**Module 5: The Consequences of Sex: STDs**

**PREPARATION:**

Choose a platform (Zoom or Google Meet) and check how students will access the session (posting on Google Classroom, email reminder, etc). Decide how you will handle questions - if you will collect via chat box, and respond during the session, or create a “Question Box” for students to be able to submit questions via Google Forms, and provide responses in future sessions or online (Google Classroom or email). Alternatively, students may submit questions via email, Instagram, or other preferred platforms. Review materials and test out any links to external media (video clips, etc). Gather needed materials (paper and pen/pencil; penis model, condoms and lubricant, as well as tissues or wipes; and socks). This material is written to be presented by two facilitators, in approximately 45-60 minutes. Facilitators should decide in advance which person will present, and which will record responses and monitor the chat box.

**PRESENTATION:**

**(Slide 1: Introduction)**

*(Camera view on)*

“Hi! Welcome to module 5 of Making Proud Choices. I’m \_\_\_\_\_\_, and this is my co-facilitator, \_\_\_\_\_\_, and today, we will be learning about sexually transmitted diseases (STDs), also known as sexually transmitted infections (STIs). When we’re finished, you will be able to:

-Identify the signs and symptoms of the most common STDs;

-Identify how STDs, including HIV, are transmitted, and how they can be prevented;

-Understand your risk for sexually transmitted diseases;

-Demonstrate the steps for correct use of a condom; and

-Identify how condoms can prevent STDs, including HIV, and pregnancy.

To do that, we’re going to watch some videos, review some information, do some activities, and watch a condom demonstration. But first, we’re going to do a short icebreaker.”

**(Slide 2: Icebreaker - Superpowers)**

*(Switch to sharing screen, and slides)*

“One of the things we’ve been talking about is how to make responsible decisions. All of you already have a superpower that can help protect you - your brain! But if you could choose one other superpower to have, what would it be? We’re going to take 15 seconds to think, and then please respond in the Zoom poll that will pop up.”

*(PAUSE, then open poll. Give students 15 seconds, then close poll and display answers).*

Provide validation for students’ responses: “Wow! Some great responses here!”

**(Slide 3: Brainstorm)**

“Let’s do a quick brainstorm - how many STDs can you name? Please type them into the chat box, and I’ll record them on the whiteboard (or Jamboard, if using Google Meet)”  *(\*alternatively, if working with a small group, encourage them to come off of mute and share verbally)*

*(Open white board; PAUSE for student responses and record; students will likely get some of them correct, but make sure to write down all of the answers)*

Validate responses: “You have a lot of information about this topic already! Let’s watch a short video together now, and learn some more.”  *(\*alternatively, if working with students who might not have a stable connection, or might have a challenge accessing video, skip the video, and spend more time verbally explaining the subsequent slides.)*

**(Slide 4: Videos and Discussions)**

Play each video and debrief with questions after each:

1.“What are STDs? #FactCheck”: <https://www.youtube.com/watch?v=7Sbgg8icODY>

Ask: What is something new you learned about STIs?

1a.If you have extended time, also watch “STD Prevention Beyond Condoms”: <https://www.youtube.com/watch?v=41cFmDTABJY> Same Follow up question as above.

2. “Getting Tested for STD’s” <https://www.youtube.com/watch?v=_EKnKJ-Wb-g&feature=youtu.be>

Ask: What is one take-away about getting tested?

3. “STD Prevention Beyond Condoms” <https://www.youtube.com/watch?v=41cFmDTABJY&feature=youtu.be>

Ask: What were some reasons to use abstinence that were shared in the video?

What are some ways, besides using external condoms, to protect yourself from STIs?

\*Optional Video: “Getting Tested”: <https://www.youtube.com/watch?v=YXtLEwxBrYA>

Ask:

What important messages were shared about getting an STI and/or living with an STI?

How might it feel to find out you have an STI?

How might it feel to tell someone you have an STI?

How might it feel to have a partner disclose an STI? Before engaging in a sexual

behavior? After engaging in a sexual behavior?

What could you do if you found out you or a partner had an STI?

How do respect and healthy communication fit in to conversations with a partner

about STIs and testing?

How can you apply what you learned about communication to your relationships?

Wrap reviewing Take-Away’s:

* STIs are common and often people who have an STI don't know it or don't have symptoms. Condoms offer protection from STIs.
* Getting tested is the only way to know if you have an STI. Some STIs can be cured and will go away with medication. Some cannot be cured but medication can help manage the symptoms.
* Talking about STIs is an important way you can protect yourself, your partner(s) and your relationship. Talking about STIs may bring up emotions so it’s important to be respectful and open during these conversations

**(Slide 5: List of STDs)**

“Now that we’ve learned a little more about STDs, let’s talk more about them. You brainstormed a great list earlier, and got a lot of these right. This is a list of the most common STDs: chlamydia, gonorrhea, syphilis, HPV, HIV, herpes, trichomoniasis and hepatitis B. You may notice that they’re in different colors - would anyone like to guess what those colors mean? You can type in the chat box.”

*(PAUSE briefly for student responses - may include “how you get them” or “who gets them”)*

“Great guesses! The colors are actually the types of STDs. there are three types of STDs: the purple are bacterial, caused by bacteria, which can be cured with antibiotics; the blue are viral, caused by a virus, which cannot be cured; and the green is parasitical, caused by parasites, and which can be cured with medicine. As you can see, chlamydia, gonorrhea and syphilis are bacterial, so they can be cured with medicine; trichomoniasis is parasitical, and can also be cured; and HIV, HPV, herpes and hepatitis B are all viral, so would stay in the body forever, although some of their symptoms can be managed with medication.”

“So, what do you notice about all of the viral STDs? (PAUSE)They all start with the letter H!”

**(Slide 6: How Do People Get STDs)**

“Let’s talk about HOW people get STDs. There are 4 ways to get an STD: 1. sex: oral, vaginal and anal; 2. Mother-to-child; 3. sharing needles; and 4. skin-to-skin, for some STDs.”

*(PAUSE to let students process)*

“I want to make an important point here: ANYONE who has unprotected sex can get an STD, but people your age acquire half of all new infections each year.” *(can also provide local/updated statistics)*

**(Slide 7: Symptoms)**

“Here’s a list of some of the symptoms of STDs *(read through as time permits)*, but it’s important to remember that often, a person has NO symptoms, and you cannot tell if someone has an STD.”

**(Slide 8: How Can You Protect Yourself)**

“Let’s talk about how you can protect yourself. Abstain from vaginal, oral and anal sex.

Use a latex or polyurethane/polyisoprene condom every time you have vaginal, oral or anal sex.

Some STDs can be prevented. There is a vaccine that can prevent hepatitis B. There is also a vaccine that protects young people against most types of HPV that cause genital warts or lead to cervical cancer.” (*mention where students can access vaccination services)*

**(Slide 9: Why Would We Want to Avoid Getting an STD)**

“Now, let’s think about why people might want to avoid getting an STD. Please chat in your responses *(\*come off mute for smaller group)*, and I’ll record them on the whiteboard (Jamboard).”

(*Open white board; PAUSE for student responses and record. Students may focus on the social aspects - embarrassment or loss of partner. If students do not mention the following, list verbally or add to the whiteboard, depending on time:*

*Increased risk of getting HIV; Death (syphilis, AIDS); Blindness (syphilis); Paralysis (syphilis, AIDS); Brain damage (syphilis, AIDS); Cervical cancer (HPV); Pelvic inflammatory disease (gonorrhea, chlamydia); Infertility (gonorrhea, chlamydia); Ectopic pregnancy (gonorrhea, chlamydia); Chronic pelvic pain (from PID); Liver disease (hepatitis B); Child born with an STD (blindness, brain damage, death); Embarrassment; Odor and discharge; Loss of relationship)*

Validate responses: “You have come up with a lot of good reasons to avoid getting an STD. I want to make it clear that no one chooses to get an STD, and some people have gotten STDs from sex that was against their will.”

**(Slide 10: 4 Important Facts)**

“Now, just to recap what we’ve talked about so far:

1. Anyone can get an STD. Young people ages 15-24 make up half of all new STD cases. You or a partner can have an STD and not know it. Many people with STDs have no symptoms.

2. STDs increase the chance of HIV infection. They sometimes cause blisters or sores on or around the genitals which can become a point of entry for HIV during sex.

3. STDs can have serious emotional and physical consequences, including possible death in the case of AIDS and syphilis. The consequences for women are especially harsh and include things such as pelvic inflammatory disease, ectopic pregnancy, cervical cancer, infertility, chronic pelvic pain, and possible transmission of the STD to her baby.

4. Some STDs cannot be cured. This includes HIV.”

**(Slide 11: If You Choose…)**

“Remember: if you choose to have sexual intercourse, the proud and responsible thing to do is

always use a latex or polyurethane/polyisoprene condom. Not having sex is the surest way to prevent an STD.”

*(PAUSE, switching back to camera view from shared screen)*

That’s a lot of information! Before we move on to our next activity, let’s take a quick stretch break.” *(model stretching in your seat, moving your arms)*

**(Slide 12: The Transmission Game)**

“Now that you’ve learned more about what STDs are, we’re going to do an activity. All you will need is a pen or pencil and a piece of paper.”

(*\*IF TIME PERMITS*: Warm up with a brief “discussion” (via chat box or, if students wish to respond verbally, taking them off mute), with the “Unfinished Sentences” (If I had a condom in my pocket or purse, my partner would think…; I could convince my partner to use a condom if I…; You can make using condoms fun by…; If I asked whether my partner was having sex with other people, the response might be…; If I asked my partner to use a condom, the response would be…; People do not like to use condoms because…). With larger groups, utilize the breakout room feature for this exercise.)

*(NOTE: the following is intended for small groups where students will know each others’ names; if working with larger groups, or groups of students who might not know their classmates, use the Large Group Adaptation that follows)*

“If your birthday is between January and March, please write the letter ‘A’ at the top of the paper. If your birthday is between April and June, please write the letter ‘C’ at the top of the paper. If your birthday is between July and September, please write the letter ‘U’ at the top of the paper. If your birthday is between October and December, please write the letter ‘D’ at the top of the paper. When you’re done, give me a thumbs up.”

*(PAUSE for students to write; write an example and display on screen)*

“Great! Now below that, please write the names of one, two or three other people in the group.”

*(PAUSE, giving students approximately 1 minute to write names; write an example using made-up names, and display on screen)*

“Okay, now I’d like everyone to hold up their pieces of paper so they’re visible on the screen. Super. Now, I’d like the students who have the letter D to keep your papers visible. Everyone else may put their papers down.”

*(PAUSE briefly)*

“For the purposes of this exercise, anyone with the letter D has been diagnosed with an STI. Any of the rest of you with one of the “D Students’” names written on your paper may have been exposed. Please check your papers.”

*(PAUSE to give students a chance to look at their papers. If students seem unsure, walk them through the process, using students’ names if known.)*

“Okay, thank you D Students - you may put your papers down. Any of the students who had one of the D Students’ names written on their paper, please hold your papers up.”

*(PAUSE to give students time to follow the direction)*

“Anyone with their paper up, if you have the letter A at the top of your paper, in this exercise, you chose abstinence, so your exposure did not result in contracting an STI. A Students, you may put your papers down. Other students, please keep your papers up.”

*(PAUSE to give students time to follow the direction)*

“Anyone with their paper still up, if you have the letter C at the top of your paper, in this exercise, you chose to use condoms, so your exposure did not result in contracting an STI. C Students, you may put your papers down. Other students, please keep your papers up.”

*(PAUSE to give students time to follow the direction)*

“Okay, anyone with their paper still up, you should have the letter U at the top of your paper. In this exercise, you chose to to have unprotected sex - oral, anal or vaginal sex without a condom - so your exposure to the STI has resulted in an infection.”

*(PAUSE to give students time to process)*

“You all did a great job with that! I want to make it clear that this was just an exercise - your letters came from your birth month, not your sexual activity or history. Let’s take a quick stretch break, and then we’ll talk more about the exercise.”

*(PAUSE to give students time to stretch; model stretching your arms or moving your head).*

“Let’s start with the D and U students: How did it feel to imagine you had been infected with an STD?

*(PAUSE to give students time to respond, preferably by speaking/coming off of mute. You may offer the option of responding in the chat box if they feel more comfortable. Some may mention shame, anger or embarrassment; validate all feelings they express. If they seem hesitant to share, you can prompt them by asking if they felt embarrassed, even though it wasn’t real life.)*

“Thank you for sharing those responses. A and C students, how did you feel about possibly being infected? How did you feel when you got the news that you had ‘protected’ yourself?”

*(PAUSE to give students time to respond, preferably by speaking/coming off of mute. You may offer the option of responding in the chat box if they feel more comfortable. Some may mention happiness, relief, feeling proud or responsible; validate all feelings they express. If they seem hesitant to share, you can prompt them by asking if they felt relieved, even though it wasn’t real life.)*

“For all of the students, I want to ask: what did you learn from this activity?”

*(PAUSE to give students time to respond, preferably by speaking/coming off of mute. You may offer the option of responding in the chat box if they feel more comfortable. Some may mention that they learned how easily transmitted STIs are, or how you don’t know if someone has an STI. Offer supportive, encouraging responses to all of their comments. If they seem hesitant to share, you can prompt them by asking if they felt this was realistic. Make sure the importance of using protection - condoms or dental dams - for every sex act, every time is discussed. Reiterate that birth control does NOT protect against STIs.)*

“Thank you all for sharing - you have some really great thoughts on how this might feel for someone. I want to repeat that this was only a game, and only to give you an example of how STIs can be easily transmitted. No one chose their letter, and having the letter D does not mean anything in real life. Great job, everyone!”

*(Switch back to sharing the screen, and go to slide 13)*

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*Large Group Adaptation: Have each student write down a number between 1 and 6; and a letter (A, if birthday between Jan-Mar; C, if birthday between Apr-Jun; U, if birthday between Jul-Sept; or D, if birthday between Oct-Dec). Circle that number/letter combination. Then have them choose two other numbers (not their original number) and write those below the circled number. Ask students to look at their circled number/letter combination. Ask for one student who had the letter D to identify themselves, and share their number. Inform the class that anyone with a D has been diagnosed with an STI, and anyone with that number has been exposed. Ask if any students with that number have the letter A, and explain that because they chose abstinence, their exposure did not result in contracting an STI. Ask if any students have the letter C, and explain that because those students chose to use condoms, their exposure did not result in contracting an STI. Ask if any students have the letter U, and explain that because they chose to have unprotected sex (oral, anal or vaginal sex without a condom), their exposure to the STI has resulted in infection.*

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*(ALTERNATIVE, if working with younger students, or students who might feel stigmatized, use the “Health Care Provider Exercise” (see asynchronous materials): assign each student (or group of students) a patient and each patient a letter - writing it out ahead of time, posting the list on the shared screen - then follow the process of the game as above.)*

**(Slide 13: Agree / Disagree)**

“For the next activity we’re going to do, I’d like everyone to fold their papers in half, so that the writing from the previous exercise is on the inside. *(Demonstrate).* Now, on the front, please write “AGREE”, and then flip the paper over and write “DISAGREE.” *(Demonstrate).*

*(PAUSE to give students a chance to follow the directions)*

“Great. Now, I’m going to read 6 statements. If you agree with the statement, please hold the AGREE side of your sign, and if you disagree, hold up the DISAGREE side.” *(alternatively, thumbs up/down in the chat box, or via “responses” on Zoom)*

“1: It is hard to convince a sexual partner to use a condom.”

*(PAUSE to give students time to display their answers.)*

“Can a couple of people share why they answered the way they did? You can come off of mute, or type in the chat box.”

*(Give 1-3 students time to respond, depending on how much time or interest there is. Student responses may include that it’s hard, because the person might not like how it feels; they’re afraid of losing their partner, or disappointing them; the partner doesn’t think it’s important; it’s a couple who already use birth control or sex that will not result in pregnancy, so condom use doesn’t matter. Make sure to respond to and either validate or gently correct all responses. Repeat for each of the statements until all 6 statements have been responded to and discussed. For more guidance for instructor responses, refer to the script in MPC.)*

2. Condoms are effective at preventing HIV infection.

*(Student responses may include that they don’t know; reinforce that condoms are effective at preventing STDs, including HIV)*

3: Sex can feel good if you use condoms.

*(Student responses may include disagreement; respond that sex with condoms can feel different, but it can feel good to know you’re being safe and protecting yourself and your partner)*

4: Most people know how to use condoms correctly.

*(Student responses may vary; reinforce that like any skill, being able to do something correctly depends on knowing how to do it, and practicing the skill, which we will learn more about next)*

5: If you know your sexual partner very well, you shouldn't have to use a condom.

*(Student responses may include agreement; gently respond that anyone can have an STD, many people who have STDs don’t know they’re infected; if there are concerns about being perceived to not trust a partner, or being interpreted as accusing the partner of infidelity, point out that people may have been infected before their current sexual relationship)*

6: If someone looks healthy, you shouldn't have to use a condom.

*(Student responses may include agreement; gently respond that anyone can have an STD, many people who have STDs don’t know they’re infected and don’t look sick)*

**(Slide 14: Amaze video)**

“The last thing we’re going to do today is learn how to use a condom correctly. First, we will watch a short video, and then, if we have time, I will demonstrate using a penis model.”

*(PLAY video, “Condoms: How to Use Them Effectively”* [*https://www.youtube.com/watch?v=oaLdNErJ-Fk*](https://www.youtube.com/watch?v=oaLdNErJ-Fk) *)*

**(Slide 15: Steps for Using a Condom/Instructor Demonstration)**

*(Switch back to camera view)*

“Now, I’d like to demonstrate the correct way to put on a condom. I’m going to use a penis model here *(fingers, banana or other phallic item if penis model unavailable)*. I’m going to ask my co-facilitator to read each of the steps as I do the action.”

*(Arrange penis model, condom and lubricant, if using, in view of camera, placing the penis model on a table or other surface. Follow the action of each step below as co-facilitator reads them.)*

“1. Check the expiration date and make sure the condoms are latex or polyurethane /polyisoprene. If a condom is expired, don’t use it.

2. Open the package carefully to avoid tearing. Never use your teeth or a sharp object.

3. Make sure condom is on the proper side to roll down correctly. You can check with a finger to make sure it’s facing the right way to be able to roll down. If you do start rolling it down on the wrong side - if it doesn’t roll - throw it away and use a new condom.

4. Pinch the tip of the condom to create space (½ inch) for semen.

5. Squeeze a few drops of water-based lubricant inside the tip. Never use oil-based lubricants, like lotions or Vaseline.

6. Continuing to squeeze the tip, roll the condom down to the base of the penis. The penis must be erect/firm/hard to put on the condom. Apply water-based lubricant to the outside of the condom, if desired. Lubricant can make sex more comfortable and pleasurable for both partners.

7. Check during intercourse to make sure the condom isn’t slipping. Condoms come in sizes, and you may need to try a different size if this happens. If a condom has slipped off during sex, you may be at risk for STDs or pregnancy, and should follow up with a healthcare provider.

8. Immediately after ejaculation, hold the condom firmly at the base of the penis and pull the penis out before it gets soft. Not doing this could allow some of the semen to spill out of the condom.

9. Roll off the condom away from your partner. Wrap in tissue and throw it away. Do not re-use. Again, do not re-use condoms. You should use a new condom for every sexual act, oral, vaginal or anal. Also, do not flush them in toilets, as they could clog the toilet.

Does anyone have any questions?”

*(PAUSE to give students time to process, and ask any questions.)*

“Practicing any skill before you need to use it is a great way to be prepared, and that’s true for condom use skills. If you have access to condoms, you can follow the steps in the video, which you can find on Amaze.org. You can use a banana, a water bottle, two fingers, or an erect penis. If you'd like to practice these skills at home, but don’t have access to condoms, you can use a sock with a toilet paper tube, water bottle, hand or even your own foot.

*(Show students partially rolled up sock, and briefly demonstrate on your hand)*

“If no one has any more questions, I want to thank you all for participating today. I hope you learned more about STDs and how to protect yourself, and make safe and responsible choices, because you’re worth it!”  *(Optional: include a reminder for the following module)*