

Introduction

Grades 8, Lesson #1

Student Learning Objectives

To be able to...

1. Distinguish appropriate from excessively personal facts for public disclosure.
2. Express that standard terms are more appropriate in class than slang and baby-talk.

Activities

Read the following:

- People make healthier decisions when they have thought about what they believe and when they have correct information.
- It is important to learn how to talk about sexuality ... so you can talk with your family, your doctor, and even help a friend.
- Privacy means different things to each of us, and for each of us there are degrees or levels of privacy.

If there are very personal concerns you want to discuss with your teacher, your teacher is available to refer you to the appropriate personnel.

When we talk about sexuality in school, we use medical/standard terms, as opposed to slang or baby-talk. That's why we need a unit like this! Some of the words we will use in these lessons include:

Penis
Breast
Scrotum
Vagina
Conception
Virus
Condom
Testis
Ovum
Sperm
Uterus
Gene
Touch
Pregnancy

Reproductive System

Grade 8, Lessons #2

Student Learning Objectives

To be able to...

1. Know the function of the terms covered in Reproductive System Reference Sheet.
2. Identify reproductive organs.

Activities

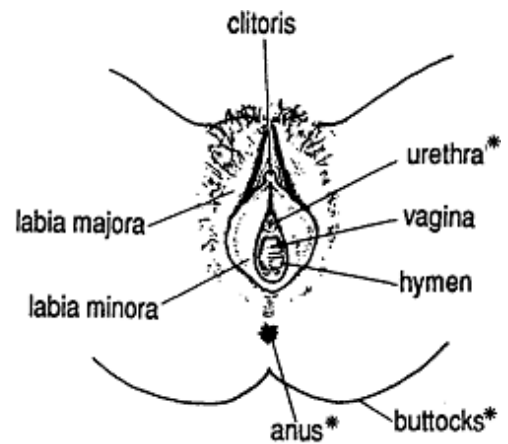
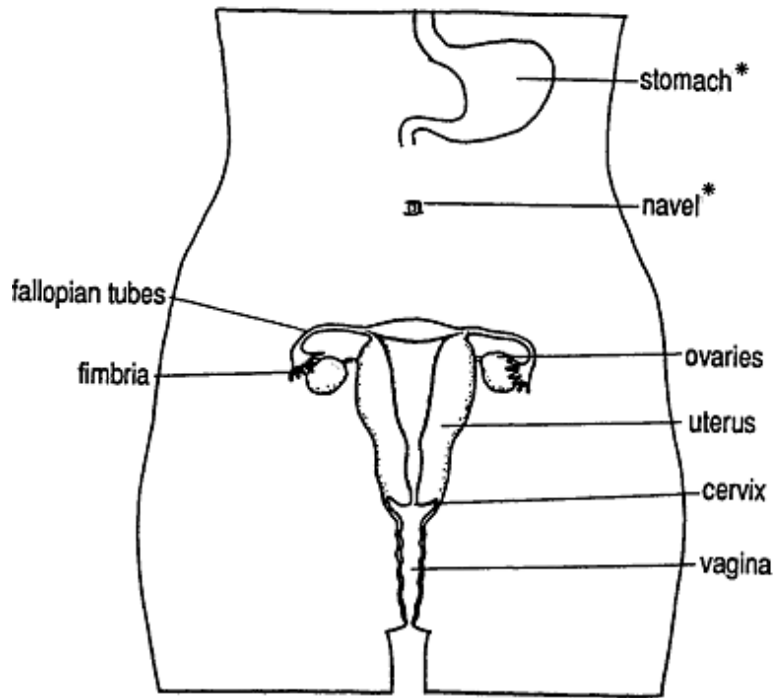
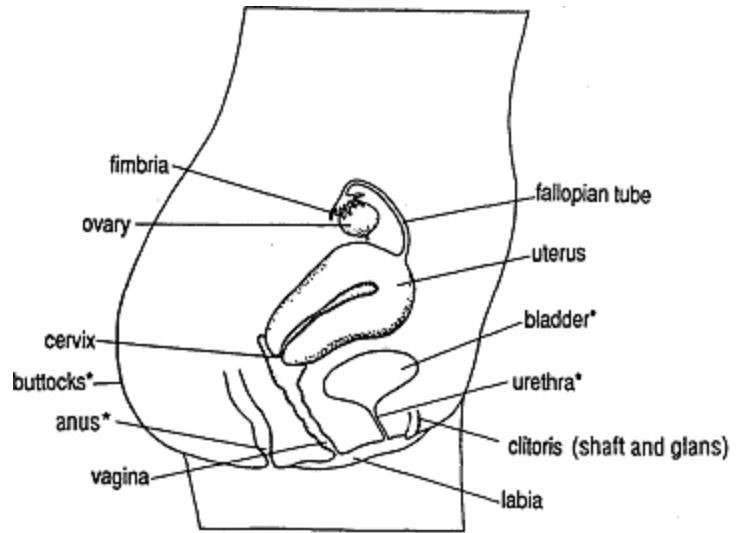
Read the Following:

You will learn about the relevance of the lesson to your life. Just as we have studied how to take care of a home and a family, we also want you to work on “how to take care of yourself.” The first step is to understand how your own body and other peoples’ bodies work. Before you can learn about how to keep a body system healthy, you have to understand how it is supposed to work, when it is healthy. You have studied other systems. In this lesson, you will look at the reproductive system. We have studied how individual cells reproduce, and we have looked at simple life forms. It is time to look at reproduction in mammals, and humans in particular.

Read the Reproductive System Reference Sheets 1-3 shown below. Use the information to complete the Student Question and Answer Cards. You will complete the answers and provide explanations on the cards. Submit completed assignment to your teacher.

Reproductive System Reference Sheet 1

The Female

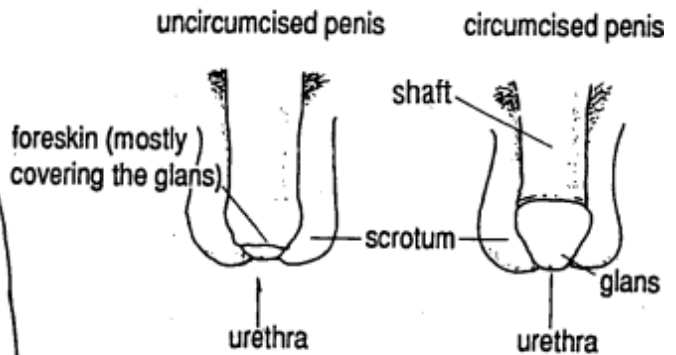
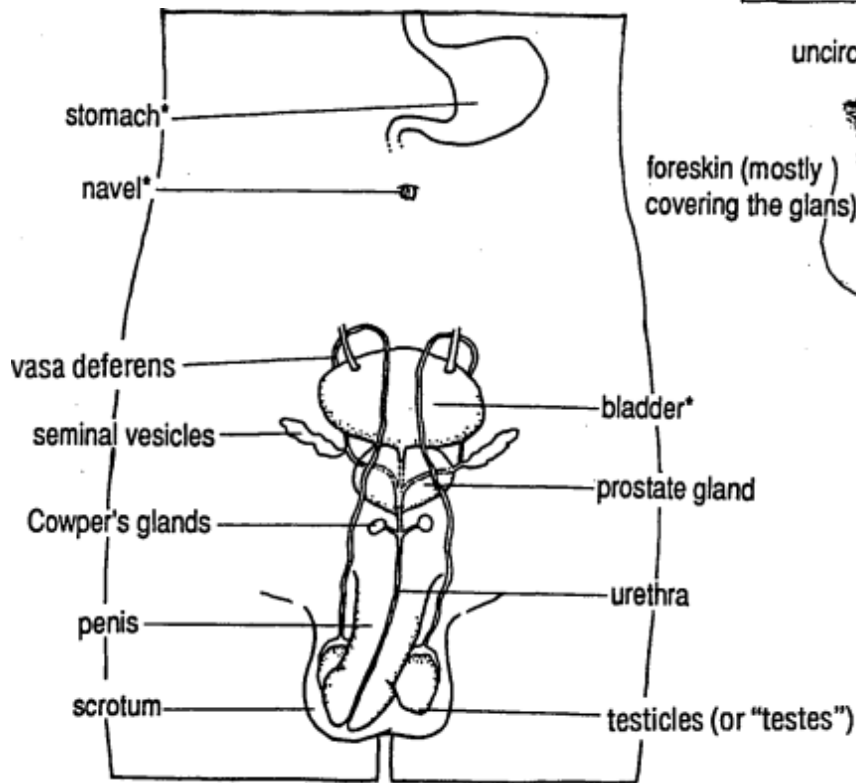
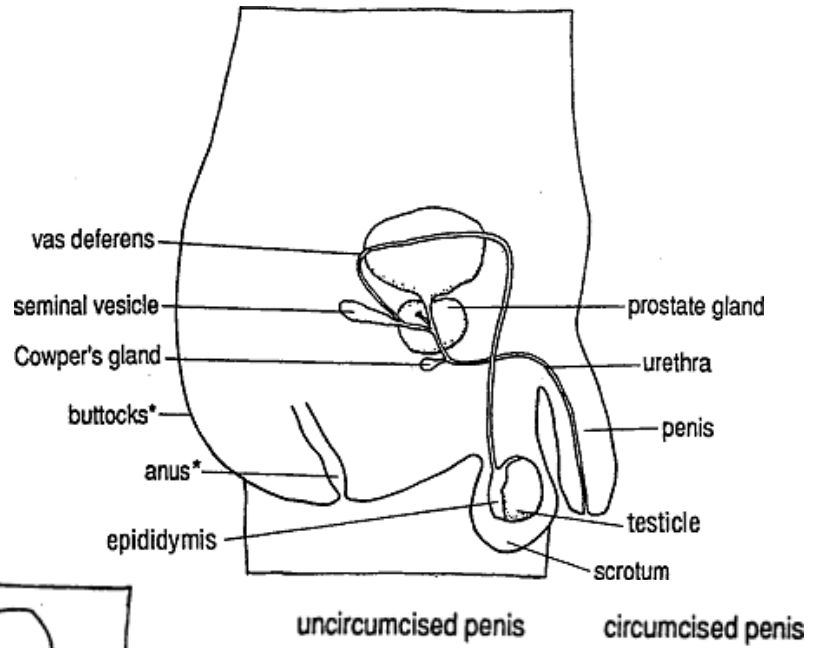


Female genitals or "vulva"

*not part of reproductive system

Reproductive System Reference Sheet 2

The male



Male genitals

*not part of reproductive system

NOTE: The Cowper's Glands are also known as Bulbourethral Glands. Medicine is gradually moving away from using the names of scientists to describe body parts.

Reproductive System Reference Sheet 3: GLOSSARY

Anus – The opening in the buttocks from which bowel movements come when a person goes to the bathroom. It is part of the digestive system; it gets rid of body wastes.

Buttocks – The medical word for a person’s “bottom” or “rear end.”

Cervix – The opening of the uterus into the vagina.

Circumcision – An operation to remove the foreskin from the penis.

Cowper’s Glands – also called Bulbourethral Glands -- Glands on either side of the urethra that make a discharge which lines the urethra when a man gets an erection, making it less acid-like to protect the sperm.

Clitoris – The part of the female genitals that’s full of nerves and becomes erect. It has a glans and a shaft like the penis, but only its glans is on the out side of the body, and it’s much smaller.

Discharge – Liquid. Urine and semen are kinds of discharge, but the word is usually used to describe either the normal wetness of the vagina or the abnormal wetness that may come from an infection in the penis or vagina.

Duct – Tube, the fallopian tubes may be called oviducts, because they are the path for an ovum. The vas deferens may be called sperm ducts, because they are the path for a sperm.

Ejaculation – The release of semen from the penis.

Epididymis – The coiled tubes, behind the testicles, where sperm mature, and are stored.

Erection – The penis or clitoris filling with blood and becoming larger and harder.

Fallopian Tubes – The ducts that carry an ovum from the ovary to the uterus.

Fimbria – The finger-like parts on the end of each fallopian tube which find an ovum and sweep it into the tube.

Foreskin – The sleeve of skin around the glans of the penis. It is sometimes removed by circumcision.

Genitals – The parts of the reproductive system on the outside of a person’s body. The female genitals may also be called the vulva.

Glands – The parts of the body which produce important fluids (hormones, sweat, urine, semen, saliva, etc.) or cells (sperm, eggs, white blood cells, etc.).

Glans – The head of the penis or clitoris. It is full of nerve endings.

Gonads – The sex glands. Female gonads are called ovaries. Male gonads are called testicles. Gonads make sex cells (eggs and sperm) and sex hormones. They are part of *both* the reproductive and endocrine systems.

Hormones – Natural chemicals made by many glands, which flow, along with blood, through the bloodstream. They are messengers which help the body work properly.

Hymen – The thin skin that partly covers the opening to the vagina in some females.

Labia – The folds of skin in the female genitals that protect openings to the urethra and vagina.

Labia Majora – The larger, outer set of labia.

Labia Minora – The smaller, inner set of labia.

Menstruation – The lining of the uterus emptying out. It is sometimes called “having a period.”

Nocturnal Emission – Ejaculation of semen during sleep. It is sometimes called a “wet dream.”

Ovaries – Female gonads. They are glands on either side of the uterus where egg cells are stored and female hormones are made. The singular is *ovary*.

Ovulation – The release of an ovum from the ovary.

Ovum – The cell from a woman or girl that can start a pregnancy when it joins with sperm cell. It is sometimes called an “egg cell.” The plural is *ova*.

Penis – The organ of the male genitals which is sometimes circumcised. It is made of a shaft and a glans, and partly covered at birth by a foreskin. It is used for urination and ejaculation.

Prostate Gland – A gland under the bladder that makes some of the liquid part of semen.

Reproduction – Making more of something. In humans it means making babies (more humans).

Scrotum – The sac that holds the testes and controls their temperature.

Semen – The thick, whitish liquid which carries sperm cells.

Seminal Vesicles – Glands on each vas deferens that make some of the liquid part of semen.

Sexual Intercourse – The kind of sex when the penis is in the vagina. Also called “vaginal intercourse,” because oral sex and anal sex may be considered intercourse, too. Usually during vaginal intercourse the male ejaculates and this is how most pregnancies begin.

Sexuality – The part of us that has to do with being male or female, masculine or feminine or some of both, being able to trust, liking and respecting ourselves and others, needing and enjoying touch and closeness, and reproducing (making babies).

Shaft – The long part of the penis or clitoris. (The shaft of the clitoris is inside of the body.)

Sperm – The cell from a man or boy that can start a pregnancy when it joins with an ovum.

Testicles – Male gonads. They are glands in the scrotum that make sperm and male hormones. They are sometimes called testes; the singular is testis.

Urethra – The tube that carries urine out of the body. In males, it also carries semen, but not at the same time.

Urine – Liquid waste that is made in the kidneys and stored in the bladder. It is released through the urethra, when we go to the bathroom. Urine is not the same as semen.

Uterus – The organ where an embryo/fetus (developing baby) grows for nine months. Sometimes it is called the “womb.”

Vagina – The tube leading from the uterus to the outside of the female’s body. It is the middle of the three openings in her private parts.

Vas Deferens – The tube that carries sperm from the epididymis up into the male’s body. The plural is vasa deferens.

Vulva – Another word for female genitals.

Reproductive System Review Activity Student Cards

<p>1.Q: True or False? The menstrual period lasts about a day each month.</p> <p>A:</p> <p>Explanation:</p>	<p>2.Q: True or False? Each time a man or boy ejaculates, about 360 million sperm cells come out.</p> <p>A:</p> <p>Explanation:</p>
<p style="text-align: center;">Reproductive System Review Activity Student Cards</p>	
<p>3.Q: How long after its release can an egg be fertilized? About a day, about a week, or about month?</p> <p>A:</p> <p>Explanation:</p>	<p>4.Q: True or False? Another word for tube is "duct."</p> <p>A:</p> <p>Explanation:</p>

<p>5. Q: The end of the uterus that opens into the vagina is the _____</p> <p>A:</p> <p>Explanation:</p>	<p>6. Q: The sac that holds the testes is called the _____</p> <p>A:</p> <p>Explanation:</p>
<p>Reproductive System Review Activity Student Cards</p>	
<p>7.Q: True or False? Once a girl starts having menstrual periods, she will get one every 28 days.</p> <p>A:</p> <p>Explanation:</p>	<p>8.Q: True or False? Having intercourse a lot will make the penis larger?</p> <p>A:</p> <p>Explanation:</p>

<p>9.Q: True or False? When a boy is circumcised, the doctor removes the glans of the penis.</p> <p>A:</p> <p>Explanation:</p>	<p>10.Q: When a woman or girl releases an egg, it's called _____</p> <p>A:</p> <p>Explanation:</p>
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**Reproductive System Review Activity
Student Cards**

<p>11.Q: True or False? A woman usually ovulates during her menstrual period.</p> <p>A:</p> <p>Explanation:</p>	<p>12.Q: Name one of the parts of the body that makes some of the liquid in semen.</p> <p>A:</p> <p>Explanation:</p>
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<p>13. Q: True or False? After puberty, the vagina is wet most of the time.</p> <p>A:</p> <p>Explanation:</p>	<p>14.Q: The liquid that carriesperm is called _____</p> <p>A:</p> <p>Explanation:</p>
<p>Reproductive System Review Activity Student Cards</p>	
<p>15.Q: When sperm comes out,it's called _____.</p> <p>A:</p> <p>Explanation:</p>	<p>16.Q: When the penis or clitoris fills with blood andbecomes larger, it's called an _____.</p> <p>A:</p> <p>Explanation:</p>

<p>17.Q: The word that describes both testicles and ovaries is _____.</p> <p>A:</p> <p>Explanation:</p>	<p>18.Q: True or False: All human beings have genitals, whether they are male or female.</p> <p>A:</p> <p>Explanation:</p>
<p>Reproductive System Review Activity Student Cards</p>	
<p>19.Q: The finger-like parts on the end of each fallopian tube are called ____.</p> <p>A:</p> <p>Explanation:</p>	<p>20.Q: True or False? Doctors usually recommend circumcision.</p> <p>A:</p> <p>Explanation:</p>

<p>21.Q: The tube that carries urine and (in males) semen out of the body is the_.</p> <p>A:</p> <p>Explanation:</p>	<p>22.Q: True or False? The human sperm cell is about as big as an apple seed?</p> <p>A:</p> <p>Explanation:</p>
<p>Reproductive System Review Activity Student Cards</p>	
<p>23.Q: True or False? An ovum is the size of a grain of sand.</p> <p>A:</p> <p>Explanation:</p>	<p>24.Q: True or False? The sperm cells take about a week to develop, before they come out.</p> <p>A:</p> <p>Explanation:</p>

<p>25.Q: Is a pregnancy most likely to start during a woman's period, just before a period, or in between her periods?</p> <p>A:</p> <p>Explanation:</p>	<p>26.Q: True or False? A woman with big breasts will be more likely to be able to nurse a baby.</p> <p>A:</p> <p>Explanation:</p>
<p style="text-align: center;">Reproductive System Review Activity Student Cards</p>	
<p>27.Q: True or False? A baby develops in a woman's or girl's stomach.</p> <p>A:</p> <p>Explanation:</p>	<p>28.Q: The folds of skin that protect the opening to the vagina and urethra are called _____.</p> <p>A:</p> <p>Explanation:</p>

<p>29. Q: The extra membrane around the opening of some girls' vaginas is called the _____.</p> <p>A:</p> <p>Explanation:</p>	<p>30.Q: True or False? Girls are born with all the eggs they will ever have.</p> <p>A:</p> <p>Explanation:</p>
<p>Reproductive System Review Activity Student Cards</p>	
<p>31.Q: True or False? Men run out of sperm around age 50 or if they have too much sex.</p> <p>A:</p> <p>Explanation:</p>	<p>32.Q: These are natural chemicals made by many glands which flow through the bloodstream. They are messengers which help the body work properly.</p> <p>A:</p> <p>Explanation:</p>

Sexually Transmitted Diseases (STDs)

Grades 8, Lesson #3

Student Learning Objectives:

To be able to...

1. Identify STDs
2. Know the common and early symptoms of STDs and know that STDs may be asymptomatic
3. Know the critical health behaviors that should follow a suspicion of infection
4. Know that some STDs are life-threatening and others can have serious consequences
5. Know effective ways of reducing one's STD risk
6. Know which STDs can be prevented by getting vaccinated.

Activities

Read the following:

The outdated term venereal disease (VD) should no longer be used.

In some medical circles, the preferred term is now sexually transmitted infection (STI). Infection is used instead of disease because many infections don't cause disease; they are asymptomatic and don't always cause adverse reactions. But the term is less widely recognized by the public than STD. Some professionals now prefer the term reproductive tract infection (RTI), because not all the ailments in our genitals are transmitted sexually. But this leaves out oral and anal manifestations of diseases. This curriculum uses the term sexually transmitted disease (STD) to describe all the kinds of organisms that are frequently or exclusively communicated through oral, anal and/or vaginal sex.

For the lesson, you will read about ways of getting infections. Many people catch infections of the reproductive system by having sex with someone else who has them. I know many of you are not sexually active. For some, it may be several years... even ten or fifteen years. But you will want to know this information eventually, even if it's just to act as a health educator for friends and family.

Below are the names of some STDs:

- Chlamydia
- Gonorrhea
- Syphilis
- Pubic Lice
- Scabies
- Trichomoniasis
- Hepatitis B and C aka HBV and HCV
- Genital Herpes aka HSV 1 and 2
- Human Papillomavirus (HPV) & Genital Warts
- Cytomegalovirus aka CMV
- Human Immunodeficiency Virus aka HIV Disease (last stage: AIDS)

Read the chart below. Some STDS can be life threatening. Some have Serious Consequences. Have no serious consequences

Life threatening	Serious Consequences	No Serious Consequences
<ul style="list-style-type: none"> · HIV Disease* · Syphilis** · Hepatitis B, C*** · HPV **** <p>* End stage HIV Disease is what we call "AIDS."</p> <p>** Syphilis can kill a person eventually if untreated. Remember, though, it is curable and doesn't cause serious consequences, except in newborns, if treated early.</p> <p>*** Hep B & C can cause chronic pain, dementia, and even can be fatal, eventually, if they are chronic ... that is, if your body doesn't "clear the disease" on its own. We don't know why some people's bodies do & some don't. Remember, though, there is a vaccine to prevent Hep B.</p> <p>**** Most people clear HPV, but some HPV causes cervical cancer (which can be fatal). The HPV vaccine prevents most cases of genital warts and cervical cancer. The vaccine doesn't protect against all types of HPV.</p>	<ul style="list-style-type: none"> · Chlamydia*/** · Gonorrhea*/** · Pelvic Inflammatory Disease (PID) * · Genital Herpes** · Cytomegalovirus (CMV) ** <p>* Chlamydia & Gonorrhea, if <i>untreated</i>, can lead to PID in women. PID, if not treated early, can lead to infertility, ectopic pregnancy, or chronic pelvic pain. In men, Chlamydia & gonorrhea can lead to epididymitis and chronic scrotal pain as well as chronic pain with urination. Chlamydia & gonorrhea are curable, though.</p> <p>** Herpes and CMV (and gonorrhea & chlamydia except when they lead to PID) cause serious consequences not so much to teens & adults, but mainly if a baby gets infected during pregnancy or birth. Congenital CMV - meaning present at birth - is a very common cause of serious disability in newborns, including mental disability; lung, liver and spleen problems; hearing loss; bleeding problems; vision loss; and growth problems.</p>	<ul style="list-style-type: none"> · Pubic lice*/** · Scabies*/** · NGU / UTI* · Trichomoniasis* <p>* All four of these are curable.</p> <p>** We call pubic lice and scabies "STD's" because they are often spread sexually, but they can also be spread by sharing clothing or bedding ... even sleeping in a bed where someone spent the previous night who had lice, if the lice laid eggs on the bedding.</p>

Some STDs are curable. Other STDs are not curable. **Read the information on the chart.**

Curable:	Not Curable:
<ul style="list-style-type: none"> • Chlamydia • Gonorrhea • Syphilis • Pubic lice • Scabies • Trichomoniasis • NGU / UTI • Pelvic Inflammatory Disease (except it may have already left scar tissue, before it is cured) 	<ul style="list-style-type: none"> • Genital Herpes (HSV) • Human Papillomavirus (HPV) & Genital Warts • HIV Disease • Hepatitis B, C (HBV, HCV) • Cytomegalovirus (CMV)

All those not caused by viruses – the majority -- are curable. However, the ones caused by viruses aren't curable. They are treatable, and treatment may help with symptoms, slow down the progression of the disease, and even reduce risk of transmission. There are now vaccines available to reduce the chances a person will become infected with Hepatitis B and HPV.

Symptoms are the visible signs that you have a disease. Sneezing may be a symptom of a cold. When a disease has no symptoms, it is called asymptomatic, and you can still spread it to others and get it from others. Sores, itching, and discharge may be symptoms of STDs.

Read the information on this chart.

Always have symptoms²	Often don't have symptoms
<ul style="list-style-type: none"> • Scabies • Pubic lice 	<ul style="list-style-type: none"> • Chlamydia • Gonorrhea • Human Papillomavirus & Genital Warts • Genital Herpes • Hepatitis B, C • Cytomegalovirus • HIV Disease • Syphilis • Pelvic Inflammatory Disease • NGU / UTI • Trichomoniasis

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Most STDs can be asymptomatic and this is when many are spread, because people do not realize they have an STD.

- Condoms are very effective at preventing the transmission of STDs. However, condoms might not cover the place on the body of someone that is infected with an STD.
- **Abstinence from oral, anal and vaginal intercourse protects from all diseases almost 100% of the time ... that is, assuming no needle sharing, and not counting things like public lice that can be passed on bedding. After, abstinence, the next best protection is condoms.**

Read the following chart.

Condoms are very effective at preventing ⁴ :	Condoms might not cover the place on the body that was infected:
<ul style="list-style-type: none">• HIV Disease• Chlamydia• Gonorrhea• Hepatitis B, C• Cytomegalovirus• Trichomoniasis• NGU / UTI• Pelvic Inflammatory Disease	<ul style="list-style-type: none">• Genital Herpes• Genital Warts (caused by HPV)• Pubic lice• Scabies• Syphilis

Condoms do protect very well against diseases that are spread through semen, vaginal fluids and blood (the ones in the left column). They are less effective for diseases that are spread skin-to-skin or, like lice, hair-to-hair. A herpes sore or a genital wart, for instance, might be on a person's scrotum, labia or anus, where a condom just wouldn't cover it. Or they could shed virus there, even when there was no sore or wart visible. **NO DISEASES TRAVEL THROUGH LATEX OR POLYURETHANE.**

Read the following and complete the STD Reference Sheet. Teacher Answers. Submit completed assignment to your teacher.

1. There are more than **30** different STDs. ⁵

Explanation/Note: We discover new ones all the time; eight have been discovered since 1980.⁶ Others have been around for thousands of years, like syphilis. Some only affect people with compromised immune systems, like

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persons with HIV or fetuses during birth. Some are very rare in the United States. Today we will focus on just 13 diseases.

2. Check 5 of the most common STDs.

- ◆ **Chlamydia**
- ◆ **Trichomoniasis**
- ◆ **Genital Herpes**
- ◆ **HPV**
- ◆ **CMV** is actually the most prevalent infection. However, many people have it, while very few get sick from it. It's primarily dangerous to babies and people with already-weakened immune systems, such as those with HIV.

3. We used to call STDs "**VD**".

Explanation/Note: The letters "VD" stand for venereal disease. "Venereal" comes from Venus, the goddess of love. We used to be cute, in other words, and call them "love diseases." Now we call them what they really are...sexually transmitted diseases ... or germs people can pass to one another if they have unprotected oral, vaginal, or anal intercourse.

4. What are some infections that seem like STDs but in fact are usually *not* spread by sex?

- ◆ **yeast infections**
- ◆ **jock itch**
- ◆ **bacterial vaginosis**
- ◆ **mononucleosis**

Note: Yeast, jock itch and BV could theoretically be spread sexually, but that's not the primary way they are spread. Mononucleosis is a virus that is passed by saliva and has been called the "kissing disease" but it isn't considered an STD. It is also passed by sharing straws and eating utensils.

5. What 4 STDs can be life threatening?

- ◆ **Syphilis**
- ◆ **HIV**
- ◆ **Hepatitis B & C**
- ◆ **HPV**

Note: Pelvic Inflammatory Disease (PID) is commonly caused by chlamydia or gonorrhea. PID can leave scarring in the fallopian tubes, which can in turn lead to an ectopic pregnancy (also called tubal pregnancy). An ectopic pregnancy, if it were to rupture, could also be fatal. But that's a lot of "ifs."

6. What serious consequences can happen from some STDs? **All of These** (death, infertility [not being able to have a baby biologically or to get someone pregnant], cancer of the cervix, chronic pain [pain that doesn't go away], blindness, brain damage).

Note: Some of these consequences can be avoided completely or delayed significantly if identified and treated early.

7. What STDs have no cure?

- ◆ **Hepatitis B & C**
- ◆ **CMV**
- ◆ **Genital Herpes**
- ◆ **HIV**
- ◆ **HPV**

Explanation/Note: What these STDs have in common is that they are all viruses. Scientists are not sure how viruses work, so they are difficult to cure. All of these STDs can be treated with medication, but not cured. (Although there's no medical cure for them, viruses such as Hepatitis B and HPV sometimes clear from the body naturally.⁷ This is similar to how your body eventually clears a cold virus.)

8. Who can get the HPV vaccine and what does it do?

- ◆ **People ages 9 to 26 years old**
- ◆ **Prevents most cases of genital warts and cervical cancer**

Explanation/Note: HPV vaccine is recommended for every 11 or 12 year old girl and all teenage girls and young women should get it, if they haven't already. It's also available for boys and men between ages 9 and 26. Ideally, the vaccine is administered before onset of sexual activity -- before people are exposed to the viruses -- but people who are already sexually active can still be vaccinated.

There is also a **vaccine for Hep B**, and it is recommended for all babies, children and teens 19 years of age or younger. Many people will have already received three doses of the Hepatitis B vaccine as part of childhood immunizations. If not, it is never too late to receive this vaccine. The vaccine helps to prevent people from getting the disease or having serious symptoms.

9. Which STDs can have no symptoms? ALL OF THEM except:

- ◆ **Scabies**
- ◆ **Pubic lice**

Explanation/Note: A person will definitely notice intense itching and bumps or a rash with scabies. With pubic lice, they'll notice intense itching and tiny white nits (eggs) on pubic hair. They may or may not see the actual lice; lice move fast.

With other STDs, symptoms may be obvious or they may be subtle and tough to identify. Some take years to show up. Sometimes symptoms never show up.

10. Can a person feel fine and look healthy and clean and still have an STD? **Yes, they can have no symptoms and they might still be contagious.**

Explanation/Note: In fact, that's often the reason they *are* spread. The person doesn't realize they have an infection. Even if a person *does* get symptoms, the symptoms may go away, although the person is still infected and can still pass on the germs. Genital warts and herpes sores both disappear, for instance, even though the disease is still in the person's body.

11. What are the most common, early symptoms of STDs ... if people DO have symptoms?

- | | |
|------------|---------------------------------------|
| a. Sores | d. Unusual discharge |
| b. Bumps | e. Pain in your lower abdomen (belly) |
| c. Itching | f. Burning (with urination) |

Explanation/Note: Sores can be a symptom, whether they hurt or not. **Discharge** is a symptom only if it is unusual. In men, liquid other than urine or semen coming from the penis is abnormal. For men and women, any liquid besides feces [poop] coming out of the anus can be a symptom. For a woman, unhealthy discharge could be liquid coming from the vagina that is clearly not her normal, healthy wetness, like if it has a different odor than usual, if it's yellow or greenish instead of clear or white, if it is lumpy instead of smooth, or if there is blood when she is not menstruating.

12. The best (most certain) ways people can protect themselves and their partners from getting or giving an STD are:
- Not having oral, anal, or vaginal sex (This is called **abstinence** and it is safest.) **Note:** Abstinence refers to reframing from ANY risky behavior and can start at any time.
Ask: What are reasons people may choose to abstain?
 - Only having sex with **one** other person, who only has sex with them, ever. (In a marriage or a long-term partner relationship where they have had years to build trust.)
The longer a person waits in each new relationship, the fewer partners they will have in their lives, and the less likely they'll be to ever catch an STD.
 - Using a **condom** every time they have sex.
 - Finally, this is an appropriate point to explain what it means to us a condom correctly.

Note: How regularly, depends upon how often they get into new relationships. Once a year is enough for someone who has had the same partner for all that time and whose partner hasn't been with anyone else since getting tested. Four times a year is recommended for some sexually active people. A person should talk with a health care provider about what to be tested for, depending upon their own sexual history. They should never *assume* that they've been screened for every STD. In other words, just because the doctor didn't *say* they had an STD, that doesn't necessarily mean they are in the clear; it might just mean they weren't tested for that particular disease.

13. People **can't** get STDs by hugging, holding hands, cuddling with clothes on, dancing, playing football, brushing someone's hair, etc.

14. If a person thinks he or she might have an STD, he or she should:

- a. **Go to a doctor.** **Note:** Also acceptable answers: “go to a clinic,” “get a check-up.”

Important to add: People need to ask the doctor or other provider what infections they tested them for and the results for **each** STD that was tested. If the result of one STD test is negative, it doesn't mean that other results are negative as well or that the person was tested for every possible STD.

- b. **Tell their partners.** **Note:** That means anyone with whom he or she has had sex ... and encourages them to get tested, too.

Important to add: If there is a power difference between the two people (like if the boyfriend or girlfriend is a lot older), or if the boyfriend or girlfriend has been violent in the past, or if it's just too scary to talk with them about the fact that they might have an infection, there are people at Public Health who can talk with a person's partner **for** them. And they don't say the name of the person who suggested they call.

- c. **Stop having sex until a doctor says it's OK.** **Note:** Sometimes a person needs to be retested to make sure the medicine worked, even for those that are curable.

Websites to recommend for accurate, up-to-date STD information aimed at teens:

For accurate, up-to-date STD information aimed at teens, these resources are available:

- ◆ Sex, Etc., a project of Answer (at Rutgers University): www.sexetc.org
- ◆ Teen Talk
- ◆ Advocatesforyouth.org
- ◆ Amaze.org
- ◆ Florida Department of Health in Broward County
954-467-4700 or www.broward.floridahealth.gov
- ◆ Getprepbroward.com
- ◆ Browardschools.com/Page/32879
- ◆ Cdc.gov

By law, if you are 13 years of age and older, you can be tested and or treated for HIV/AIDS, STD and Pregnancy without parental consent.

The steps for correct condom usage. Check the expiration date, carefully open package, pinch tip of condom, Roll condom down erect penis, intercourse with condom, ejaculation with condom, hold condom onto penis while pulling out, take condom off penis, throw in the trash.

Sexually Transmitted Disease (STD)

Reference Sheet

A Sexually Transmitted Disease (STD) is ANY infection people commonly get by having sex with someone who has it.

1. There are more than _____ different STDs.

2. Check five of the most common STDs:

- | | |
|------------------|--|
| - Chlamydia | - Hepatitis B and C (also called HBV and HCV) |
| - Gonorrhea | - Genital Herpes (caused by Herpes Simplex Virus 1 or 2) |
| - Syphilis | - HPV (the virus that sometimes causes genital warts) |
| - Pubic Lice | - CMV (Cytomegalovirus) |
| - Scabies | - HIV Disease (the last stage of which is AIDS) |
| - Trichomoniasis | |

3. We used to call STDs “ _____ ”.

4. What are some infections that seem like STDs but in fact are usually *not* spread by sex?

- ◆ Y _____ | _____
- ◆ J _____ | _____
- ◆ B _____ V _____
- ◆ M _____

5. What 4 STDs can be life threatening?

- ◆ _____ ◆ _____
- ◆ _____ ◆ _____

6. What serious consequences can happen from some STDs? (circle the best answer)

- | | |
|----------------------|-----------------|
| Death | Blindness Brain |
| Infertility | Damage All of |
| Cancer of the cervix | these |
| Pain | None of these |

7. What STDs have no cure?

- ◆ _____ & _____ ? _____
- ◆ _____
- ◆ _____

8. Who can get the HPV vaccine and what does it do?

- ◆ _____ ages _____ to _____ years old
- ◆ Prevents most cases of _____ & _____

9. Which STDs can have no symptoms? ALL OF THEM except:

- ◆ _____
- ◆ _____

10. Can a person feel fine and look healthy and clean and still have an STD?

- _ Yes, they can have no symptoms and they might still be contagious
- _ Yes, but they can't give it to anyone else unless they have symptoms
- _ No, they must have symptoms

11. What are the most common early symptoms of STDs ... if people DO have symptoms?

- ◆ _____
- ◆ _____
- ◆ _____ing
- ◆ _____ing
- ◆ unusual _____
- ◆ _____ in the abdomen (belly)

12. The best (most certain) ways people can protect themselves and their partners from getting or giving an STD are:

- ◆ Not having oral, anal, or vaginal sex (This is called _____ and it is safest.)
- ◆ Only having sex with _____ other person, who only has sex with them, ever. (In a marriage or a long-term partner relationship where they have had years to build trust.)
- ◆ Using a _____ every time they have sex.

13. It also cuts down people's risk if they:

- ◆ Limit the _____ of people they have sex with in their lives.
- ◆ Go to the doctor, regularly, if they are having sex, and ask for a thorough STD _____.
- ◆ Do not _____ (wash out the vagina) or use an _____ (wash out the rectum) before or after having sex.

14. People _____ get STDs by hugging, holding hands, cuddling with clothes on, dancing, playing football, brushing someone's hair, etc.

15. If a person thinks he or she might have an STD, he or she should:

- ◆ _____
- ◆ _____
- ◆ _____



16. Scientists learn more about STDs all the time. It is hard to keep up with the changing information. When friends tell you things, they may be unclear or even wrong. Radio, TV, and newspaper reports may be incomplete or unclear, making things more confusing. So where can you go to find out the most up-to-date answers about STDs?

Trustworthy Telephone Hotlines include:

Trustworthy Websites include:

Don't blindly trust rumors. Check them out. Even teachers and doctors make mistakes!

17. List the steps for correct condom usage.

HIV and AIDS: Understanding Risk Behaviors

Grade 8, Lesson #4

Student Learning Objectives

To be able to...

1. Know the difference between HIV and AIDS.
2. Know that anyone who takes risks with sex or drugs is vulnerable.
3. Know how and when one can find out if he/she has HIV.
4. Know that there is neither a vaccine nor a cure for HIV.
5. Know that there are some limits of treatment.
6. Know the differences between behaviors that can and cannot transmit HIV and especially know *why* they are risky or safe.

Activities

Read the following.

You already know some things about HIV and AIDS. For this lesson you will take what you know and build on it.

Teens need to know about HIV because:

1 out of 2 people who catch HIV in the United States today are under 25.

Even though you may not be having sex at this point in your life and hopefully you are not using drugs and needles, you may have sex eventually and you may be faced with drug decisions. Needles used for tattooing, acupuncture, and body piercing can also transmit HIV; you may already have been or are now thinking about one of these. So far there is only one known case of HIV transmission by acupuncture needle; there are none known for piercing and tattooing, so these are small risks, but still it is worth knowing about.

This is your chance to learn information that you may need later.

You may think this lesson won't be relevant to you because you are straight (heterosexual) and you may think that HIV is only a disease of gay (homosexual) men.

It's important to know that if your partner had HIV it wouldn't make the slightest difference what sex he or she was; you would still be at risk.

This lesson is really for everybody.

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On the other hand, you may think this lesson won't be relevant to you because you're gay or lesbian or bisexual. You may feel that most lessons are geared toward the straight students. The fact is the majority of HIV cases in the U.S. are in gay and bisexual men. It's also a fact that a lot of lesbian and bisexual young women are at risk because they may have sex at some point with a guy friend who may be gay.

You may not need this information yourself, but you may have friends or brothers or sisters who are taking risks. Through this lesson, you may have the opportunity to help and inform the people you care about.

What is HIV?

Human Immunodeficiency Virus (HIV) is the germ that causes AIDS. It attacks the body's immune system. Over time, HIV gradually destroys the body's ability to fight off infection and disease (if the person takes no medication). Then people are more likely to get infections and cancers that would not normally develop in healthy people.

How is AIDS different than HIV?

Acquired Immune Deficiency Syndrome (AIDS) is the last stage of HIV infection, when a person's immune system doesn't work very well anymore.

We used to call the whole disease "AIDS," but now we call it "HIV disease." We use the term "AIDS" only for the last stage of HIV disease.

How does a person know if they have HIV?

The only way to know for sure is to be tested. After a person becomes infected with HIV, the body's immune system recognizes the virus as a foreign intruder and begins to make antibodies to the virus. Most HIV tests check for the presence of these antibodies. Some clinics test blood. Others test tissue wiped from lining of the mouth to check for antibodies. That doesn't mean that the virus is present in the mouth, just antibodies. Clinics send both kinds of tests to the lab. Results are usually available in a week or two.

Almost everybody (97%) with HIV has enough antibodies to show up on a test within 3 months from the time they got infected, and everyone should have detectable antibodies by 6 months. So, if a person had unprotected sex or shared needles and took an HIV antibody test a few days later, the test would not be accurate. The person's immune system would not have had enough time to respond to the virus and make enough antibodies to show up on a test. A person would have to be tested 4-12 weeks (3 months) after the last time they could have gotten HIV for the antibody test to be accurate.

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Legally, a clinic can't do an HIV test unless the patient specifically asks or agrees to be tested (informed consent). In 2006, CDC recommended that people start getting HIV tests as part of their regular physical. Do not be alarmed if your doctor asks if you are sexually active – if you are, it is normal if they recommend an HIV test. “Confidentially” means they don't need your parents' or guardians' permission and the clinic won't share any information unless the patient signs a written agreement.

To find the testing site closest to you please visit www.getprepbroward.com or www.browardschools.com/Page/32879. When in your school, you may also see the guidance counselor, teacher or other designated staff for a copy of the Youth Health Guide. Follow this link to get the youth health guide:
<https://www.browardschools.com/cms/lib/FL01803656/Centricity/Domain/13726//YOZ/Youth-Health-Resource-Guide-hand%20held.pdf>

Many people who have HIV feel fine for years after infection begins so they don't think of getting tested. If a person didn't get tested early on, they could still be passing HIV to other people. Eventually, years down the road, they might suspect they were infected because they started to get sick a lot.

Is there a vaccine (shot) to prevent HIV?

There is not a vaccine or shot to prevent HIV. However, there is pill that can be taken daily to prevent you, if you do not already have HIV, from contracting the HIV virus. This pill and the recommended process for the medication is called PrEP. For more information go to www.getprepbroward.com. If you are under 18, you will need parental consent. Most of you had shots when you were young, which protect you against polio, measles, and mumps. Unfortunately, there is not yet a vaccine to protect us against HIV. Scientists around the world are working toward a vaccine. That's why knowing how to protect yourself is extremely important.

Are there treatments for HIV?

Yes, there are effective treatments for HIV. Medications can help people to live much longer and healthier lives. There are treatments for the infections people get when they have HIV. Since 1996, there are also treatments to slow the growth of the HIV within their body. People who were previously close to dying from HIV have been able to take these medicines and get their lives back.

Still, there are some problems with the drug treatments. They don't work for everyone. For others, the drugs can slow HIV, but cause other health problems and make them feel sick. In the past, it was hard for people to take so many pills every day at specific times (this is still the case in the developing world or for certain people who need different drugs). Some people even had to set the alarm and wake up at night to take their medications. Today, there is a single pill people with HIV can take each day, but it does not work for all people. Side effects from HIV drugs can be so severe doctors have to prescribe other drugs to treat the side effects.

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Drug treatment for HIV is very expensive. In Florida, there are programs that can help pay. But in many parts of the United States and the world, HIV medications are too expensive for people to use them.

Is there a cure?

There is no cure for HIV. Once a person is infected, it will be in their body as long as they live. Persons with HIV may feel fine for years, but without treatment, many will get sick eventually. Some will get diarrhea that won't go away, so they can't go to school or work or take trips that would take them away from the bathroom. Some will get so tired that they can't get out of bed in the morning or even raise their head. Some will get pneumonia and not be able to breathe. Some will get eye infections and become blind. Some will get brain infections and lose their ability to think clearly or take care of themselves.

What do you suppose it's like to live with AIDS?

Living with HIV or AIDS can be a challenge. Will you be able to remember to take medication every day? How will it feel when you talk with your family about your HIV? Your friends? Will it be hard when you have a new relationship and it starts to get intimate? How will you bring up the subject of your HIV? What if they break up with you? What if they break your confidentiality with other friends? These relationship challenges can be even harder than managing the medications.

Read the information below to learn how a person gets HIV. Then use the information to complete the "How Does A Person Get HIV" worksheet.

Some of these questions have right and wrong answers, but some have more than one good answer. Submit completed assignment to your teacher.

1) Abstaining from sex and drugs:

The surest way to not get infected is to abstain. Abstaining means choosing not to do something such as not using drugs or not having sex. The kind of drug use that can transmit HIV is sharing needles. The kinds of sex that can transmit HIV are oral, anal, and vaginal intercourse.

- "Oral intercourse" is the kind of sexual touch where one person's mouth is on the other person's genitals or anus. ("Genitals" are the outside parts of the reproductive system... clitoris, labia, penis and scrotum.)
- "Anal intercourse" is the kind of sexual touch where one person's penis is in the other person's anus.
- "Vaginal intercourse" is the kind of sexual touch where one person's penis is in the other

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person's vagina.

[Remember people have diverse beliefs about intercourse (especially any sex that is not strictly for reproduction)]

2) **Sharing needles to inject drugs:**

Syringes can contain the virus for 36 hours even if blood isn't visible. HIV does not live in open air very long, but if the HIV is within liquid inside the syringe, it may live longer outside the body than normally. Injecting it right into the bloodstream is very dangerous.

Students can argue for this answer if they say that two people who are not infected could share needles and not risk getting HIV.

3) **Having vaginal or anal sex without a condom:**

The majority of HIV infections in the United States are spread through unprotected anal or vaginal sex. Other STDs are easily spread this way, too.

Students can argue for this answer if they say that two people who are not infected could have unprotected anal or vaginal sex and not risk getting HIV. For example, most married couples have unprotected sex and do not consider themselves at risk for HIV infection.

4) **Having oral sex without a condom.**

Many people do not believe that they can get HIV from oral sex. This is not true. 5-10% of all new HIV infections are spread through unprotected oral sex. Some people think of having oral sex as abstinence. And oral sex is less risky than anal or vaginal sex in terms of HIV, but it still poses some risk (not just for HIV, but also for other sexually transmitted diseases.)

Students can argue that if a person has oral sex performed on him/her (which only exposes a person to an infected fluid if the other person is bleeding from the mouth) there is a very small risk. This argument may be true for HIV, but there are other sexually transmitted diseases that don't require blood.

Students can argue for this answer if they say that two people who are not infected could have oral sex and not risk getting HIV. For example, many married couples and couples in long-term relationships have oral sex and do not consider themselves at risk for getting HIV.

Also, using a latex barrier like a condom or even plastic kitchen wrap between mouth and the partner's genitals can reduce the risk of spreading HIV.

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5) Having vaginal or anal sex with a condom.

Condoms greatly reduce the risk of HIV transmission during sex, but they must be used correctly and every time.⁹ Latex, vinyl, and polyurethane condoms do NOT have holes in them that let the virus through. They rarely break or tear when used properly, but they are not a guarantee. Expired condoms should never be used, because they are more likely to break.

Students can argue for this answer if they say that two people who are not infected could have vaginal and anal sex and not risk infection. For example, most married couples have sex and do not consider themselves at risk for HIV infection.

6) Having sex: two people in a relationship who don't have sex with anyone but each other.

The risk increases if:

- Either person has ever had sex before (the more partners a person has, the more risk). Some people are not honest with their partners about their past sexual experiences.
- Either person has ever shared needles with drugs.
- They are afraid to go to a clinic to get tested
- Either person has sex with someone else (someone cheats on the other).

Students can argue that there is no risk at all if a couple is having sex with only one another (no cheating) AND if:

- Neither person has ever had sex (anal, oral or vaginal) before or shared needles, or
- Both people have been tested for HIV (long enough after having sex for the disease to be detectable by a test) and are not infected

7) Kissing (closed mouth)

There is no risk whatsoever from closed mouth kissing.

8) Kissing (open mouth)

Saliva and tears are **not** capable of passing the HIV virus. (Remember blood, semen, vaginal fluids and breast milk are the fluids that we worry about with HIV transmission.) In the twenty years of the HIV/AIDS epidemic, there has only been one case of HIV transmission thought to be from kissing. Both people in this case had **lots** of bleeding from their gums and other sores in their mouths. People do not need to worry about getting HIV from kissing.

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- 9) Receiving a blood transfusion before March 1985 in the U.S. or now in a country that can't afford to protect its blood supply.

Prior to 1985, there was no way to test the U. S. blood supply. As a result, some people were given blood that was infected with HIV.

- 10) Receiving a blood transfusion after March 1985 in the U.S. or other developed nations.

Now blood is tested for HIV (and other diseases) before giving it to persons in need. The chances of infection from transfusion are very tiny-- approximately, a 1 in 2,135,000 chance-- way less than one in a million!

- 11) Donating blood.

There is no risk whatsoever from donating blood in the United States.

- 12) Touching doorknobs, toilet seats, telephones, towels, bed linen, dishes, glasses

There is no risk whatsoever from these things.

- 13) Shaking hands, hugging, touching,

There is no risk whatsoever from these things.

- 14) Being with someone who is crying, coughing, or sneezing

There is no risk whatsoever from these things.

- 15) Breastfeeding from a mother with HIV.

If a woman is infected with HIV, she can give it to her baby during pregnancy or birth, or by breastfeeding. Breastfeeding is the healthiest way to feed a baby except for moms who have HIV.

- 16) Giving First Aid and CPR.

There used to be a small risk of HIV transmission whenever blood was present and CPR was required. However, nowadays CPR does not require mouth breathing, just chest compressions, so there should be no risk of blood transmission of HIV. Follow wound care instructions below if you were both in an accident, you have cuts on your hands, and the unconscious person has chest wounds.

Wounds: Try to use latex gloves rather than touching blood with your bare hands. If the victim is conscious, give them clean paper towels or clean cloth to hold on their

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own wound in case you have cuts on your hands. If you don't have latex gloves, another barrier such as a shirt or rag is better than nothing. Getting a mosquito bite

There is no risk whatsoever from mosquito bites. In the twenty years of the HIV/AIDS epidemic, there haven't been any cases of HIV transmission from mosquitoes. Even in parts of the world where there are lots of people with HIV and lots of mosquitoes, the only people who get infected are either newborn babies (who got infected from their mothers) or people who are old enough to be having sex.

17) Being in water with people who have HIV such as pools, hot tubs or showers

There is no risk whatsoever from being in water with people who have HIV. HIV doesn't live very long outside the body especially when it is exposed to air and water.

18) Sharing a toothbrush or razor

The risk is very, very small. Experts have not found any cases of HIV transmission from sharing toothbrushes or razors. Still, even if the risk of HIV transmission is very, very small, toothbrushes and razors have spread bacteria and Hepatitis (other viruses that are spread by blood); it's smart not to share them.

19) Piercing or tattooing with a needle someone else already used.

B, a risk or C, a very small risk

Experts have not found any cases of HIV transmission from piercing or tattooing, but there have been people who have gotten Hepatitis (another virus that is spread by blood) from those activities. It is very smart never to share needles for anything. In a professional setting piercing and tattooing equipment is sometimes reused, but should always be sterilized between users. When it is sterilized properly, the risk for HIV transmission is almost zero. You should never share needles or sharps if you are self-piercing, cutting, or tattooing or doing these things to a friend.

20) Going to school with a person who has HIV.

There is no risk whatsoever from going to school with a person who has HIV.

21) Drinking beer or smoking marijuana at a party.

Although drinking beer and smoking marijuana don't directly transmit the virus, they may increase the chances of making an unsafe decision. It's always safest not to use substances that can affect your judgment.

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Still, using a substance is not an excuse for taking risks. Someone who has been drinking or smoking can still choose to be safe even though it is harder.

22) Dating someone who is a lot older.

Although dating someone who is a lot older doesn't directly transmit the virus, it may increase the chances. An older boyfriend or girlfriend is more likely to expect sex in a relationship, and it may be harder for the younger partner to stick up for themselves, partly because it can feel so flattering to be liked by someone older. So dating someone who is older makes it more difficult to abstain. It doesn't make it impossible, just more difficult. It also makes it more likely to get your heart broken or for other tough things to happen. Also, older people often have had more partners, so there's a higher risk that they may already be infected. It is safer to date someone around your own age.

23) Spending time with a boyfriend or girlfriend at home when no adults are there.

This one isn't automatically risky, it just makes it harder to keep yourself safe. It's more difficult to stick to a decision to abstain under some circumstances. I hope that you'll all take care of yourselves and the people you care about.

If you remember one thing from today I hope it is that HIV is preventable.

How Does a Person Get HIV?

Instructions: For each behavior listed below, put a check in the box that you think correctly describes the risk for getting HIV. Be prepared to defend your answer.

How risky is...?	A A BIG RISK	B A RISK	C A VERY SMALL RISK	D NOT A RISK
1. Abstaining from sex and drugs				
2. Sharing needles to inject drugs				
3. Having vaginal or anal sex without a condom				
4. Having oral sex				
5. Having vaginal or anal sex with a condom				
6. Having sex: two uninfected people in a committed relationship who don't have sex with anyone but each other				
7. Kissing (closed mouth)				
8. Kissing (open mouth)				
9. Receiving a blood transfusion before March 1985 in the U.S or now in a country that can't afford to protect its blood supply				
10. Receiving a blood transfusion after March 1985 in the United States and other wealthy countries				
11. Donating blood				
12. Touching doorknobs, toilet seats, telephones, towels, bed linen, dishes, glasses				
13. Shaking hands, hugging, touching				
14. Being with someone who is crying, coughing, or sneezing				
15. Breastfeeding from a mother with HIV				
16. Giving first aid and CPR				
17. Getting a mosquito bite				
18. Being in water with people who have HIV such as pools, hot tubs or showers				
19. Sharing a toothbrush or razor				
20. Piercing or tattooing with a needle someone else already used				
21. Going to school with a person who has HIV				
22. Drinking beer or smoking marijuana at a party				
23. Dating someone who is a lot older				
24. Spending time with a boyfriend or girlfriend at homes when no adults are there				

Teacher Answer Key: “How Does a Person Get HIV?”

Each person will have marked only one box. This key indicates multiple boxes where there may be legitimate disagreement. On those items, challenge students to explain their thinking. **The boxes with absolute right and wrong answers have been shaded.** This answer key assumes partners of unknown HIV status unless otherwise indicated.

How risky is...?	A A BIG RISK	B A RISK	C A VERY SMALL RISK	D NOT A RISK
1. Abstaining from sex and drugs				
2. Sharing needles to inject drugs				
3. Having vaginal or anal sex without a condom				
4. Having oral sex				
5. Having vaginal or anal sex with a condom				
6. Having sex: two uninfected people in a committed relationship who don't have sex with anyone but each other				
7. Kissing (closed mouth)				
8. Kissing (open mouth)				
9. Receiving a blood transfusion before March 1985 in the U.S or now in a country that can't afford to protect its blood supply				
10. Receiving a blood transfusion after March 1985 in the United States and other wealthy countries				
11. Donating blood				
12. Touching doorknobs, toilet seats, telephones, towels, bed linen, dishes, glasses				
13. Shaking hands, hugging, touching				
14. Being with someone who is crying, coughing, or sneezing				
15. Breastfeeding from a mother with HIV				
16. Giving first aid and CPR				
17. Getting a mosquito bite				
18. Being in water with people who have HIV such as pools, hot tubs or showers				
19. Sharing a toothbrush or razor				
20. Piercing or tattooing with a needle someone else already used				
21. Going to school with a person who has HIV				
22. Drinking beer or smoking marijuana at a party				
23. Dating someone who is a lot older				
24. Spending time with a boyfriend or girlfriend at homes when no adults are there				

Pregnancy

Grade 8, Lessons #5

Student Learning Objectives

To be able to...

1. Learn the myths and facts about how conception can or cannot happen.
2. Learn and know the terms in the glossary of *Pregnancy Reference Sheet 4*.

Activities

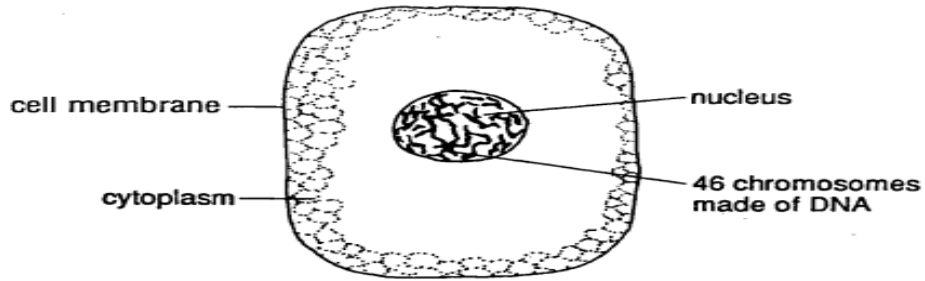
Read the following:

It's not enough to know the parts of the reproductive system. It's also important to understand how the system works and how pregnancy happens. This lesson will likely review information you have learned in earlier lessons.

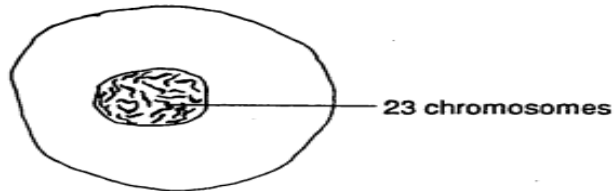
Read the Pregnancy Diagram Reference Sheets and glossary shown below. Use the information to complete the Student Question and Answer Cards. You will complete the answers and provide explanations on the cards. Submit completed assignment to your teacher.

Pregnancy Diagram 1

Muscle Cell



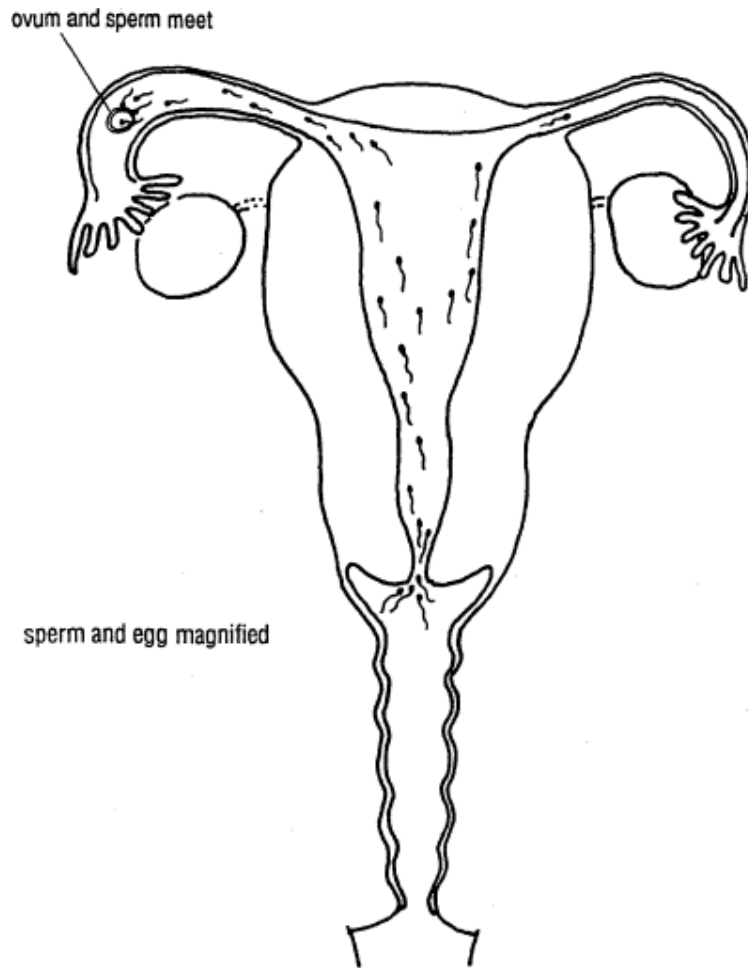
Egg Cell (ovum)



Sperm Cell

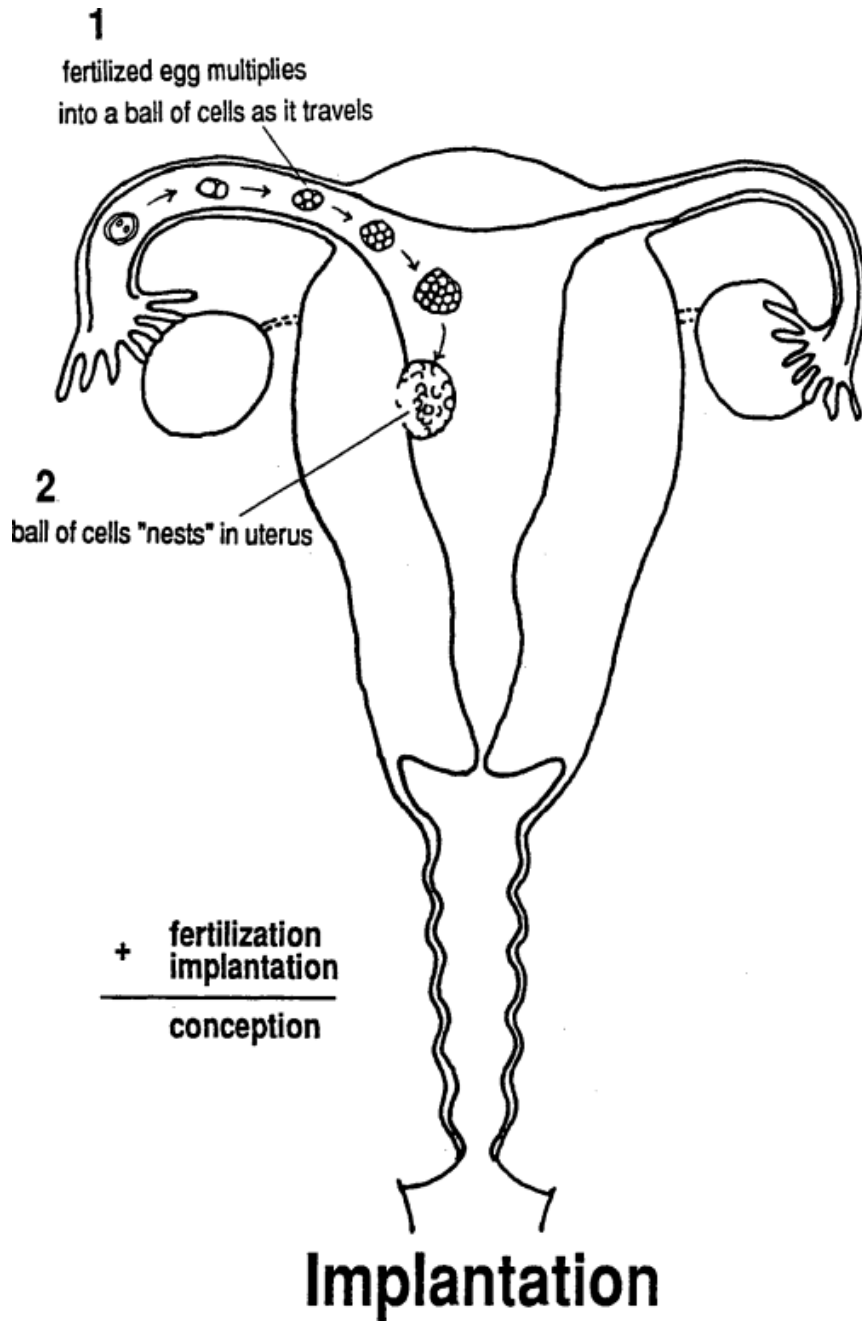


Pregnancy Diagram 2

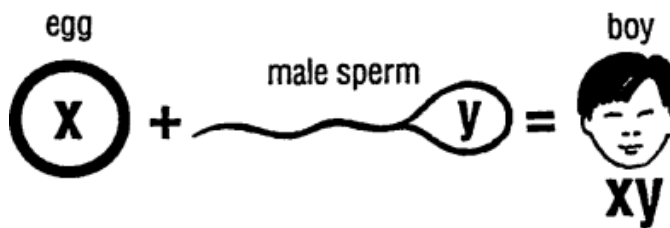
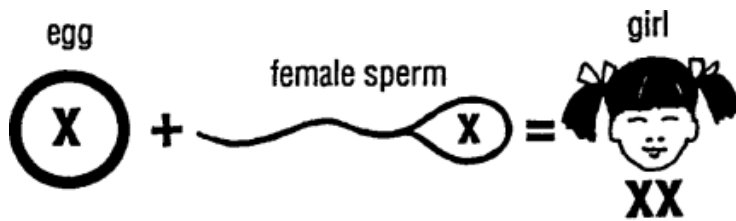
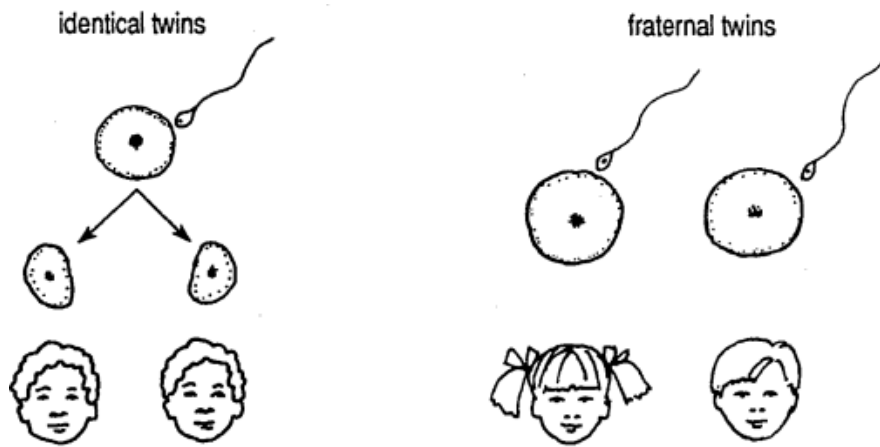


Fertilization

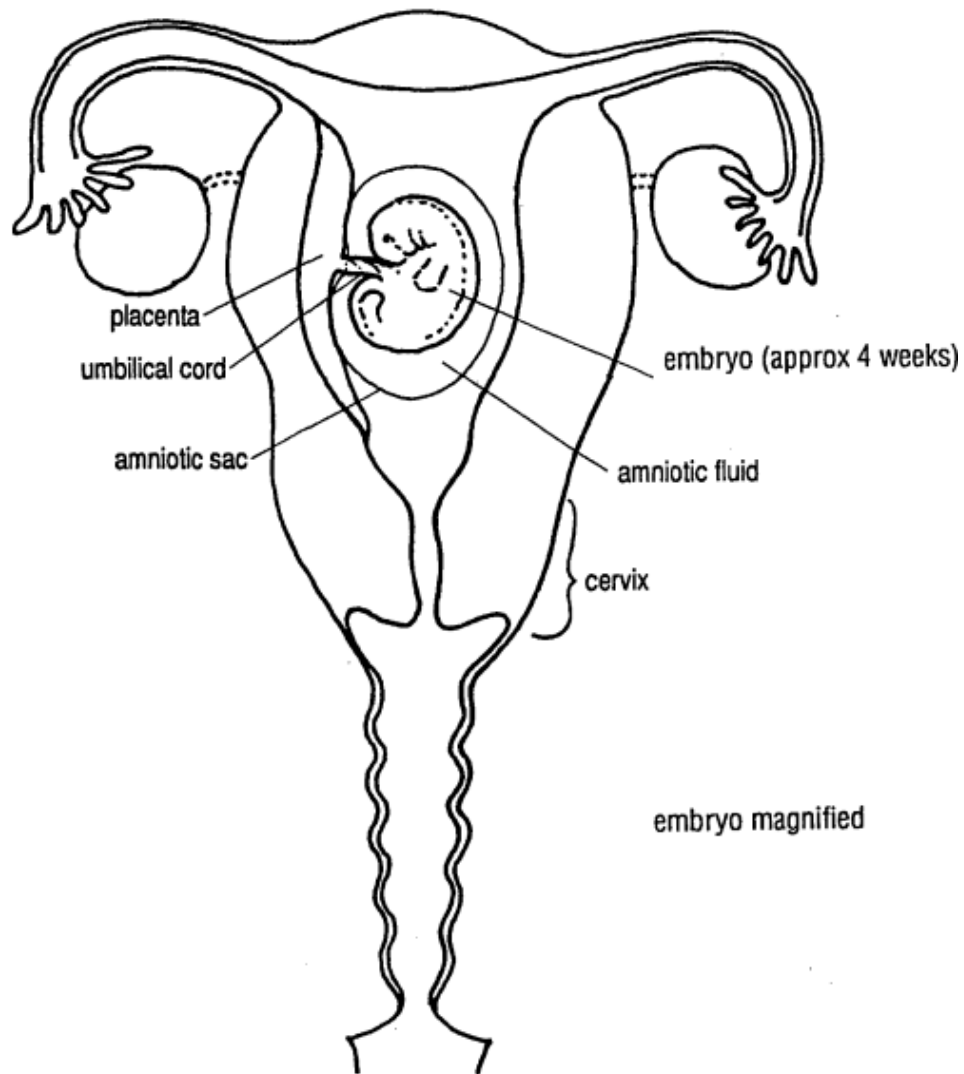
Pregnancy Diagram 3



Pregnancy Diagram 4



Pregnancy Diagram 5



Pregnancy

Pregnancy Reference Sheet:

Glossary

Amniotic Fluid – The “water” in which a developing baby floats. It acts as a cushion.

Amniotic Sac – The thin membrane (like the skin inside the shell of a chicken egg) that surrounds the amniotic fluid and the fetus.

Birth Defects – A disability that a baby is born with (retardation, heart problems, blindness, cerebral palsy, and so on).

Cell – A small part of a living thing. We are made of 100 trillion of them: bone cells, blood cells, skin cells, muscle cells, etc.

Cell Membrane – The thin membrane that surrounds every cell.

Chromosome – A string of genes.

Conception – The beginning of a pregnancy. Conception is fertilization of an ovum by a sperm, followed by implantation in the uterus ... fertilization + implantation = conception.

Contraction – The uterus (which is a muscle) squeezing to push a baby out.

Cytoplasm – The jelly-like material inside a cell’s membrane, and all the parts floating in it except the nucleus.

DNA – Deoxyribonucleic acid. The hereditary chemical of which genes and chromosomes are made.

Egg Cell – Same as “ovum” ... the cell from a girl or woman that can start a pregnancy.

Embryo – The developing baby from implantation to about 8 weeks. After that, it is called a “fetus.”

Fertile – Able to make a baby (to get pregnant or to help someone else get pregnant).

Fertilization – The joining of a sperm and an ovum.

Fertilized Egg – What an ovum is called after the chromosomes from a sperm have mixed with the ovum’s chromosomes.

Fetus – The developing baby from about 8 weeks to birth. Before that, it was called an “embryo.”

Fraternal Twins – Twins that grew from two eggs, each fertilized by a different sperm. They don’t look any more alike than any brothers and sisters because they have different genes.

Genes – The microscopic messenger codes inside each cell of our bodies. They carry the plans for many things about us: whether we are male or female; what color hair, skin, and eyes we’ll have; how tall we’ll become, how our bodies will work, etc.

Identical Twins – Twins that grew from one egg, fertilized by one sperm, that split into two balls of cells before it implanted in the uterus. They have the same genes, so they look exactly alike.

Implantation – The ball of cells (that used to be a single fertilized egg) nesting in the wall of the uterus.

Infertile – Unable to make a baby (to get pregnant or to help someone else get pregnant).

Labor – The time (a few hours to a day or more) during which a woman is having contractions and giving birth to a baby. It is called “labor” because it is hard work.

Low Birth Weight – A baby that is “too” small ... less than five and a half pounds at birth. A “low birth weight” baby is more likely to be sick or have birth defects; it is also likely to develop more slowly and to have more difficulty in school. It also may turn out healthy and do just fine.

Miscarriage – A pregnancy ending much too soon, before the embryo or fetus is able to live outside the uterus.

Nucleus – The core of a cell, which contains the chromosomes.

Ovum – Same as “egg cell” ... the cell from a girl or woman that can start a pregnancy when joined with a sperm.

Placenta – An organ that grows inside the uterus during pregnancy to carry food and oxygen from the mother and waste from the embryo or fetus. It produces many hormones that affect both the mother and the baby. It develops from the original ball of cells that implanted in the uterus.

Pregnant – A woman who is going to have a baby.

Premature – Born “too” soon ... after fewer than 38 weeks (9 months) of pregnancy. Depending on how early she or he is born, a premature baby may have serious birth defects or problems and die, minor birth defects or problems and do OK with help from the hospital, or no birth defects or problems and do just fine.

Prenatal – Before birth. Prenatal care means getting special check-ups at least once a month from a doctor starting as early in a pregnancy as possible. Good, early prenatal care can greatly reduce the risk of birth defects, low birth weight, or prematurity. It also helps keep the mother healthy.

Sperm – The cell from a boy or man that can start a pregnancy when joined with an ovum.

Umbilical Cord – The tube leading from the navel of the embryo or fetus to the placenta. It carries food and oxygen to the developing baby, and waste from the developing baby.

PREGNANCY REVIEW QUESTION AND ANSWER

<p>1. Q: From conception to about eight weeks, the developing baby is called what?</p> <p>A:</p> <p>Explanation:</p>	<p>2 Q: After about eight weeks of development, the developing baby is called what?</p> <p>A:</p> <p>Explanation:</p>
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PREGNANCY REVIEW QUESTION AND ANSWER

<p>3.Q: What do you call the meeting of a sperm and an ovum?</p> <p>A:</p> <p>Explanation:</p>	<p>4.Q: What do you call it when the ball of cells nests in the uterus?</p> <p>A:</p> <p>Explanation:</p>
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Grade 8 Lessons 5

<p>5 Q: The organ that brings oxygen and nourishment to the fetus, and removes waste products is the _____.</p> <p>A:</p> <p>Explanation:</p>	<p>6 Q: The plans for a new human being are contained in DNA molecules called_.</p> <p>A:</p> <p>Explanation:</p>
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PREGNANCY REVIEW QUESTION AND ANSWER

<p>7 Q: The core of a cell is called the _____.</p> <p>A:</p> <p>Explanation:</p>	<p>8 Q: When the uterus squeezes during the baby's birth, it is called a _____.</p> <p>A:</p> <p>Explanation:</p>
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<p>9 Q: What would make a girl or woman think she might be pregnant?</p> <p>A:</p> <p>Explanation:</p>	<p>10 Q: How many chromosomes are in a human body cell (like a white blood cell, a brain cell, or a muscle cell)?</p> <p>A:</p> <p>Explanation:</p>
<p style="text-align: center;">PREGNANCY REVIEW QUESTION AND ANSWER</p>	
<p>11 Q: How many chromosomes are in an ovum or a sperm cell?</p> <p>A:</p> <p>Explanation:</p>	<p>12 Q: Is it the ovum or the sperm that determines what sex the baby will be?</p> <p>A:</p> <p>Explanation:</p>

<p>13 Q: If a hundred couples had sex for one year, without any birth control, how many would start pregnancies -- about 30, about 60, or about 90?</p> <p>A:</p> <p>Explanation:</p>	<p>14 Q: When is the most likely time of the month for a pregnancy to start -- two weeks <i>before</i> the girl's or woman's period, or <i>during</i> her period, or right <i>after</i> her period?</p> <p>A:</p> <p>Explanation:</p>
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PREGNANCY REVIEW QUESTION AND ANSWER

<p>15 Q: How long can sperm live in the woman's body waiting for an egg?</p> <p>A:</p> <p>Explanation:</p>	<p>16 Q: How long can an egg live after it leaves the ovary, waiting for a sperm?</p> <p>A:</p> <p>Explanation:</p>
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<p>17 Q: How many egg cells need to be released to form identical twins?</p> <p>A:</p> <p>Explanation:</p>	<p>18 Q: True or False? One drop of semen can start a pregnancy.</p> <p>A:</p> <p>Explanation:</p>
<p>PREGNANCY REVIEW QUESTION AND ANSWER</p>	
<p>19 Q: True or False? Unless a boy and girl really love each other, they cannot start a pregnancy.</p> <p>A:</p> <p>Explanation:</p>	<p>20 Q: True or False? A pregnancy will usually not start unless the people really want a baby.</p> <p>A:</p> <p>Explanation:</p>

<p>21 Q: True or False? Most people need to have sex at least four or five times to start a pregnancy.</p> <p>A:</p> <p>Explanation:</p>	<p>22 Q: True or False: Most people need to have sex for at least half an hour to start a pregnancy.</p> <p>A:</p> <p>Explanation:</p>
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PREGNANCY REVIEW QUESTION AND ANSWER

<p>23 Q: True or False? A girl or woman can get pregnant by masturbating.</p> <p>A:</p> <p>Explanation:</p>	<p>24 Q: True or False? Some girls can get pregnant as young as age 9.</p> <p>A:</p> <p>Explanation:</p>
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<p>25 Q: True or False? Some boys can start pregnancies as young as age 11.</p> <p>A:</p> <p>Explanation:</p>	<p>26 Q: True or False? Pregnancies can start even without intercourse.</p> <p>A:</p> <p>Explanation:</p>
PREGNANCY REVIEW QUESTION AND ANSWER	
<p>27 Q: True or False? A girl can get pregnant at any time of the month.</p> <p>A:</p> <p>Explanation:</p>	<p>28 Q: True or False? A girl cannot get pregnant from sexual abuse or rape.</p> <p>A:</p> <p>Explanation:</p>

<p>29 Q: True or False? Pregnancy usually starts during the girl's or woman's menstrual period.</p> <p>A:</p> <p>Explanation:</p>	<p>30 Q: True or False? A couple can start a pregnancy the first time they have intercourse.</p> <p>A:</p> <p>Explanation:</p>
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PREGNANCY REVIEW QUESTION AND ANSWER

<p>31 Q: True or False? Each time a couple has intercourse, they start a pregnancy.</p> <p>A:</p> <p>Explanation:</p>	<p>32 Q: True or False? If a pregnancy does not happen in the first month of intercourse, one of the people must be infertile.</p> <p>A:</p> <p>Explanation:</p>
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Abstinence

Grade 8, Lessons #6

Student Learning Objectives:

To be able to...

1. Know that touch is a basic human need.
2. Know the differences between healthy, constructive touch and risky or destructive touch.
3. Know about the different types of touch: nurturing, affectionate, sexual, violent, and exploitive touch.
4. Know the meaning of abstinence and know reasons for choosing it.

Activities

Read the following:

In this lesson you will review two ways people make decisions. One decision you have to make over and over throughout our lives — is what kinds of touch we want, when, with whom and under what circumstances.

You learned about sexual abuse when you were younger but as you get older, touching can get harder to figure out. That is what this lesson is about.

- Some people think all touch is sexual. There are many kinds of non-sexual kinds of touch.
- Some people are uncomfortable touching friends. That feeling may hurt them in the long run. It means they can't be as close to their friends as other people can be. It deprives them of endorphins – nature's pain-killing hormones. It might make them more likely to seek those feel-good chemicals through risky sexual touch.
- Some guys feel like the only OK kinds of touch are rough-housing (like tackle football) or sexual touch. That feeling may hurt them in the long run. It means they can't be as close to their friends as other people can be. It deprives them of endorphins – nature's pain-killing hormones. It might make them more likely to seek those feel-good chemicals through physically violent, risky sports or fights or through risky sexual touch.

Read the information on the Touch Reference Sheet shown below.

Touch Reference Sheet

FIVE BASIC KINDS OF TOUCH

NURTURING TOUCH = Comforting touch, mostly for the sake of the one being touched.

Examples: Neck rub, pat on the back, hugs of appreciation, brushing someone's hair, holding a crying person, caressing a sick person's hand, petting an animal.

AFFECTIONATE TOUCH = More equally balanced between the two persons. Shows affection, caring, joy.

Examples: Brief hugs, brief kisses, holding hands, rubbing shoulders, high-five after a winning game, some rough-housing, some dancing.

SEXUAL TOUCH = May last longer, be softer, involve sexual parts of the body, though not always.

Examples: Longer hugs or kisses, sexual intercourse, some massage, some dancing.

VIOLENT TOUCH = Touch that physically hurts someone. Shows anger or power.

Examples: Slapping or shoving someone in an argument, boxing or tackling for sport, spanking a child for discipline.

EXPLOITIVE TOUCH = Mostly for the sake of the one doing the touching. One person may feel tricked, teased, pushed, threatened, forced, or —talked into touching. No one deserves to be treated this way.

Examples: Child sexual abuse, being teased into touch by your friends, being pinched on a private part by a person on the street, being touched roughly when you expected gentleness, being forced into sexual touch by someone you go out with.

BELIEFS ... Every family, culture, and religion has its own beliefs about each kind of touch.

Touch Reference Sheet (continued)

SOME SPECIFICS

SEXUAL INTERCOURSE = One kind of sexual touch, when the penis is inside the vagina.

Note: Forced intercourse is rape. It is never fair and it's illegal. Sexual intercourse should be a very close and caring experience.

Fact: Intercourse can lead to pregnancy.

Fact: Most people have intercourse at some time in their lives.

Myth: Everyone is having intercourse now.

Myth: Sexual touch always includes intercourse.

Beliefs: Each culture, religion, and family has its own beliefs about when intercourse is OK and when it isn't.

ABSTINENCE = Choosing not to have sexual intercourse.

Fact: Abstinence is a good way to reduce the risk of sexually transmitted infections.

Fact: Abstinence is a 100% perfect birth control method (as long as no sperm is released anywhere near the vagina or vulva).

Myth: Only immature children and nerds abstain.

Fact: Most people abstain at some times during their lives.

Fact: Abstaining can show strength and maturity.

Beliefs: Each culture, religion and family has its own beliefs about abstinence.

MASTURBATION = A person stroking his or her own genitals for comfort or pleasure.

Fact: Most people masturbate at some time in their lives.

Myth: If you do not masturbate, there's something wrong with you.

Myth: If you do masturbate, there's something wrong with you.

Myth: Masturbating hurts your body, makes you insane, makes you infertile, gives you warts, or causes hair to grow on your palms.

Fact: It does not hurt your body.

Belief: Each culture, religion and family has its own belief about masturbation.

Touch Reference Sheet (continued)

A Bill of Rights

You have a right to like touching one person and not another. (Just because you hugged your aunt, doesn't mean you have to want to hug your cousin.)

You have a right to like some kinds of touch and not others. (Just because you wanted to kiss, doesn't mean you have to want to hold hands.)

You have a right to change your mind. (Just because you hugged your friend yesterday, doesn't mean you have to now.)

You have a right to not have a reason ... just to choose not to touch or be touched without any explanation.

You have a right to need touch even when you are:

- Elderly
- Single
- Disabled
- A teenager
- Married

A Bill of Wrongs

You have a right to ask for touch, but you **never** have a right to:

- **Push** (if he/she says —no, you're pushing)
- **Threaten** (—If you don't, I'll break up with you/slap you/kill myself/tell other people you did it anyway.)
- **Bargain for touch** (—I'll pay for expensive dates. —I'll be your girlfriend/boyfriend. —I'll take you to Homecoming —I'll stop teasing you.)
- **Put a person down for saying "no"** (—What's wrong with you? —You're chicken/a wimp/a baby. —You think you're too good!)

Did you know that...

- Touch can lift depression, help the body's immune system fight disease, and help a sick person heal more quickly.
- Touch can increase the amount of hemoglobin in the blood, sending more oxygen to your heart and brain.
- Touch can release chemicals called endorphins into your blood and endorphins are a natural pain killer.
- YOU DESERVE GOOD TOUCH!

Read the following.

Position Paper: Touch and Abstinence

Some people believe that any kind of touch is OK as long as it feels good. Other people believe that the only right kind of sexual touch is intercourse in marriage. Still others believe something in between, but most people agree that touch itself is important.

In fact, we need touch. Babies learn to love, trust and feel safe by being cuddled and caressed. They can even die if they are never touched except to be changed or bathed! Kids, teens, adults and older people all need good touch, too. We can feel very alone and unimportant without it.

Good touch can include cuddling, caressing, hand holding, rubbing someone's back, patting their head, rough-housing, kissing, hugging, and, of course, under some circumstances, sexual intercourse.

Touch is not good; however, if one person talks the other into it, teases or tricks them into it, or forces them into it. It is not good touch if one person is doing it because they feel they "owe" it to the other person, or because they are scared not to. In fact, it is never good touch if:

- ☐ one or both people are high or drunk
- ☐ they are just touching so they can brag about it later
- ☐ they are worried about how the other person feels about it (instead of asking)
- ☐ they don't feel right about it themselves (for example if they are doing something they really believe is wrong)

Some touch can make you feel cared about and it can be fun. On the other hand, some touch only makes you feel lonely and it's not fun ... for either person.

Most little kids get a lot of good touch within their families. Some families begin to touch less, as their children become teens. That's too bad ... it leaves a lot of teens —touch-starved. If you are feeling like you could use some touch, a good place to start is at home. Teens can also begin to look to their friends for touch - through contact sports, shared backrubs, braiding a friend's hair, rough-housing and hugs.

Remember, a person learns first how to build trusting, playful, considerate, relaxed friendships, and then how to build love. One has to come before the other ... because love is really the closest of friendships.

Part of growing up also often includes experimenting with touch with a special friend, sometimes a boyfriend or girlfriend. Some of you may not be at all interested in that at your age. Many people aren't. Others of you may be feeling sexual feelings. You may or may not decide to act on those feelings. Remember, feeling doesn't necessarily equal acting in human

beings. For people, there is a step between feeling and acting.

That's deciding.

Whether or not they decide to touch with special friends, many teens decide NOT to include sexual intercourse in their touching. NOT having intercourse is called —abstinence.

We asked high school students why they were choosing abstinence. Yes, lots of people decide to wait. They told us:

"Hey, it's the only 100% perfect kind of birth control and I'm really not ready to be a parent."

"We talked it over and, well, abstaining gives us time to really get to know each other ... to become real friends. That's important to both of us. We still touch a lot; we just leave out some kinds of touch."

"It not only prevents pregnancy ... it has no side effects and it's free!"

"My religion says it's wrong to have sex before you're married. I agree. Period."

"I just don't want to take ANY chance of getting herpes ... or any kind of infection for that matter. I'd rather wait."

"I feel waiting can be a test of love. If a girl really cares about me, she won't need to put me down for preferring to wait."

"I heard that the younger you start „doing it“ and the more people you „do it“ with, the more chance you have of getting cancer of the cervix. I don't judge other people, but it's not worth the risk to me."

"I just wouldn't feel right. I had sex once and I felt crummy afterwards. I'd rather wait, till I'm sure I'll feel good about myself afterward."

"There are plenty of ways to show affection and caring without having sex. You just have fun in different ways."

"I don't want to take time and energy away from my music. That's totally important to me. I just know from when I was in love before, that sex made our relationship a lot heavier. I don't want that now. I'm more important."

"I think people who get all hung up wanting to lose their virginity just don't like themselves very much. I'm not in any hurry."

Grade 8 Lesson 6

Did you know that six out of 10 high school sophomores in the U.S. have never had intercourse? Touch, even sexual touch, does NOT have to include intercourse. And most people prefer to wait.

So, remember...

Touch is important.

Touch is not always sexual. Sex is not always intercourse.

Human beings can choose not to act on feelings. Human beings can choose how to act on feelings. Human beings can choose when to act on feelings.

