrate strategies to prevent manage or resolve interpersonal conflicts without harming self or others.

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

7.12.1. Analyze the role of individual responsibility in enhancing health.

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

8.12.1. Utilize accurate peer and societal norms to formulate a health-enhancing message.

8.12.4. Adapt health messages and communication techniques to a specific target audience.

“Mixed Messages”

Goal: Students will learn about the different messages that the media, family, friends, and other societal groups portray about human sexuality and healthy relationships.

Behavioral Objectives:

Students will be able to identify at least three messages that are portrayed from the media.
Students will be able to identify at least three messages that are portrayed from their parents/guardians.

Students will be able to identify at least three messages that are portrayed from their friends.

Students will be able to identify at least three messages that are portrayed from other societal groups.

Time: 50 minutes

Integration: Communication Skills, Chemistry

Materials:

Paper
Writing Utensil
Whiteboard
Whiteboard Markers
Large Glass Bowl
1 gallon Whole Milk
1 package of 4 different colored food-coloring bottles
Bottle of Dawn Dish Soap
Media Influence Powerpoint

Vocabulary:

Sex Appeal – immediate appeal or obvious potential to interest or excite others, as by appearance, style, or charm

Procedure:

Hook: 15 minutes

- Show the Media Influence Powerpoint
 - What types of messages do all of these groups send?

Awareness building: 10 minutes

- What is the goal of advertising?
- Why is the sexual appeal used so much?
- Does sexual appeal really enhance sales?
- What does this sexual appeal do to teenagers?

Hands-on Activity: 20 minutes

- Bowl of Milk Activity
 - In the large glass bowl pour the gallon of whole milk
 - Explain to the class that the bowl represents a teenage body and the milk represents a teenage brain
 - Ask the students to identify the messages that the Media/TV/Magazines – Parents – Friends – Other Social Groups (Church, Teams)
 - Take 1 color of the food coloring (BLUE) and using only that color to represent Media, have students list off the messages that they receive from the media regarding sexual behavior (ie. Just do it, don't get caught, it feels good, etc.)
 - For each message drop 1 drop of blue food coloring into the bowl of milk.
 - Then take a different color (RED) and ask the students to identify what their parents/guardians/family say about sexual behavior (ie. I will kill you, please be careful, don't get pregnant) and drop 1 drop of red food coloring into the bowl for each message.
 - Take another color to represent Friends and then also Other social groups (church)
 - When done the bowl of milk will be full of colorful and “mixed” up drops.
 - Ask the students to describe what they see in the bowl of milk. Ask the students to identify: How is this milk with the multiple colors like your brain, regarding all the messages you receive daily regarding sexual behavior?
 - Final Step: Take the Dawn Dish Soap and tell the students that this represents HORMONES. Squeeze the Dawn in the middle of the milk.
 - Ask the students: What part does our hormones play in our ability to make safe, legal, healthy and responsible sexual decisions? What happened to the milk?
- Discuss how difficult it can be to make healthy decisions when you have hormones, physical desires, sexual drive and multiple influences in your life that give you multiple mixed messages.

Closure: 5 minutes

- Share with the class that one of the purposes of the sexuality unit is to help teens sort out these messages, which may help enable you to make healthy, safe, legal and responsible choices today and in the future.

Assessment:

Ticket out the door:

Students will write down at least three messages that are portrayed from the media.

Students will write down at least three messages that are portrayed from their parents/guardians.

Students will write down at least three messages that are portrayed from their friends.

Students will write down at least three messages that are portrayed from other societal groups.

Home & Family Involvement:

Encourage students to go home and discuss with their parents/guardians the different messages they hear and see from the media and how that is the same or different with the messages their parents/guardians tell or show them.

Resources:

Tackmann, D. (2006). *Outrageous Teaching Techniques in Health Education*. Eau Claire, WI.

Health Education Standard & Performance Indicators:

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

- 2.12.1. Analyze how family influences the health of individuals.
- 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.
- 2.12.5. Evaluate the effect of media on personal and family health.
- 2.12.7. Analyze how the perceptions of norms influence healthy and unhealthy behaviors.

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

- 4.12.1. Utilize skills for communicating effectively with family, peers, and others to enhance health.

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

- 8.12.1. Utilize accurate peer and societal norms to formulate a health-enhancing message.

“Reproductive Health”

Goal: Students will be able to identify all major reproductive organs of the male and female body systems.

Behavioral Objectives:

Students will be able to name at least 3 female reproductive organs and say what they do.
Students will be able to name at least 3 male reproductive organs and say what they do.

Time: 50 minutes

Integration: Biology, Art

Materials:

Writing Utensil
Male and Female Silhouettes Worksheets
Large Human Body Cut Outs or Drawn on Whiteboard
Pieces of Paper with various Reproductive Parts on them (5 sets of each)
Male and Female Silhouettes Transparencies
Reproductive Vocabulary Challenge Transparency and Worksheets
Overhead Projector

Vocabulary:

Testes – organ that produces sperm and testosterone
Testosterone – male hormones
Fetus – last 7 months of prenatal development
Semen – fluid ejaculated from the penis
Fertilization – sperm cells join egg cell
Erection – when the penis becomes engorged with blood and hardens
Egg Cells – cells produced in the ovaries
Ejaculation – when the semen leaves the penis
Puberty – begins about 12-13 years of age
Embryo – first 2 months of development in the uterus
Estrogen – a hormone produced in the ovaries
Clitoris – female erectile tissues between the labia
Sperm Cells – cells produced in the testes
Placenta – organ that nourishes the fetus
Prostate Gland – adds a chemical fluid to the semen
Cowpers Glands – internal male reproductive organs that secrete a clear, lubricating fluid in to the urethra
Scrotum – sac that regulates the temperature of the testes

Urinary Bladder – a distensible, muscular and membranous sac, in which the urine is retained until it is discharged from the body

Breasts – the outer, front part of the thorax, or the front part of the body from the neck to the abdomen

Epididymus – stores immature sperm cells

Urethra – the canal through which urine from the bladder leaves the body; in the male also brings semen out of the body through the penis

Vas Deferens – two tubes that carries sperm from the epididymus into the urethra

Penis – external male sexual organ through which sperm leave the body

Seminal Vesicle – adds a sugary fluid to semen

Foreskin – the loose fold of skin that covers the glands of the penis

Ovum – female gamete (egg cell)

Vagina – hollow, muscular passage leading from the uterus to the outside of the body; female organ of intercourse; birth canal

Ovary – gland that produces the egg cells and hormones

Labia – folds of skin outside the vagina

Fallopian Tube – pair of canals that transport ova from the ovaries to the uterus; where fertilization takes place

Uterus – house fetus during pregnancy

Endometrium – mucous membrane lining the uterus

Cervix – entrance to the uterus; narrow, lower end of the uterus that opens into the vagina

Hymen – a fold of mucous membrane partly closing the external orifice of the vagina in a virgin

Procedure:

Hook: 10 minutes

- Give students Reproductive Vocabulary Challenge Worksheet to fill out as much as they can.

Awareness building: 15 minutes

- Put students into groups of 3-4
- Give each group a set of Reproductive Organs
- Each sheet of paper has a different reproductive organ on it (Male, Female, Both)
- Have each group make a pile that are Male Reproductive Organs, Female Reproductive Organs and Both
- After students are done have them tape their organ to the designated Large Human Body or in the Middle if it is for both sexes
- After all groups have done this – discuss the various reproductive organs and make sure they are all in the right spot

Hands-on Activity: 20 minutes

- Give each student a male and female silhouette worksheet
- Have students draw the various reproductive organs on the silhouettes in the correct place the organ is supposed to go and the correct size – have them do as many as they know

- After students are completed put the transparency silhouette up and go through it with the class drawing and explaining as you go along.
- Do the Male and Female Silhouettes
- Discuss what goes on inside each body.

Closure: 5 minutes

- Have students finish their Reproductive Vocabulary Challenge with the information that they have learned.

Assessment:

Assignment:

Students will take their Silhouettes and write down at least 3 reproductive organs for the male and female and write down what each of those organs do within the body and the role that organ plays during reproduction.

Home & Family Involvement:

Encourage students to go home and teach to their parents/guardians the different reproductive organs and how they work.

Resources:

Tackmann, D. (2006). *Outrageous Teaching Techniques in Health Education*. Eau Claire, WI.

Nottingham, S., & Crave, A. (2008). *The King and Queen of Puberty*. Michigan. The Health Connection, Inc.

Health Education Standard & Performance Indicators:

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

1.12.1. Predict how healthy behaviors can affect health status.

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

3.12.2 Use resources from home, school and community that provide valid health information.

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

4.12.1. Utilize skills for communicating effectively with family, peers, and others to enhance health.

“Reproduction Production”

Goal: Students will be able to identify all major reproductive organs of the male and female body systems and explain the pathway of the sperm and ova through the reproduction.

Behavioral Objectives:

Students will be able to list the steps it takes for the sperm and the ova to get through reproduction.

Time: 50 minutes

Integration: Biology, Drama, Peer cooperation, Library

Materials:

1 envelope with pieces of paper with the female reproductive organs
1 envelope with pieces of paper with the male reproductive organs
Bucket to put slips of paper in
Research materials for students to use (texts, library, internet, brochures)

Vocabulary:

Testes – organ that produces sperm and testosterone
Sperm – male gamete produced by the testes and transported outside the body through ejaculation
Prostate Gland – adds a chemical fluid to the semen
Cowpers Glands – internal male reproductive organs that secrete a clear, lubricating fluid in to the urethra
Scrotum – sac that regulates the temperature of the testes
Urinary Bladder – a distensible, muscular and membranous sac, in which the urine is retained until it is discharged from the body
Epididymus – stores immature sperm cells
Urethra – the canal through which urine from the bladder leaves the body; in the male also brings semen out of the body through the penis
Vas Deferens – two tubes that carries sperm from the epididymus into the urethra
Penis – external male sexual organ through which sperm leave the body
Seminal Vesicle – adds a sugary fluid to semen
Foreskin – the loose fold of skin that covers the glands of the penis
Ovum – female gamete (egg cell)
Vagina – hollow, muscular passage leading from the uterus to the outside of the body; female organ of intercourse; birth canal
Ovary – gland that produces the egg cells and hormones
Labia – folds of skin outside the vagina

Fallopian Tubes – pair of canals that transport ova from the ovaries to the uterus; where fertilization takes place

Uterus – house fetus during pregnancy

Endometrium – mucous membrane lining the uterus

Cervix – entrance to the uterus; narrow, lower end of the uterus that opens into the vagina

Hymen – a fold of mucous membrane partly closing the external orifice of the vagina in a virgin

Procedure:

Hook: 5 minutes

- Explain to students that they are going to become experts of the male/female reproductive organs.

Awareness Building: 10 minutes

- Put students into 2 groups.
- Group 1 will get the Female Reproductive organs and Group 2 will get the Male Reproductive organs.
- Tell the class that they are going to be researchers today.
- Each student will get 1 reproductive organ and they are to become an expert on that organ knowing its size, function and relationship with the other reproductive organs in the same system.
- As a group they will perform a “play” without notes, explaining dramatically what their organ does during the process of reproduction.
- The performance must be accurate and creative.
- Students will be evaluated on their ability to work in a group and accurately “teach” the sequential pathway that the sperm or ova takes throughout the reproductive system.
- While one group is performing the other group must be paying attention and asking questions in the effort to try to stump the group performing. If a valid question is asked and it stumps the person performing the person who asked the question gets an extra credit point and if the person can answer the question they get an extra credit point.

Hands-on Activity: 30 minutes

- Go around with the Female Reproductive organs in a bucket for each member on Group 1 to pick out one. Then do the same for the Male Reproductive organs and Group 2.
- Have students go research their reproductive organ (text, library, brochures, internet).
- They only have 30 minutes to get all the research they need and to put it together as a group.

Closure: 5 minutes

- Inform students that they will be performing their “plays” at the beginning of the next lesson.

- If the students need more time to put their “play” together they can have the first 10 minutes of the next lesson to finish.

Assessment:

This assessment will come with the next lesson when the students perform their “play.”

Home & Family Involvement:

Encourage students to go home and teach to their parents/guardians the different reproductive organs and how they work.

Resources:

Tackmann, D. (2006). *Outrageous Teaching Techniques in Health Education*. Eau Claire, WI.

Health Education Standard & Performance Indicators:

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

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

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

3.12.2 Use resources from home, school and community that provide valid health information.

3.12.5. Access valid and reliable health products and services.

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

4.12.1. Utilize skills for communicating effectively with family, peers, and others to enhance health.

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

7.12.1. Analyze the role of individual responsibility in enhancing health.

“Reproduction Production Take 2”

Goal: Students will be able to identify all major reproductive organs of the male and female body systems and explain the pathway of the sperm and ova through the reproduction.

Behavioral Objectives:

Students will be able to list the steps it takes for the sperm and the ova to get through reproduction.

Time: 50 minutes

Integration: Biology, Drama, Peer cooperation

Materials:

Research materials for students to use (texts, library, internet, brochures)

2 Beach Balls

2 Tennis Balls

1 Basketball Hat

2 Golf Balls

2 Markers/Pencils

2 Dixie cups

Red jacket

1 Basketball

Tissue

Vocabulary:

Testes – organ that produces sperm and testosterone

Sperm – male gamete produced by the testes and transported outside the body through ejaculation

Prostate Gland – adds a chemical fluid to the semen

Cowpers Glands – internal male reproductive organs that secrete a clear, lubricating fluid in to the urethra

Scrotum – sac that regulates the temperature of the testes

Urinary Bladder – a distensible, muscular and membranous sac, in which the urine is retained until it is discharged from the body

Epididymus – stores immature sperm cells

Urethra – the canal through which urine from the bladder leaves the body; in the male also brings semen out of the body through the penis

Vas Deferens – two tubes that carries sperm from the epididymus into the urethra

Penis – external male sexual organ through which sperm leave the body

Seminal Vesicle – adds a sugary fluid to semen

Foreskin – the loose fold of skin that covers the glands of the penis

Ovum – female gamete (egg cell)

Vagina – hollow, muscular passage leading from the uterus to the outside of the body; female organ of intercourse; birth canal

Ovary – gland that produces the egg cells and hormones

Labia – folds of skin outside the vagina

Fallopian Tubes – pair of canals that transport ova from the ovaries to the uterus; where fertilization takes place

Uterus – house fetus during pregnancy

Endometrium – mucous membrane lining the uterus

Cervix – entrance to the uterus; narrow, lower end of the uterus that opens into the vagina

Hymen – a fold of mucous membrane partly closing the external orifice of the vagina in a virgin

Procedure:

Hook: 5 minutes

- If students need extra time to get final touches on their “play”

Awareness Building: 20 minutes

- Students present their “play” of the reproductive systems.

Hands-on Activity: 20 minutes

- Teacher does “Beach Balls and Tennis Balls” presentation to show students the reproductive system
- Teacher explains the reproductive system of the male and female using own body and the materials listed above.
- Male: Teacher stands in front of the class and says, “I am the male reproductive system.” The following props would be in place:
 - Hold 2 beach balls in hands down at sides
 - Place 2 tennis balls with tape to shoulders
 - The basketball or large round hat is on your head
 - Tape the 2 golf balls to your knees
 - The markers are the sperm that travel through the system
- Explain the Male reproductive system with the props starting with the testicles:
 - Testicles: 2 beach balls
 - Sperm: Markers/pencils that come from the testicle and up the arms (vas deferens)
 - Epididymus: hands holding the back of the beach balls
 - Vas Deferens: Arms
 - Seminal Vesicle: Tennis balls taped to your shoulders
 - Prostate: Head
 - Urinary Bladder: Hat on your head/ basketball on your head
 - Cowpers Gland: Golf balls on knees
 - Penis: Legs
 - Urethra: Between legs

- Female: Teacher would stand in front of the class and say, “I am the female reproductive system.” The following props would be in place:
 - Hold 2 cups with one tennis ball in each cup
 - Hold arms extended out to sides.
 - Pop a tennis ball out of the cup and down the arm to show ovulation.
 - Put on red coat and take it off to show menstruation of the Endometrium.
 - The basketball can be placed in front of your stomach to show the urinary bladder
 - The tissue between your knees is the hymen (which some girls have and some do not)
- Explain the female reproductive system with the following props starting with the ovary (cups)
 - Ovary: cups
 - Ova: tennis balls
 - Fallopian Tubes: arms
 - Uterus: trunk of body
 - Endometrium: red jacket
 - Urinary Bladder: basketball
 - Cervix: knees
 - Hymen: tissue between knees
 - Vagina: legs
 - Labia: feet

Closure: 5 minutes

- Students will write down at least 2 reproduction organs that they learned about and whether it is a female or male reproductive organ and at least one function that organ plays in reproduction.

Assessment:

Assessment is done on student’s performance and expertise of their specific reproduction organ during their presentation.

Home & Family Involvement:

Encourage students to go home and teach to their parents/guardians the different reproductive organs and how they work.

Resources:

Tackmann, D. (2006). *Outrageous Teaching Techniques in Health Education*. Eau Claire, WI.

Health Education Standard & Performance Indicators:

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

1.12.9. Analyze the potential severity of injury or illness if engaging in unhealthy

behaviors.

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3.12.2 Use resources from home, school and community that provide valid health information.

3.12.5. Access valid and reliable health products and services.

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

4.12.1. Utilize skills for communicating effectively with family, peers, and others to enhance health.

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

7.12.1. Analyze the role of individual responsibility in enhancing health.

“Sexual Behavior – Consequences”

Goal: Students will be able to identify the risks if they chose to be sexually active and will understand the role peer pressure plays when making choices about sexual and other lifestyle decisions.

Behavioral Objectives:

Students will be able to identify the amount of sperm that are ejaculated during one ejaculation.

Students will be able to identify at least 3 consequences that could result in being sexually active.

Time: 50 minutes

Integration: Math

Materials:

Cup of Rice

A 5 pound bag of rice

40 pounds of rice

CD Player

Soft romantic music

Scented candles and matches

One dice for each student (total of 20-30)

One plastic cup for each student (total of 20-30)

Piece of Paper for each student

Writing utensil for each student

Vocabulary:

Abstinence – not engaging in any sexual activity that may result in becoming pregnant, getting someone pregnant, or spreading or contracting an STI or HIV OR abstaining from oral, anal, and vaginal intercourse.

Sexually Transmitted Disease (STD) – a disease caused by pathogens that are transmitted from an infected person to an uninfected person during intimate sexual contact

Contraceptives – a device, drug, form of preventing pregnancy

Procedure:

Hook: 10 minutes

- Have students guess how many sperm are ejaculated in one ejaculation.
- Have students guess how many pebbles of rice are in a 5 pound bag of rice.
- Demonstration of “How much rice do I really need?”

- Demonstrating the amount of rice that is equivalent to the amount of sperm that is ejaculated through one ejaculation.
- 1 cup of Rice = 2,500 sperm
- 5 pound bag of rice = 125,000 sperm
- 40 pounds of rice = 1,000,000 sperm
- 28,000 pounds of rice = 700,000,000 sperm
- 5,600 X 5 pound bag of rice = 700,000,000
- Discuss how easy it would be to get pregnant if not using any contraceptives with this amount of sperm.

Awareness Building: 15 minutes

- The “250,000 Question” Demonstration/Activity
 - Have students close their eyes and sit quietly at their desk. This is a mental imagery activity.
 - Shut the lights off and light the scented candles.
 - Say to students: I want you to imagine that you are asked to house sit my beautiful house on the riverfront for a weekend. As I leave the driveway, you decide to call your significant other of whom you really, really like being with. Image what they look like, smell like, and how they make you feel when you are with them (all warm and fuzzy inside). Your significant other arrives at the house and the two of you are alone. You sit on the couch and turn on soft music to create the mood (turn on the soft romantic music). A small, warm fire has been started in the fireplace and snow is softly falling outside. Life is good; you are feeling great. As the two of you snuggle closer on the couch, your emotions start to churn. You are feeling absolutely wonderful and the two of you kiss and hug and touch. As the snow continues to fall and the fire sparkle and the music create a mood, the two of you continue with your touching and kissing and pretty soon the clothes start to come off. First the shoes, then the shirt and pants. As you continue to touch and get excited, a small voice comes in your head and it says to you: “We didn’t talk about birth control or protection? I don’t have anything to use and I don’t know if they do. I don’t want a pregnancy or a disease!” And then another small voices say: “Shut up!! Nothing will happen!! Nothing ever happens on the first time! Besides it feels so right! You can’t stop anyway!” So you continue to touch and feel and kiss. Again the two voices enter your mind: “We don’t have any birth control! What if I get pregnant or and STD?” “Shut up, you will be fine, it is the first time, nothing bad can happen.” Again you turn them off. Just as you and your partner get to that “magic moment” just before intercourse: KNOCK, KNOCK, KNOCK (Knock on the door). I enter the house because I had to come back and get my Credit Card that I forgot. I walk downstairs and see you and your significant other naked on the

floor!! I offer you both \$250,000 each, no strings attached, if you would get up and put your clothes on!!

- Ask the students to raise their hand if they could put their clothes on for \$250,000?
- Why did I use the amount of \$250,000?
 - It is the cost of an infant born today through college.
 - The cost of medical treatment if you are HIV+.
- Discuss the fact that sexual behavior IS controllable and you can stop at anytime!
- Discuss what the contributing factors were that lead to the possibility of this unhealthy and risky sexual behavior (being alone, romantic music, candles)

Hands-on Activity: 20 minutes

- Making a Plan: ABC's
 - Discuss with students why making plans are important (not just in the context of sex, but planning to go somewhere, do something, take care of something, etc.)
 - Ask students to name something that they did today or yesterday that required some planning (getting up for school on time, eating breakfast, when and where to meet friends).
 - Discuss Health and Safety plans: meeting place if someone gets separated from the group, fire escape plan, workout plan.
 - Ask why anyone would make a plan? Stress health, safety, and personal beliefs during the discussion.
 - Transition into discussing the importance of having a plan for sexual health. Ask why it would be important to have a plan? (Don't get pregnant, don't go farther than you want to, don't get an STI)
 - Put up the letters ABC on the whiteboard vertically.
 - Ask the students what A means: Abstinence: Tell students that 99.99% of the population will stop practicing abstinence at some point in their lives, so everyone should have a back up plan for when they decide to stop practicing abstinence.
 - Ask what B means: Birth Control, Plan B (bring Plan B up if it is not brought up by the students – emergency contraception brand name).
 - Tell students that no form of birth control is 100% effective for getting pregnant! Ask what Plan C is if birth control fails: Choice: Pro-Choice vs. Pro-life – Pro-choice is a person supporting the decision to choose parenting, adoption or abortion; Pro-life is a person supporting the decision to choose parenting or adoption.
 - Have students think back to the opening activity with their significant other.
 - Discussion Questions for the Movie:
 - Did you have a plan with your significant other?
 - Were they prepared to prevent pregnancy and STIs? Why or why not?

- Was there a lack of communication between the teens? What questions should they decide they should talk to one another about before engaging in vaginal sex?
- Do you think many teens make a “heat-of-the-moment” or “on-the-spot” decision to have sex rather than discussing the decision and thinking about consequences of the decision beforehand?
- What might have happened if I did not show up?
- What are the benefits of having a plan for your sexual health before putting yourself into a sexual situation?

Closure: 5 minutes

Have students write down at least 2 benefits of having a plan for their own sexual health.

Assessment:

The ticket out the door will provide assessment to the knowledge students gained during this lesson.

Home & Family Involvement:

Encourage students to go home and teach to their parents/guardians about the different risks involved in sexual behavior.

Resources:

- Tackmann, D. (2006). *Outrageous Teaching Techniques in Health Education*. Eau Claire, WI.
- Madsen, N., Danzeisen, A., & Johnsen, J. (2006) *Educator’s Guide to Reproductive Health*. Minneapolis/St. Paul, MN.

Health Education Standard & Performance Indicators:

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

- 1.12.1. Predict how healthy behaviors can affect health status.
- 1.12.5. Propose ways to reduce or prevent injuries and health problems.
- 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.

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

- 2.12.3. Analyze how peers influence healthy and unhealthy behaviors.
- 2.12.8. Analyze the influence of personal values and beliefs on individual health practices and behaviors.
- 2.12.9. Analyze how some health risk behaviors can influence the likelihood of engaging in unhealthy behaviors.

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

- 5.12.1 Examine barriers that can hinder healthy decision-making.
- 5.12.3. Justify when individual or collaborative decision-making is appropriate.

“Abstinence”

Goal: Students will be able to identify what abstinence is and what it means to them.

Behavioral Objectives:

Students will be able to identify what abstinence means to them and what is ok and not ok for them.

Time: 50 minutes

Integration:

Materials:

Whiteboard

Whiteboard Markers

Overhead

Abstinent... Yes? No? Maybe? Worksheet (20-30 total)

Abstinent... Yes? No? Maybe? Transparency

Abstinence Information Transparency (Tackmann, 31)

Vocabulary:

Abstinence – not engaging in any sexual activity that may result in becoming pregnant, getting someone pregnant, or spreading or contracting an STI or HIV OR abstaining from oral, anal, and vaginal intercourse.

Virginity – state of not having sexual intercourse

Procedure:

Hook: 10 minutes

- Give statistics of pregnancy and sexually transmitted infections that accompany early initiation of sexual intercourse.
- Ask students what is 100% effective of not getting pregnant or STIs: Abstinence.
- Ask students to define abstinence. Choose 1 definition to use as a class.
- Ask students if anyone can be abstinent? What about someone who has already had sexual intercourse?

Awareness Building: 15 minutes

- Put up the Abstinence Information Transparency
- Have students draw a T chart in their notebook
- Draw a T chart on the whiteboard
- Have students write down the Pros and Cons on their T chart of choosing abstinence or of not choosing abstinence.
- Have students share what they wrote and put their answers on the board.

- Discuss the answers given.

Hands-on Activity: 20 minutes

- Hand out the Abstinent... Yes? No? Maybe? Worksheet to the students and ask them to fill it out, do not have them put their name on it.
- Collect the worksheets and put students into 4 groups.
- While students are getting into groups tally up the answers from the worksheet and put the answers on the transparency copy.
- Ask the students which of the questions were the easiest to make decisions about? The hardest?
- Why might someone have voted “maybe” and not been able to clearly decide if the behavior was yes or no?
- Give each group one of the following questions to discuss:
 - How do you think teens, in general, feel about abstinence as an option? What could happen if two people in a relationship have different definitions of what abstinence means to them?
 - How could you define virginity? How is virginity different from abstinence? Can you practice abstinence in a relationship if you are not a virgin?
 - Which of the behaviors on the worksheet could be most risky to a person’s health? Does a behavior’s risk impact whether or not we should define it as abstinent? Do you think sexual abstinence is the best method to prevent pregnancy and STIs/HIV?
 - List the advantages of a relationship that includes forms of sexual expression but does not include vaginal, oral, or anal intercourse.
- Have groups report back to the large group of what they discussed.

Closure: 5 minutes

- Remind students the importance of defining abstinence for themselves so that they understand their decisions, and can make their boundaries clear to a partner.
- Write the following sentence on the board or overhead: “For me abstinence means it’s ok to _____ and it’s not ok to _____.”
- Have students copy the sentence down and fill in the blanks privately.

Assessment:

Assessment comes through the discussions.

Home & Family Involvement:

Encourage students to share their sentence with their significant other if they have one.

Resources:

- Tackmann, D. (2006). *Outrageous Teaching Techniques in Health Education*. Eau Claire, WI.
- Madsen, N., Danzeisen, A., & Johnsen, J. (2006) *Educator’s Guide to Reproductive Health*. Minneapolis/St. Paul, MN.

Health Education Standard & Performance Indicators:

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

- 1.12.5. Propose ways to reduce or prevent injuries and health problems.
- 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.

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

- 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.
- 2.12.7. 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.

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

- 4.12.1. Utilize skills for communicating effectively with family, peers, and others to enhance health.

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

- 5.12.1. Examine barriers that can hinder healthy decision-making.
- 5.12.2. Determine the value of applying a thoughtful decision-making process in health related situations.
- 5.12.3. Justify when individual or collaborative decision-making is appropriate.
- 5.12.5. Predict the potential short and long-term impact of each alternative on self and others.
- 5.12.6. Defend the healthy choice when making decisions.

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

- 6.12.2. Develop a plan to attain a personal health goal that addresses strengths, needs, and risks.
- 6.12.4. Formulate an effective long-term personal health plan.

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

- 7.12.1. Analyze the role of individual responsibility in enhancing health.
- 7.12.2. Demonstrate a variety of healthy practices and behaviors that will maintain or improve the health of self and others.

“Contraceptives”

Goal: Students will enhance their knowledge of the types and effectiveness of current contraceptives.

Behavioral Objectives:

Students will be able to name at least 3 different types of contraceptives and their effectiveness.

Time: 50 minutes

Integration: Math

Materials:

Projector

15 Re-sealable plastic bags numbered 1-15 in order of effectiveness

1 bag of white navy beans (2 cups)

1 bag of red beans (1 cup)

15 envelopes, each with 15 pieces of paper in them with one type of contraceptive method on each piece.

Birth Control Methods Transparency (Tackmann, 27)

20-30 Abstinence vs. Contraception Worksheet (Tackmann, 28)

20-30 Contraception Method Guided Notes (Tackmann, 29)

Condom

Banana

Models of various contraceptive methods – if available otherwise use pictures

Contraceptive Lecture Powerpoint

Vocabulary:

Abstinence – not engaging in any sexual activity that may result in becoming pregnant, getting someone pregnant, or spreading or contracting an STI or HIV OR abstaining from oral, anal, and vaginal intercourse.

Lunelle – an injection containing the synthetic hormones estrogen and progestin

NuvaRing – a monthly birth-control option in the shape of a ring that is inserted into the vagina and left there for up to 3 weeks

Contraceptive Patch – like a square band-aid, is applied to the abdomen, buttocks, upper arm, or upper torso; is changed each week for a schedule of 3 weeks on and 1 week off; works by slowly releasing a combination of estrogen and progestin hormones through the skin. These hormones prevent ovulation and thicken the cervical mucus, creating a barrier to prevent sperm from entering the uterus.

Sterilization – a surgical procedure to end a person’s reproductive capability

Norplant – made up of six tiny silicone rods that contain progestin; these rods are implanted under the skin of your upper arm where they are left for as long as five years.

The implant procedure can be done in the doctor’s office and takes about 10 minutes

Depo-Provera – is a hormone injection that lasts for 3 months to prevent pregnancy

The Pill – a daily pill that contains hormones to change the way the body works and prevents pregnancy

Intrauterine Device (IUD) – a device inserted into the uterus through the cervix to prevent pregnancy by interfering with implantation

Condom – a latex sheath worn over the penis during sexual acts to prevent conception and/or the transmission of disease; some condoms contain a spermicidal lubricant

Diaphragm/Cervical Cap – bowl-like rubber cup with a flexible rim that is inserted into the vagina to cover the cervix and prevent the passage of sperm into the uterus during sexual intercourse; used with a spermicidal foam or jelly, it serves as both a chemical and physical barrier to sperm

Spermicidal Foams/Jellies – contains chemicals that stop sperm from moving

Natural Family Planning – a method used to help a couple determine when sexual intercourse can and cannot result in pregnancy

Withdrawal – a guy removes his penis from the vagina just before he ejaculates

Barrier Methods – birth-control devices that block the meeting of egg and sperm, either by physical barriers, such as condoms, diaphragms, or cervical caps, or by chemical barriers, such as spermicide, or both

Hormonal Methods – birth-control methods that act on the hormonal system

Permanent Methods – birth-control methods that are surgical procedures

Procedure:

Hook: 5 minutes

- Have students brainstorm all the birth control methods they know and list them on the board.
- Ask students which birth control method is the most effective: Abstinence.

Hands-on Activity: 15 minutes

- “Bag of Beans” Activity
 - Give one bag per 1-2 students.
 - Hand out each pair an envelope with the 15 contraceptive methods on 15 slips of paper.
 - Have students put these 15 methods in order of effectiveness.
 - Have students fill out the Abstinence vs. Contraception worksheet with the answers they choose.
 - Have each student open the bag and with closed eyes draw out 6 beans.
 - Inform that students that the bags they have represents the 15 contraceptive methods. Have them look at the beans they drew out, if they have a white bean this means that they are pregnant or got someone pregnant!
 - The white beans represent pregnancy and the red beans represent non-pregnancy.

- Have students discuss with their classmates of which bag is what contraceptive method.
- Have students lay the bags in order 1-15. Using the one of the envelopes with the contraceptive methods in it, have students figure out which contraceptive method goes with which bag based on effectiveness.
- Put Birth Control Methods Transparency up.
- Discuss what the students thought and the order that it is (condoms in particular will probably be different than what students think).
- Have students go back to their Abstinence vs. Contraception worksheet and fill in the correct order on the right side of the sheet.

Awareness Building: 20 minutes

- Teacher gives a lecture on the various contraception methods: how they are used and the effectiveness and failure rate of each.
- Use Contraception Lecture Powerpoint
- Have students use their guided notes to fill in the information about the various types of contraceptives.

Closure: 10 minutes

- Discuss the fact that if someone chooses to be sexually active they need to find the contraceptive that works for them.
- Ask the students who they should discuss with to figure out which contraceptive is right for them: Physician, Partner, Parents maybe, other health professionals.
- Ticket out the Door: Have students write down at least 3 types of contraceptives and the effectiveness of the contraceptives.

Assessment:

The ticket out the door will assess the student's knowledge of the lesson.

Home & Family Involvement:

Encourage students to go home and talk to their parents/guardians about what type of contraceptive they use or have used in the past.

Resources:

Tackmann, D. (2006). *Outrageous Teaching Techniques in Health Education*. Eau Claire, WI.

Madsen, N., Danzeisen, A., & Johnsen, J. (2006) *Educator's Guide to Reproductive Health*. Minneapolis/St. Paul, MN.

Nemours (2009). Birth Control. Retrieved May 5, 2009 from http://kidshealth.org/teen/sexual_health/

Health Education Standard & Performance Indicators:

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- 1.12.5. Propose ways to reduce or prevent injuries and health problems.
- 1.12.7. Compare and contrast the benefits of and barriers to practicing a variety of

healthy behaviors.

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

2.12.6. Evaluate the impact of technology on personal, family and community health.

2.12.8. Analyze the influence of personal values and beliefs on individual health practices and behaviors.

2.12.10. Analyze how public health policies and government regulations can influence health promotion and disease prevention.

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

5.12.1. Examine barriers that can hinder healthy decision-making.

5.12.3. Justify when individual or collaborative decisions making is appropriate.

5.12.4. Generate alternative to health-related issues or problems.

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

“STDs/STIs”

Goal: Students will enhance their knowledge of the different sexually transmitted infections (STIs).

Behavioral Objectives:

Students will be able to name, give symptoms, treatment and transmission of at least 2 sexually transmitted infections (STIs).

Time: 50 minutes

Integration: Research, Library, Collaboration, and Statistics

Materials:

Library

Other research materials for students to use (brochures, text, internet)

20-30 “Get the Facts Research a Sexually Transmitted Disease” Worksheet
(HealthTeacher.com)

20-30 “What do you know about STDs?” Quiz/Worksheet

20-30 “STDs/STIs: What you don’t know WILL hurt you!” Guided Notes (Tackmann,
38-39: Revise)

Vocabulary:

Sexually Transmitted Infections (STIs) – any of a number of diseases that are acquired through sexual contact

Pubic Lice – often called “crabs” because of their crab-like appearance under a microscope; are six-legged creatures that most commonly infest hair in the pubic area, although they also can infest other body hair; most cases, pubic lice are transmitted sexually from the pubic hair of one person to another

Vaginitis – an irritation or infection of the vulva leading to vulvovaginitis, common symptoms are: itching or burning and maybe a discharge

Human Papilloma-virus (Genital Warts) – a pathogen that causes genital warts and increases the risk of cervical cancer

Hepatitis – an inflammation and/or infection of the liver caused by a virus, often accompanied by jaundice

Herpes – a condition caused by one of the herpes viruses and characterized by lesions of the skin or mucous membranes; herpes; herpes virus type 2 is sexually transmitted and causes genital blisters or sores

Acquired Immune Deficiency Virus (AIDS) – final stages of HIV infection, characterized by a variety of severe illnesses and decreased levels of certain immune cells

Syphilis – caused by the bacterium *Treponema pallidum* and characterized by early sores, a latent period, and a final period of life-threatening symptoms including brain damage and heart failure

Gonorrhea – caused by the bacterium *Neisseria gonorrhoeae*; symptoms include discharge from the penis; women are generally asymptomatic

Chlamydia – caused by bacterium *Chlamydia trachomatis*, often asymptomatic

Non-Gonococcal Urethritis (NGU) – inflammation of the urethra caused by organisms other than the gonococcus bacterium

Procedure:

Hook: 5 minutes

- Have students fill out the “What do you know about STDs?” quiz with their current knowledge.

Awareness Building: 10 minutes

- Inform students that they are going to be put into groups of 2-3 and will be given 1 type of STD/STI that they will be in charge of researching and then teaching the class about their specific STD/STI.
- Tell the students they will have 5 minutes to present their information. Be creative, don’t just lecture, get some graphics and accurate information. All group members have to be involved during the presentation.
- Choose 2 groups that will go at the end of the hour.
- Put the students into groups.
- Give each student a “Get the Facts Research a Sexually Transmitted Disease” Worksheet.
- Have each group draw out of a hat the STD/STI they will be in charge of.

Hands-on Activity: 20 minutes

- Have students go and research their STD/STI.

Closure: 15 minutes

- Check in with the students to see if they need more time.
- If they do not need more time have the 2 groups chosen at the beginning to present (5 minutes each).
- During the students’ presentation the other students need to fill out their “STD’s: What you don’t know will hurt you!” Worksheet.
- Inform students that they will be finishing presenting during the next class period.

Assessment:

Observe student’s ability to work cooperatively with peers and that each student is doing their share of work.

Full assessment will come with the presentations.

Home & Family Involvement:

Encourage students to go home and find out where they can go if they want to get treated for an STD/STI.

Resources:

- Tackmann, D. (2006). *Outrageous Teaching Techniques in Health Education*. Eau Claire, WI.
- Madsen, N., Danzeisen, A., & Johnsen, J. (2006) *Educator's Guide to Reproductive Health*. Minneapolis/St. Paul, MN.
- HealthTeacher (2009). Avoiding Sexually Transmitted Disease (STD). Retrieved May 5, 2009 from <http://www.healthteacher.com/lesson/index/74>

Health Education Standard & Performance Indicators:

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

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

1.12.8. Analyze personal susceptibility to injury, illness or death if engaging in unhealthy behaviors.

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

3.13.1. Evaluate the validity of health information, products and services.

3.12.2. use resources from home, school and community that provide valid health information.

3.12.5. Access valid and reliable health products and services.

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

4.12.1. Utilize skills for communicating effectively with family, peers, and others to enhance health.

4.12.2. Demonstrate refusal, negotiation, and collaboration skills to enhance health and avoid or reduce health risks.

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

8.12.3. Work cooperatively as an advocate for improving personal, family and community health.

8.12.4. Adapt health messages and communication techniques to a specific target audience.

“STDs/STIs Take 2”

Goal: Students will enhance their knowledge of the different sexually transmitted infections (STIs).

Behavioral Objectives:

Students will be able to name, give symptoms, treatment and transmission of at least 2 sexually transmitted infections (STIs).

Time: 50 minutes

Integration: Collaboration

Materials:

Library

Other research materials for students to use (brochures, text, internet)

20-30 “Get the Facts Research a Sexually Transmitted Disease” Worksheet
(HealthTeacher.com)

20-30 “What do you know about STDs?” Quiz/Worksheet

20-30 “STDs/STIs: What you don’t know WILL hurt you!” Guided Notes (Tackmann,
38-39: Revise)

Vocabulary:

Sexually Transmitted Infections (STIs) – any of a number of diseases that are acquired through sexual contact

Pubic Lice – often called “crabs” because of their crab-like appearance under a microscope; are six-legged creatures that most commonly infest hair in the pubic area, although they also can infest other body hair; most cases, pubic lice are transmitted sexually from the pubic hair of one person to another

Vaginitis – an irritation or infection of the vulva leading to vulvovaginitis, common symptoms are: itching or burning and maybe a discharge

Human Papilloma-virus (Genital Warts) – a pathogen that causes genital warts and increases the risk of cervical cancer

Hepatitis – an inflammation and/or infection of the liver caused by a virus, often accompanied by jaundice

Herpes – a condition caused by one of the herpes viruses and characterized by lesions of the skin or mucous membranes; herpes; herpes virus type 2 is sexually transmitted and causes genital blisters or sores

Acquired Immune Deficiency Virus (AIDS) – final stages of HIV infection, characterized by a variety of severe illnesses and decreased levels of certain immune cells

Syphilis – caused by the bacterium *Treponema pallidum* and characterized by early sores, a latent period, and a final period of life-threatening symptoms including brain damage and heart failure

Gonorrhea – caused by the bacterium *Neisseria gonorrhoeae*; symptoms include discharge from the penis; women are generally asymptomatic

Chlamydia – caused by bacterium *Chlamydia trachomatis*, often asymptomatic

Non-Gonococcal Urethritis (NGU) – inflammation of the urethra caused by organisms other than the gonococcus bacterium

Procedure:

Hook: 5 minutes

- Inform students they are going to be presenting their STD/STI.

Awareness Building/Hands-on Activity: 40 minutes

- Have the rest of the groups present their STD/STI.
- As the groups present the other students need to fill out their “STD’s: What you don’t know will hurt your!” Worksheets.

Closure: 10 minutes

- Have students re-do their “What do you know about STDs?” Quiz/Worksheet with their new knowledge.
- Go over the answers to make sure all students know the correct information.

Assessment:

Observe student’s ability to work cooperatively with peers and that each student is doing their share of work.

Full assessment will come with the presentations.

Quizzes will be handed in and graded.

Students will hand in their “STD’s: What you don’t know will hurt you!” Worksheet

Home & Family Involvement:

Encourage students to go home and find out where they can go if they want to get treated for an STD/STI.

Resources:

Tackmann, D. (2006). *Outrageous Teaching Techniques in Health Education*. Eau Claire, WI.

Madsen, N., Danzeisen, A., & Johnsen, J. (2006) *Educator’s Guide to Reproductive Health*. Minneapolis/St. Paul, MN.

HealthTeacher (2009). Avoiding Sexually Transmitted Disease (STD). Retrieved May 5, 2009 from <http://www.healthteacher.com/lesson/index/74>

Health Education Standard & Performance Indicators:

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

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

1.12.8. Analyze personal susceptibility to injury, illness or death if engaging in

unhealthy behaviors.

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

3.13.1. Evaluate the validity of health information, products and services.

3.12.2. use resources from home, school and community that provide valid health information.

3.12.5. Access valid and reliable health products and services.

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

4.12.1. Utilize skills for communicating effectively with family, peers, and others to enhance health.

4.12.2. Demonstrate refusal, negotiation, and collaboration skills to enhance health and avoid or reduce health risks.

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

8.12.3. Work cooperatively as an advocate for improving personal, family and community health.

8.12.4. Adapt health messages and communication techniques to a specific target audience.

“Love vs. Infatuation”

Goal: Students will enhance their knowledge of the difference between being in love and infatuation.

Behavioral Objectives:

Students will be able define what a loving relationship looks like and what an infatuated relationship looks like.

Time: 50 minutes

Integration:

Materials:

Overhead

Are we in LOVE? Transparency (Tackmann, 32)

Clues to Distinguish Infatuation from Love Transparency (Tackmann)

Are You in Love or Infatuated? Letter (Tackmann)

Warning Signs of an Unhealthy Relationship Transparency (Tackmann)

Love vs. Infatuation Graphic Organizer Transparency (Tackmann)

20-30 Are we in LOVE? Worksheets (Tackmann)

20-30 Clues to Distinguish Infatuation from Love Charts (Tackmann)

20-30 Are You in Love or Infatuated? Letters (Tackmann)

20-30 Love vs. Infatuation Graphic Organizer (Tackmann)

Decorate room with multiple hearts

Vocabulary:

Love – a profoundly tender, passionate affection for another person

Infatuation – to inspire or possess with a foolish or unreasoning passion

Procedure:

Hook: 10 minutes

- Have students read through: Are we in LOVE?, Infatuation from Love Charts, and the letter.
- Have students highlight the characteristics of Love on all 3 worksheets.

Awareness Building: 15 minutes

- Lecture on the 3 documents and discuss how love and infatuation are different and similar.

Hands-on Activity: 20 minutes

- Using the graphic organizer transparency facilitate the following discussion:

- Have students discuss and write down at the top of the worksheet how love and infatuation are alike (both involve emotions, both are exciting, both are new experiences, both involve physical attractions, etc.)
- Next, place LOVE in one box and INFATUATION in the other box at the top. In the middle identify characteristics that you can use to determine how love and infatuation are DIFFERENT. Examples: Communication would be a characteristic you can write in the middle box. Under the love side, discuss how a couple in a love relationship might look like/sound like/ behave like (I messages, open communication, honest, trusting, etc.) and on the infatuation side, list characteristics that would be found with a couple that is infatuated (many conflicts, you messages, not open or honest, etc.)
- Continue listing characteristics that a person could use to identify whether or not a couple is in love or infatuated (sexual behavior, time, commitment, etc.).
- Note: It usually takes 6-9 months to determine if a couple is in love or infatuated. Research will confirm that the longer you wait in a relationship to be sexually active, the better you will understand if the relationship is lover or infatuated based. A year is the best!
- Instruct students to write a conclusion statement.

Closure: minutes

- Have students turn in their Graphic Organizers.

Assessment:

The graphic organizers will be used as the assessment (mainly the concluding statement).

Home & Family Involvement:

Encourage students to analyze their relationship and see if they are infatuated or in love. Also, encourage students to go home and discuss the difference between infatuation and love with their parents/guardians.

Resources:

Tackmann, D. (2006). *Outrageous Teaching Techniques in Health Education*. Eau Claire, WI.

Health Education Standard & Performance Indicators:

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

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

1.12.3. Analyze how environment and personal health are interrelated.

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

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.

2.12.5. Evaluate the effect of media on personal and family health.

2.12.7. Analyze how the perceptions of norms influence healthy and unhealthy behaviors.

“Sexual Assault and Harassment”

Goal: Students will enhance their knowledge on what sexual assault and harassment are.

Behavioral Objectives:

Students will identify at least 3 behaviors that have a negative impact on others and at least 3 intervention steps to stop the behavior.

Time: 50 minutes

Integration: Technology, Library, Research, Collaboration

Materials:

TV/VCR

Video: It’s Not Only Murder (Tackmann; Hazelden)

17 cards with 17 sexual harassment behaviors on each set of cards (4-5 sets of cards)

Vocabulary:

Sexual Assault – conduct of a sexual or indecent nature toward another person that is accompanied by actual or threatened physical force or that induces fear, shame, or mental suffering

Sexual Harassment – unwelcome sexual advances made by an employer or superior, esp. when compliance is made a condition of continued employment or advancement

Intervention – the act or fact of intervening

Procedure:

Hook: 10 minutes

- Discuss with students what Sexual Assault is and what Sexual Harassment is.
- Define both as a class.

Hands-on Activity: 10 minutes

- Put students into groups of 4-5 students.
- Give each group a set of 17 cards of the sexual harassment/assault behaviors.
- Have students put these cards in order of most to least violent behaviors.
- Facilitate discussion among the groups while they do this.
 - Who is usually the victim?
 - Who is usually the suspect?
 - Can this happen at home, work, school, significant relationships?
 - Where should someone go to get help?

Awareness Building: 25 minutes

- Have students watch Video: It’s Not Only Murder.

- Have students go back to their list of behaviors and have them change/modify their list based on what they saw and heard in the video.
- Compare the top 3 most hurtful/violent behaviors for each group.
 - Are they the same/different and why?
 - What criteria did they use to determine which behavior was most hurtful.
 - Note: there is no real answer since each behavior can be equally hurtful depending on the victim's perspective.
- Discuss what steps need to take place to prevent/intervene sexual harassment and assault keeping in mind state law and school district policy.

Closure: 5 minutes

- Homework: Tell students they are to make a brochure/pamphlet that will identify inappropriate behaviors related to sexual assault and harassment, who is usually the victim and the suspect, steps of intervention/prevention, and where someone can get help if they have been assaulted/harassed.

Assessment:

Students will hand in their brochure/pamphlet and will be graded on their information and creativity.

Home & Family Involvement:

Encourage students to discuss sexual assault/harassment with their guardians and friends.

Resources:

Tackmann, D. (2006). *Outrageous Teaching Techniques in Health Education*. Eau Claire, WI.

Health Education Standard & Performance Indicators:

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

3.12.2. Use resources from home, school and community that provide valid health information.

3.12.4. Determine when professional health services may be required.

3.12.5. Access valid and reliable health products and services.

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

4.12.1. Utilize skills for communicating effectively with family, peers, and others to enhance health.

4.12.3. Demonstrate strategies to prevent, manage or resolve interpersonal conflicts without harming self or others.

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

8.12.2. Demonstrate how to influence and support others to make positive health choices.

8.12.4. Adapt health messages and communication techniques to a specific target audience.

“Jeopardy Review”

Goal: Students will review all the information they learned throughout this unit.

Behavioral Objectives:
Students will be more able to

Time: 50 minutes

Integration:

Materials:
Projector
Jeopardy Powerpoint

Vocabulary:
All from Unit

Procedure:
Hook: 10 minutes

- Split the class into 2.
- Have groups get together so they can collaborate and discuss questions.

Hands-on Activity/Awareness Building: 30 minutes

- Play Jeopardy!

Closure: 10 minutes

- Ask if there are any last questions about the test.

Assessment:
Students will be assessed based on answers they give and how they participate in the review game.

Home & Family Involvement:
Encourage students to go home and teach what they have learned to their friends and family.

Resources:

Health Education Standard & Performance Indicators:
Standard 1: Students will comprehend concepts related to health promotion and disease prevention to enhance health.

- 1.12.9. Analyze the potential severity of injury or illness if engaging in unhealthy behaviors.

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

2.12.7. Analyze how the perceptions of norms influence healthy and unhealthy behaviors.

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

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

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

4.12.2. Demonstrate refusal, negotiation, and collaboration skills to enhance health and avoid or reduce health risks.

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

5.12.1. Examine barriers that can hinder healthy decision-making.

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

7.12.1. Analyze the role of individual responsibility in enhancing health.

Name: _____

Healthy Relationships/Human Sexuality Unit Test

100 Points Total

Directions: Fill each question out as completely as you can. Take a deep breathe... begin.

Multiple Choice (1 point each: 13 points total): Circle the correct answer.

1. Fertilization occurs in:
 - a. Uterus
 - b. Fallopian Tubes
 - c. Ovum
 - d. Placenta

2. Condoms are what kind of contraceptive method?
 - a. Barrier Method
 - b. Hormonal Method
 - c. Permanent Method
 - d. No Method

3. _____ is unwelcome sexual advances made by someone towards someone else.
 - a. Sexual Assault
 - b. Sexual Harassment
 - c. Intervention
 - d. Rape

4. _____ type of language style that is designed to hid embarrassment.
 - a. Scientific Language
 - b. Street/Slang Language
 - c. Common Language
 - d. Childhood Language

5. Which is not a type of sex:
 - a. Masturbation
 - b. Vaginal
 - c. Anal
 - d. Oral

6. Which is a source where messages about sex are heard:
 - a. Media
 - b. Family
 - c. Peers
 - d. Partner
 - e. All of the above

7. Which is only a female reproductive organ:
 - a. Urethra
 - b. Uterus
 - c. Urinary Bladder
 - d. Breasts

8. How much does a child cost from birth – college:
 - a. \$150,000
 - b. \$100,000
 - c. \$200,000
 - d. \$250,000

9. Which is not a consequence of being sexually active?
 - a. Pregnancy
 - b. Peer Pressure
 - c. STDs/STIs
 - d. Emotional Scars

10. Who is the most important person you should talk to when deciding to become sexually active?
 - a. Guardian
 - b. Best Friend
 - c. Partner
 - d. Physician

11. What is the risk of pregnancy every time a person has unprotected sex?
 - a. 1:4
 - b. 1:1
 - c. 1:9
 - d. 1:6

12. The male gamete is:
 - a. Egg
 - b. Testes
 - c. Sperm
 - d. Testosterone

13. _____ is not engaging in sexual activity that may result in becoming pregnant, getting someone pregnant, or spreading or contracting an STI or HIV.
 - a. Anal Sex
 - b. Masturbation
 - c. Oral Sex
 - d. Abstinence

True or False (1 point each: 17 points total): Put a T if the statement is True. Put an F if the statement is False.

14. ____ A female cannot get pregnant the first time you have sex.
15. ____ A female cannot get pregnant during menstruation.
16. ____ Sexual assault/harassment can happen to a male or female.
17. ____ Most sexual assault suspects is someone that the victim knows.
18. ____ All contraceptives prevent pregnancy and STIs/STDs.
19. ____ Depo-Provera is a hormonal contraceptive method.
20. ____ Hormonal contraceptive is the most effective contraceptive method for preventing pregnancy.
21. ____ The menstrual cycle of a female lasts 27 days.
22. ____ The media portrays sex as fun with no consequences.
23. ____ About 500,000,000 sperm are ejaculated each time.
24. ____ All girls have hymen.
25. ____ Fertilization is when a sperm and egg meet.
26. ____ It is important to talk with your friends instead of your partner when deciding to become sexually active.
27. ____ When a person says “no” to sex they really mean “I really want it but want to make you beg for it.”
28. ____ Everyone should chose to be abstinent before marriage.
29. ____ Contraceptives are devices or drugs used to prevent pregnancy.
30. ____ You cannot be abstinent and also a virgin.

Matching (1 point each: 26 points total): Match the definition on the right with the correct word on the left.

- | | |
|---------------------------|--|
| 31. _____ Urethra | A. External male sexual organ through which sperm leave the body |
| 32. _____ Vas Deferens | B. A hormone produced in the ovaries |
| 33. _____ Seminal Vesicle | C. Hollow, muscular passage leading from the uterus to the outside of the body; birth canal |
| 34. _____ Foreskin | D. Organ that nourishes the fetus |
| 35. _____ Ovum | E. Stores immature sperm cells |
| 36. _____ Ovary | F. Adds a chemical fluid to the semen |
| 37. _____ Labia | G. Fluid ejaculated from the penis |
| 38. _____ Fallopian Tubes | H. Male genital glands; produces sperm and testosterone |
| 39. _____ Uterus | I. Sac that regulates the temperature of the testes |
| 40. _____ Endometrium | J. Male hormones |
| 41. _____ Cervix | K. Female erectile tissues between the labia |
| 42. _____ Hymen | L. A distensible, muscular and membranous sac, in which the urine is retained until it is discharged from the body |
| 43. _____ Sperm | M. Internal male reproductive organs that secrete a clear, lubricating fluid into the urethra |
| 44. _____ Testicles | N. Male gamete produced by the testes and transported outside the body through ejaculation |
| 45. _____ Semen | O. Two tubes that carry sperm from the epididymus into the urethra |
| 46. _____ Estrogen | P. Folds of skin outside the vagina |
| 47. _____ Clitoris | Q. Houses the fetus during pregnancy |
| 48. _____ Placenta | R. Mucous membrane lining the uterus |
| 49. _____ Prostate Glands | S. The canal through which urine and sperm from the bladder leaves the body |
| 50. _____ Scrotum | T. Gland that produces the egg cells and hormones |
| 51. _____ Urinary Bladder | U. Pair of canals that transport ova from the ovaries to the uterus; where fertilization takes place |
| 52. _____ Cowpers Glands | V. Adds a sugary fluid to semen |
| 53. _____ Epididymus | W. Entrance to the uterus; narrow, lower end of the uterus that opens into the vagina |
| 54. _____ Testosterone | X. The loose fold of skin that covers the glands of the penis |
| 55. _____ Penis | Y. A fold of mucous membrane partly closing the external office of the vagina in a virgin |
| 56. _____ Vagina | Z. Female gamete |

59. List 3 characteristics of Love and Infatuation (6 points total).

60. Name 3 different intervention or prevention steps for sexual assault/harassment (3 points total)

61. List 3 questions to discuss with your partner to see if you are ready for sex (3 points total).

62. List 3 resources a student could use to get more information on sexuality, reproduction, pregnancy, STDs/STIs, relationships, and/or sexual violence (3 points total).

Extra Credit (1 point each: 2 points total): Circle correct answer.

64. What is Ms. Kasten's FAVORITE TV show?

- a. Scrubs
- b. Friends
- c. Seinfeld
- d. How I Met Your Mother

65. Every student's FAVORITE class is:

- a. HEALTH
- b. Math
- c. Literature
- d. Science

Resources

- HealthTeacher (2009). Avoiding Sexually Transmitted Disease (STD). Retrieved May 5, 2009 from <http://www.healthteacher.com/lesson/index/74>
- Madsen, N., Danzeisen, A., & Johnsen, J. (2006) *Educator's Guide to Reproductive Health*. Minneapolis/St. Paul, MN.
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