

Rights, Respect, Responsibility (High School)

Understanding Gender

Lesson 1

Ground Rules

What are some guidelines we want in order to maintain a safe classroom environment during this instruction?

In addition to our list, remember:

- Please **share the information** from class.
- **Do NOT share anything personal**, such as someone's questions, comments, or stories.

Anonymous Question Box

- Write down questions during the lessons.
- Use appropriate terms whenever possible.
- Do not write your name on it, unless you'd like to discuss the question privately.
- Place questions in box at the end of class.
- Your questions will be answered when we cover the related topic.

What Is Gender?

- What does **gender** mean?
- How does someone determine whether a person is a boy or girl?
- When you're born, how do they know what your gender is?
 - When you look at a person's genitals, that is their **biological sex**.
 - When people have a combination of female and male organs, chromosomes, and/or hormones, that is called **intersex**.

Gender vs. Biological Sex

- What you see in the mirror is part of your **biological sex** (your body).
- How you see yourself when you close your eyes is your **gender identity**.
 - When these match, the word is **cisgender**.
 - If they don't match, this is called **transgender**.
- Some people do not identify with any gender at all, which could be called **agender** or **non-gendered**.
- Or they identify somewhere in between male and female, which can be referred to as **gender fluid, nonbinary, gender expansive**, or **gender queer**.

Gender Identity vs. Expression

- **Gender identity** doesn't necessarily match **gender expression**.
- **Gender expression** is how we present ourselves to the world.
- **Gender identity** is *not* a choice.
- **Gender expression** *is* an individual choice.

Sexual Orientation

- **Sexual Orientation** is the gender or genders of people we are romantically and/or physically attracted to.
- This is **different** from our gender identity, which is more about how we see ourselves.

Sexual Orientation

- A person who is attracted to the same gender is typically referred to as **gay or lesbian**.
- A person attracted to more than one gender might be referred to as **bisexual or pansexual**.
- A person attracted to only the opposite gender could be referred to as **heterosexual**.
- A person who is not sexually attracted to other people (but may or may not have romantic attraction) might be referred to as **asexual**.

Everyone can identify in a way that makes sense to them!

Gender Identity vs. Sexual Orientation

- We all have both a **gender identity** and **sexual orientation**.
- **Gender identity** is your sense of whether you are male or female, or neither, or both, or somewhere in between.
- **Sexual orientation** is the gender(s) of who you are physically and/or romantically attracted to.

Example 1

A person characterized at birth as female...

- Who feels female on the inside...
- Is only attracted to people whose biology at birth was characterized as male and who also identify as male...
 - Will likely identify as **heterosexual**.

The fact that she identifies as female (and he as male) is **gender identity**.

The fact that they are attracted to each other are their **sexual orientations**.

Example 2

A person characterized as female at birth...

- Who also feels female on the inside...
- And is only attracted to people whose biology at birth was assigned female and who also identify as female...
 - Will likely identify as a **lesbian**.

The fact that they identify as female are their **gender identities**.

The fact that they are attracted to each other are their **sexual orientations**.

2019 Youth Risk Behavior Survey

San Diego Unified School District High School Students

- 14.4% describe their appearance as equally masculine and feminine.
- 1.1% identify as transgender.
- 10.9% identify as lesbian, gay, or bisexual.
- 4.5% are unsure of their sexual orientation.

Class Activity: “Gender Scripts”

Gender scripts are how we’re told to be or behave based on our assigned gender.

- On your “*Gender Scripts*” worksheet, think about and write down **gender scripts** you have received or have heard about for a different gender than yours (specifically boys and girls).
- For example, “girls should be caring and maternal” or “boys should be tough.”

Class Discussion: “Gender Scripts”

- What do you notice about the two lists?
- How did you know that these were gender scripts as you were growing up?
- From where/whom have you been receiving these scripts?
- How might someone who is transgender react to these scripts?

Class Activity: “Guess Who?”

1. Get into pairs.
2. Inside your envelope are 4 pictures.
3. Face each other.
4. One person takes out a picture and does **NOT** show it to the other person.
5. Describe the person in the picture so that your partner can guess the gender.
6. But **wait!!!**

Class Activity Rules: “Guess Who?”

- Your partner may not ask questions.
- **DO NOT USE** gendered pronouns (i.e., use only “they” or “them”, *not* “he” or “she”).
- **DO NOT USE** gendered words like “masculine,” “feminine,” “girly,” “man,” “woman,” etc.
- **DO NOT REFER** to something in the picture as a “girl” or “boy” thing (like a “girl’s doll”).
- Do not use the person’s name, band, movie, or show to identify them. Only describe their appearance!

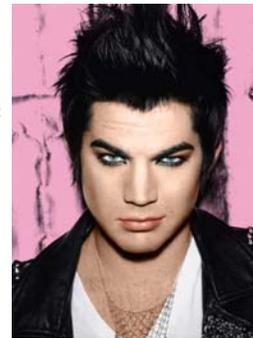
For example:

- This person is smiling.
- They have dark hair that is styled up on their head.
- They are wearing lipstick and other makeup.
- How would you describe their gender?



Try this one:

- This person has dark hair that is sort of spiked up.
- They’re wearing eye makeup and a necklace with a leather jacket.
- How would you describe their gender?



Class Discussion: “Guess Who?”

- What we call ourselves is our *gender identity*.
- You may assume someone identifies a certain way based on their appearance, but you might be mistaken.
- How many people think they correctly guessed the genders in their set of pictures?
- UNLESS the photo is of a famous person who has made their gender identity known, **you don't actually know their gender unless you ask them.**

Body Image

- *Body image* is how we feel about and perceive our own bodies.
- It can be positive, such as “I feel strong” or “I like my hair.”
- It can also be negative, such as feeling too tall or too skinny.
- Our perceptions of ourselves and *what society expects of us* also influence the way we see other people.
- We might compare our appearance to other people we see in media or meet in real life.
- Sometimes these comparisons also lead to judging others about their own bodies and physical appearance.

Class Discussion: Body Image

When playing the “Guess Who?” gender card game:

- Did you think about how attractive or unattractive you found the people in the pictures?
- Did you think about body size or shape?
- Were your first impressions of people that presented as female different from your feelings about people who presented as male?
- What about people who clearly presented as male or female compared with people whose gender was a challenge to identify?
- How did you think about white people compared to people of color?
- Do you think bias against people because of body size, shape, or appearance is acceptable?

Class Discussion: Body Image, Continued

- **Where do we get our ideas about body image?**
 - Societal ideas about body image are so ingrained that most of us take them for granted and accept them as natural and normal.
 - This might lead to us internalizing negative concepts about ourselves and others, such as feeling like a bad person for being overweight.
 - Ideas about body image, however, are not fixed and universal.
- Silently reflect on how many times a day you judge (or hear others judge) your own or someone else's appearance.

How do these judgments affect us over time?

Summary

- No one has the right to tell someone else how they are supposed to express their gender or how they should look.
- We get messages from society, media, family, culture, and religion.
- Each person has the right to discover who they are and let others know in ways that feel right to them.
- Students can find resources for LGBTQIA+ students, including LGBTQIA friendly clinics, on our Student Support Website, www.sandiegounified.org/Support.

Homework

1. Watch an excerpt from an *I Am Jazz* video and respond to the questions on the homework sheet.
2. An alternative homework is available for people who do not have access to the Internet.

Rights, Respect, Responsibility (High School)

Sexual Decision Making

Lesson 2

Reminders

- Let's review our ground rules and procedures as a class.
- Remember to use the Anonymous Question Box!

Discussion

- Has anyone ever struggled to make a really tough decision?
- Have you ever made a really tough decision and even after you made the decision, you weren't 100% sure that you made the right choice?
- Making decisions about sex can be even more difficult since everyone has different values and beliefs.

Discussion, Continued

- When do you think someone is ready to have sex—either oral, vaginal, or anal sex—with their partner?
- What would have to be in place in their relationship for them to have safer sex (i.e., mutually agreed upon sex that takes into account STI or pregnancy prevention)?
- What kinds of questions should young people ask themselves before taking this step?

Class Activity: "Sexual Readiness"

1. Read through the "*Sexual Readiness*" worksheet.
2. Discuss your reactions to the questions on the worksheet with a classmate.

Class Discussion: "Sexual Readiness"

- What was it like to do that activity? Why?
- Which questions do you think are most important to talk about with a partner? Which are least important?
- Which questions surprised you?
- Are there any questions that you think are missing?
- What do you think it would feel like for a couple to talk through all these questions?

Class Activity: “Freeze Frame Role Play”

You will now do some role playing to practice making healthy decisions about sexual behaviors.

Remember, healthy relationships are:

- Consensual and non exploitative
- Concerned about consequences such as STIs and pregnancy
- Respectful and caring

Class Activity: “Freeze Frame Role Play”

1. Each team will get a role play involving a couple who is making a decision about sex.
2. Each team will read and discuss their scenario, decide who will be the actors, and decide who will be the directors/coaches.
3. Create the role play script so that the couple makes a decision quickly.
4. You have five minutes to prepare.
5. Use the “*Sexual Readiness*” worksheets to guide you.

Class Activity: “Freeze Frame Role Play”

1. Each team will present in order.
2. Just when the couple has made their decision, I'll say “Freeze Frame!” and the role play will stop.
3. The class will then answer the following questions about the role play they just saw:
 - What are the possible consequences for this couple if they follow through with their decision?
 - Do you think they made a healthy decision? Why or why not?
 - Which questions from the “*Sexual Readiness*” worksheet would you recommend to this couple in order to make a healthier decision (if applicable)?

Class Discussion: “Freeze Frame Role Play”

- How did it feel to play those roles?
- How realistic were the consequences that the class predicted?
- If you could go back into the role play and make another decision again, what would you do differently?

Summary

- It's important for each of you to figure out where you stand about decisions regarding sex so you can be clear for yourself and find ways to be clear with your future partners.
- It's also important to **ask** these questions of your partner(s) in order to make sure that you both understand the wants, needs, and boundaries of the other person.

Homework

None!



Rights, Respect, Responsibility (High School)

Rights, Respect, Responsibility: Don't Have Sex Without Them

Lesson 3

Reminders

- Let's review our ground rules and procedures as a class.
- Remember to use the Anonymous Question Box!

Introduction

- As you grow older, you may find yourselves in more complex situations.
- That makes it hard to figure out the right thing to do sometimes!
- Some of these situations involve **consent**.
- What does the word "consent" mean? What does it mean to "give consent"?

Consent Video 1

1. Play the video "[2 Minutes Will Change the Way You Think About Consent](#)".
2. What are your reactions to this video?

Consent Video 1: Discussion

1. The ConsentBot says her first attempt was "coercion." What does that mean?
2. What did she do that was coercive?

Remember, consent must be voluntary, which means a person has to want to give consent.

Consent Video 1: Discussion, Continued

3. When she goes to visit her friend Jonathon, the ConsentBot says it's not consent because he's "incapacitated." What does that mean?

Jonathon was asleep, so he would not have been completely aware of what he was saying. The same thing goes if someone is drunk or using drugs.

Consent Video 1: Discussion, Continued

4. What do you think of the example when she is in the library and asks the person wearing the headphones for their phone and they don't respond—and she assumes she has consent because that person did not say no?
5. Why isn't that the same thing as having consent?

Consent Video 1: Discussion, Continued

6. Has anyone ever been in a situation where they haven't wanted to do something but a friend said, "It's fine, just do it"? How did that feel?
7. Why did the ConsentBot say that wasn't consent?

Consent Video 1: Discussion, Continued

8. What did you notice in the last exchange, which the ConsentBot finally agrees is consent?

The ConsentBot said that this was clear consent and it was also healthy, clear communication.

Consent Video 2

- The first video was about using someone else's phone. Now let's take a look at a different video about another common item, tea.
- Let's watch the video "[Tea and Consent](#)".
- Are there any ideas about consent in this video that are similar or different to the previous one?

Consent Video 3

- Watch the "[Pitch Perfect Trailer](#)".

Consent Video 3: Discussion

1. What did you just see?
2. When he asked her if she wanted to have sex, how did she respond?
3. How do you think he was feeling then?
4. Did she give her consent to have sex?
5. What do you think he should do next?

Consent Video 3: Summary

- The smartest thing he can do here is take “no” as the answer.
- This is also a good example of how talking about sex at a party—where there’s usually alcohol involved—is not the best place to first bring it up.
- What impact could alcohol or drugs have on a person’s ability to consent?

Remember that anything but a clear and emphatic YES means NO.

Class Activity: Consent Scenarios

We’re going to look at what it’s like to ask for and give consent in a relationship.

1. As a pair, you will receive a “*Consent Scenario*” card.
2. Work together to create a brief skit, no more than 1-2 minutes, that you’ll share with the class. Please don’t tell the class what’s on your “*Consent Scenario*” card.
3. You have 5 minutes to figure out how you will act out the scenario and demonstrate consent.

Class Activity: Consent Scenarios

Each pair presents to the class.

- Was consent clear? Why or why not?
- Did you notice anything about your skits that might have perpetuated some gender stereotypes?

Summary

Everyone has the right and responsibility to say what they do and do not want to do in a relationship, regardless of gender.

Homework

1. Read and think about the instructions on the “*Putting It Into Practice: Getting and Giving Consent*” worksheet.
2. Be prepared to hand this in completed in one week.

Exit Slip

Complete the “*Exit Slip*” and hand it in before you leave class.

Rights, Respect, Responsibility (High School)

Planning and Protection: Avoiding or Managing STIs

Lesson 4

Reminders

- Let's review our ground rules and procedures as a class.
- Remember to use the Anonymous Question Box!

STIs and HIV

- **What does STI mean?**
 - Sexually Transmitted Infection
- **What about HIV?**
 - Human Immunodeficiency Virus
 - ✓ STIs and STDs mean the same thing and refer to the same group of bacteria, viruses, and other organisms that can be passed from one infected person to another during sexual contact.
 - ✓ HIV is the virus that can lead to AIDS.

Class Activity: "Index Card Game"

1. Everyone will have 1 index card.
2. Find a partner.
3. I am going to give you a topic to discuss with this person. You have 2 minutes to chat about this topic:
 - Topic 1:** What are your 3 favorite movies and why?
4. Thank your partner and write the name of the person you have been chatting with on a line on your index card.

Class Activity: "Index Card Game"

5. Find a new partner:
 - Topic 2:** If money were no option, and you could travel anywhere in the world, where would you go? Why?
6. Thank your partner and write your new partner's name on your index card.
7. One more partner:
 - Topic 3:** If you could have any three super powers, what would they be and why?
8. Thank your partner, write their name on your card, and return to your seat.

Class Activity: "Index Card Game"

- For the purposes of this activity *only*, let's say those weren't just conversations, but sexual encounters.
- Turn your card over to the unlined side.
- **In one of the corners, you might see a lightly written letter. If you have an "S," please stand up.**
- These "S" people (for this activity only) have an STI. Even though they look and feel fine and had no idea they had an STI.

Class Activity: “Index Card Game”

- Look to see if you have one of the “S” people’s signatures on your card. If you do, **STAND UP**.
- Of those standing, if you have an “A” on your card, you may sit down.
 - This means you chose to stay *abstinent*. You did *no-risk intimate things* together or *nothing sexual* at all.
 - Therefore you did a great job, the best job in fact, of protecting yourself from STIs or HIV.
- If you have a “C” on your card, you may also sit down.
 - This means you used *condoms* or *other latex barriers*.
 - So you were at very low risk for STIs or HIV (or pregnancy if you were with an opposite sex partner).

Class Activity: “Index Card Game”

- If you have a “P” on your card, it means that if one person in the relationship can get pregnant, they were on the pill, but that’s the only method you used.
 - Great job protecting yourself against pregnancy, if that was a risk.
 - But the pill offers *NO* protection against STIs or HIV.
 - So you have to remain standing.
- If you have a “U” on your card, that means you did not use any condoms or latex barriers during your sexual encounter, which means it was ‘unprotected.’
 - This is very risky for an STI, HIV, or possibly pregnancy.
 - Remain standing.

Class Activity: “Index Card Game”

- If you have a blank card, it means you were using alcohol or drugs during the sexual encounter.
 - You don’t remember what happened, including whether or not you used a condom or other latex barrier.
 - So you need to remain standing.

Class Discussion: “Index Card Game”

- How many people were standing the very first time. i.e., how many people had an “S” on their cards?
- By the end of the activity, how many people are standing? These are the people who had unprotected sex with the original “S” group.
- What was it like to do this activity? Why?
- What did you notice about who got to sit down, and who had to remain standing? Why?
- What does the number of people who were standing at the end of the activity tell you?

Planning and Protection

- 1) **Abstinence** is the safest and only 100% effective choice for eliminating STI/HIV risk.
- 2) **Condoms** and other latex barriers are a must for reducing STI/HIV risk.
- 3) **Talking with your partner** is key before having any kind of sex.
- 4) **Contraceptive methods** like the pill are great for pregnancy prevention, but they do not protect against STIs or HIV.
- 5) **Get tested** for STIs and HIV if you are having sex and ask your partner(s) to get tested, too.

Protect Yourself

- **CONDOMS:**
 - One source of free condoms is **our School Nurse**. The nurse will give you a plain looking package containing condoms, condom-compatible lubricant, and information on how to use the condoms correctly.
 - Your conversation will be private and confidential.
- **VACCINES:**
 - There are two STIs for which you can be vaccinated: Hepatitis B and HPV (Human Papilloma Virus).
 - In California, minors 12 years and older can consent to these vaccines without their parents’ permission, if they wish to.

Class Activity: “Jingles!”

1. Get into 5 groups.
2. Each group will get 1 of the 5 “Planning and Protection” statements (slide 11).
3. Your group should create a commercial, jingle, slogan, or logo to market the statement.

Class Activity: “Jingles!”

4. Present to the class.
5. Provide feedback:
 - What is strong about each presentation?
 - What could be improved?

Summary

- STIs and HIV are a very real part of our world.
- 1 in 4 teens will end up with an STI once they are engaging in some kind of sex.
- 21% of new cases of HIV in the U.S. are contracted by young people.
- Everyone has a responsibility to know how to practice ways to reduce their chances of contracting an STI or HIV.

Homework

1. Read through the instructions of the “STI/HIV Investigative Reporting” worksheet.
2. This assignment involves interviewing people about their knowledge of STIs.
3. Part 3 requires that you have a conversation with a parent or other trusted adult about this topic.

Rights, Respect, Responsibility
(High School)

**Getting Savvy
about STI
Testing**

Lesson 5

Reminders

- Let's review our ground rules and procedures as a class.
- Remember to use the Anonymous Question Box!

Introduction

- Having sex is a perfectly normal and natural part of growing up.
- We want to make sure you understand how to stay healthy if and when you start to explore your sexuality with others.
- Today we're going to talk about STIs and HIV, and the importance of getting tested regularly if and when you become sexually active.

Video 1: "STD Zombie"

- Let's watch this video, "[STD Zombie](#)."
- The zombie really wanted to eat the person, but it didn't because they had not been tested for STIs. What do you think of that?

Why People Get Tested

What are some reasons someone would choose to get tested for STIs?

Let's brainstorm!

Why People Don't Get Tested

What are some reasons someone would choose *NOT* to get tested?

Let's brainstorm!

Class Activity: “Getting Savvy about STI and HIV Testing”

Each group will be assigned a reason that people may have for **NOT** wanting to get tested for STIs.

- 1) Come up with at least 2 things someone could say in response to that reason to encourage them to get tested. Write these on the worksheet.
- 2) Go to the [Get Tested](#) website and find 2 possible locations nearby where a teen could get tested for HIV. Write this on the worksheet.
- 3) Finally you will go to [Student Support](#) website today (listed on the cards I will give you) and find 3 additional STI and HIV testing locations nearby.

Use These Websites:

- <https://gettested.cdc.gov>
- www.sandiegounified.org/Support

Class Discussion: “Getting Savvy about STI and HIV Testing”

Each group will share: (1) the reason your group was assigned, (2) one of your responses, and (3) one of the community resources you found.

- What was it like to do that? Why?
- What did you notice about the groups' responses? Did anything surprise you?
- What does this tell you about how you might support a friend or romantic partner who is nervous or hesitant to get tested for STIs?

Video 2: “Let’s Talk About Sexual Health”

- Knowing you should get tested for STIs and HIV and actually going to see a health care provider can be two different things.
- People have real concerns about what will happen during the test, how they will be treated by the staff, and if their visit will be kept confidential.
- [This video](#) will address some of these concerns.

Video 2: Discussion

- What do you think of what you saw in the video?
- Did anything surprise you?
- Did you learn any new information from the video? If so, what?

Summary

- The only way for someone to know whether or not they have an STI is to *get tested*.
- There are places in the community, such as the clinics that you found in class today, where teens can be tested *confidentially and usually for no or low cost*.
- Like in the video, you need to be *honest with your healthcare provider about any sexual contact you may have had*, because there are different tests and different types of treatments for different STIs and even for different parts of the body (oral, anal, or vaginal).

Protective Factors

- In California, anyone 12 years and older can consent to their own STI and HIV testing and treatment without notifying parents or guardians if they do not wish to (we'll talk more about this later).
- Minors can also consent to their own HPV vaccine.
- Condoms are available at local clinics and also from our School Nurse.

Homework

1. Go to the websites and answers the questions on the *"HIV Now—Testing and Treatment Today!"* worksheet.
2. Printed handouts are available for people who do not have access to the Internet.

Rights, Respect, Responsibility (High School)

Know Your Options

Lesson 6

Reminders

- Let's review our ground rules and procedures as a class.
- Remember to use the Anonymous Question Box!

Introduction

- Today we're going to look at *contraception*, or birth control, such as abstinence, condoms, and the pill.
- Remember that in order for a pregnancy to occur, a sperm must fertilize an egg and implant in a uterus.
- This typically happens during vaginal sex when a penis ejaculates into a vagina and the semen—which contains the sperm—travels through the cervix, uterus, and fallopian tubes to come into contact with an egg.
- When a fertilized egg implants in a uterus, this is called a pregnancy.

Introduction

The only 100% effective way to avoid a pregnancy is not to have vaginal sex.

However, if people of different sex do decide to have sex, then *contraception*, or birth control, can safely and effectively decrease the risk of an unplanned pregnancy *if used consistently and correctly*.

Why Might a Person Use Birth Control?

Let's brainstorm!

- Who does our list apply to?
- How do their partners come into play? What rights and responsibilities do they have?
- Which of these reasons could apply to people in same sex relationships?
- We typically think of different sex couples as being the only ones at risk for unplanned pregnancy. But some of these concerns apply to all people regardless of sexual orientation or gender. Keep this in mind.

Why Would a Person or Couple NOT Use Birth Control?

Let's brainstorm!

Group Activity: “Teen Options”

Now we're going to look at some scenarios of different teens who are considering using birth control.

1. Your group will get some information about a teen and will use this information to take the “Which Contraception is Right for Me?” quiz [on this website](#).
 - > This website is geared towards cisgender girls and women, but a lot of the information can apply to anyone.
2. You may not know the answer to every question based on the scenario, so it's ok to take your best guess at some answers.
3. Once you've done the quiz, write down the top 3 recommended birth control methods for your scenario.

Group Activity: “Teen Options”

4. Take a few minutes to discuss why you think those three methods were the ones most highly recommended by the quiz. Write down any ideas from your group on the worksheet.
5. Select one method and reason to share with the class. Share the scenario, the method, and the reason why it was recommended.
6. As you talk about methods, I'll use my birth control kit to show you that method.

Group Activity: “Teen Options—Wrenches”

7. Now we will rotate papers so each group gets a new teen to look at.
8. This time, a ‘wrench’ will be thrown in your teen's plans to use birth control.
9. Figure out how your teen could deal with that wrench in order to successfully use birth control.
10. The ideas must be realistic and not a Hollywood ending!

Group Discussion: “Teen Options”

- What was it like to do that activity? Why?
- Did you notice anything about the methods that were recommended most highly for teens?
- Would you recommend something different for your teen than what the quiz recommended?
- Since most birth control is geared towards people with ovaries and a uterus, how might someone who doesn't have these body parts feel about accessing and using contraception?
- What role should the partner play in this process?
- How could you help a friend who wanted to use birth control?

Birth Control Summary

- **Birth control methods fall into three categories:**
 - Abstinence
 - Barrier Methods
 - Hormonal Methods
- Each method has an effectiveness rate that tells how well it can work to prevent pregnancy when used *consistently and correctly*.
- The best birth control method is the one that is used consistently and correctly.

Abstinence

Abstinence is the most effective way to prevent pregnancy and protect against HIV and STIs. This option is available to everyone.

Abstinence means not having oral, vaginal, or anal sex, or any genital-to-genital touching.

Here are some ways to plan for abstinence:

1. Talk with your partner.
2. Discuss different ways to show affection.
3. Find activities you can do with other couples.
4. Avoid alcohol and drugs.

Long-Lasting Hormonal Methods



- Intrauterine Device (IUD)**
 - Tiny device inserted into the uterus.
 - Can last from 3-6 years depending on the type of IUD.
 - Available with a prescription and must be inserted by health care practitioner at a doctor's office or clinic.
 - 99% effective at preventing pregnancy when used *consistently and correctly*.
- Injection (Shot)**
 - An injection administered by a healthcare practitioner every 3 months.
 - Available with a prescription and can be administered at a clinic or at any licensed pharmacy.
 - 99% effective if used *consistently and correctly*.
- Implant**
 - Tiny rod inserted into arm.
 - Available with a prescription and must be inserted by health care practitioner at a doctor's office or clinic.
 - 99% effective if used *consistently and correctly*.



Hormonal Methods

- Pills**
 - Taken daily.
 - Prevents release of egg from ovary.
 - Available with a prescription at clinics.
 - 99% effective at preventing pregnancy when used *consistently and correctly*.
- Ring**
 - Inserted into vagina for 3 out of 4 weeks.
 - Prevents release of egg from ovary.
 - Available with a prescription at clinics.
 - 99% effective at preventing pregnancy when used *consistently and correctly*.
- Patch**
 - Placed on body for 3 out of 4 weeks.
 - Prevents release of egg from ovary.
 - Available with a prescription at clinics.
 - 99% effective at preventing pregnancy when used *consistently and correctly*.



Barrier Methods



- External Condoms**
 - Covers erect penis.
 - Available without a prescription at drugstores or clinics.
 - 98% effective at preventing pregnancy when used *consistently and correctly*.
- Dental Dams**
 - A thin sheet of latex can be used to protect mucosa during oral sex.
 - Available without a prescription at clinics.
 - Not a birth control method, but used to prevent transmission of HIV and STIs.
- Internal Condoms**
 - Inserted into vagina or anus.
 - Available with a prescription at drugstores or clinics.
 - 95% effective at preventing pregnancy when used *consistently and correctly*.
- Spermicides**
 - Used with other barrier methods to immobilize or kill sperm.
 - Available without a prescription at drugstores or clinics.
 - 72-82% effective at preventing pregnancy when used *alone*.



Barrier Methods



- Cervical Cap**
 - Soft silicone cap placed inside vagina to cover cervix.
 - Available with a prescription at clinics.
 - 86% effective at preventing pregnancy when used *consistently and correctly*.
- Sponge**
 - Small spongy plastic placed inside vagina to cover cervix.
 - Available without a prescription at drugstores and clinics.
 - 91% effective at preventing pregnancy when used *consistently and correctly*.
- Diaphragm**
 - Shallow silicone cup placed inside vagina to cover cervix.
 - Available with a prescription at clinics.
 - 94% effective at preventing pregnancy when used *consistently and correctly*.



Emergency Contraception (E.C.)

- Prevents pregnancy after unprotected sex or when birth control fails.
- Does not work if someone is already pregnant; does not harm fetus.
- Can be taken up to 3 days (72 hours) after unprotected sex.
- Available at clinics or pharmacies:
 - Plan B One-Step is available without a prescription for a person of any age.
 - People under 15 years may need a prescription for other brands.
 - Call 888-NOT2LATE for where to find over-the-counter E.C.



Protection from HIV and STIs

Hormonal, intrauterine, and some barrier methods of contraception DO NOT offer protection against HIV and STIs.

Using a **condom** with these methods can reduce the risk of pregnancy *and* reduce the risk of contracting HIV and STIs.

CONTRACEPTION COMPARISON CHART

Method	Description	Effectiveness	Length of Protection	Protection Against STIs
Abstinence	Not having intercourse	100%	Continuous	YES
Intrauterine	Device implanted in uterus by a doctor	99%	IUD 10 yrs.; IUS 5 yrs.	NO
Implants	Hormone rods placed under skin for 3 years (prescription)	99%	3 years	NO
Injections	Progestin shot given every 12 weeks (prescription)	94-99%	3 months	NO
Ring	Hormone ring inserted in vagina for 3 weeks (prescription)	91-99%	1 month	NO
Patch	Hormone patch placed on skin for 3 weeks (prescription)	91-99%	1 week	NO
Pills	Hormones taken daily (prescription)	91-99%	1 month	NO
External Condom	Latex or polyurethane sheath that covers the penis	82-98%	One sex act	YES
Internal Condom	Polyurethane tube with flexible ring that fits the cervix	79-95%	One sex act	YES
Spermicide	Foam, gel, film inserted into vagina	72-82%	Up to 1 hour or one sex act	NO

Safely Surrendered Baby Law

- Parent or legal guardian can surrender a newborn baby within the first 72 hours of birth to a person at a designated "safe surrender site" such as a hospital or fire department.
- Parent may claim physical custody of newborn within 14 days of surrender.
- More Information: (877) 725-5111 or <http://www.babysafe.ca.gov/>



Sterilization

Vasectomy

For a person with a penis:

- A vasectomy is a simple, safe, and effective surgical procedure that **permanently** prevents pregnancy by blocking sperm from leaving the body.
- A vasectomy will not protect against STIs or HIV.
- A person needs to be 18 years old or have the consent of their parent or legal guardian to receive this procedure.

Tubal Ligation

For a person with ovaries:

- This is a safe and effective surgical procedure that **permanently** prevents pregnancy by closing or blocking fallopian tubes.
- A tubal ligation, sometimes called "getting your tubes tied", will not protect against STIs or HIV.
- A person needs to be 18 years old or have the consent of their parent or legal guardian to receive this procedure

Summary

- I'm handing out a brochure called "*Respect Yourself, Protect Yourself*" which has information on all FDA-approved contraceptive methods.
- It's important for everyone to know about contraception because even if you don't use it personally, you may have friends or be a partner of someone who does.

Protective Factors

- In California, anyone of any age is allowed to get birth control, including condoms and methods that require a prescription, without notifying parents or getting permission.
- Students may be released from school by a staff member, such as a nurse or counselor, to attend a sexual healthcare appointment at a clinic.
- You can get free condoms from our School Nurse and local clinics.

Homework

1. Read through the instructions on the "*Emergency Contraception Investigation*" homework sheet.
2. Do an online investigation to respond to the questions on the homework sheet.
3. An alternative printout is available for people who do not have access to the Internet.

Rights, Respect, Responsibility (High School)

Using Condoms Effectively

Lesson 7

Reminders

- Let's review our ground rules and procedures as a class.
- Remember to use the Anonymous Question Box!

Introduction

- You are going to hear me use very specific language when we talk about condoms. People tend to use the word "condom" to mean a latex condom that goes on the penis.
- But there are different kinds of condoms that can be used in different ways on different people's bodies, regardless of gender.
- For this reason, we will refer to a condom that goes on a penis as an **external condom**.
- When we talk about a so-called "female" condom, we'll call it an **internal condom**.
- *You'll see how they work in a minute!*

Introduction

Condoms are extremely effective when used ***consistently and correctly***.

That means, ***every time*** a couple has *oral, anal, or vaginal sex*, from beginning of the act to the end.

Group Activity: "Correct Condom Use"

1. Get into groups of 3-4 students.
2. Each group will get an identical set of cards that list each of the steps of using an external condom correctly.
3. Work together and put the cards in the correct order from beginning to end of the sex act.

External Condom Demo

I am going to demonstrate the correct steps for using an external condom:

1. Check expiration date on condom.
2. Have erection.
3. Take condom from wrapper.
4. Put condom right side up on head of penis.
5. Pinch the tip of the condom.
6. Roll condom down penis.
7. Begin intercourse.
8. Ejaculate.
9. Withdraw from partner, holding condom at base.
10. Remove condom from penis.
11. Throw condom away in trash.

External Condom

Common mistakes:

- Not checking expiration date
- Storing condoms someplace too hot or too cold
- Putting condom on upside down
- Not putting condom on *before* there is sexual contact

Internal Condoms

- When people refer to condoms, they usually refer to condoms that go on a penis.
- But there is another kind of condom that is just as effective at preventing pregnancy and providing some very good protection against STIs and HIV.

Internal Condom Demo

There are fewer steps to using this type of condom, but it is still important to do them correctly:

1. Check the expiration date
2. Gently squeeze the smaller ring, and insert it into the vagina
3. The outer ring of the condom should cover the vulva.
4. During intercourse, you or your partner may need to hold the condom in place to make sure the penis is going inside the condom and not to the side
5. Once intercourse is over, the condom should come out of the vagina and be thrown away.

People have referred to this condom as a 'female' condom, but this can also be used by any gender for penis-anus sex if the couple removes the internal ring.

Dental Dams

- There is one last barrier method that can protect against STIs and HIV during oral sex on a vulva or rectum of another partner.
- Dental dams are flavored specifically for safer oral sex, and just like condoms, they are designed to be used just once and thrown away.
- Dental dams can also be made by cutting or tearing a flavored condom if you don't have a dental dam available.

Summary

- In California, anyone of any age is allowed to get condoms to protect themselves from STIs, HIV, and pregnancy.
- You can get free condoms from our School Nurse and local clinics.
- To find other condom programs, go to the Student Support website www.sandiegounified.org/Support.
- **Since condoms are the only method of birth control that protect against STIs and HIV, it is a good choice to use them in addition to another method, for different sex couples, for double protection.**

Homework

- Read the instructions on the "Media Hunt: Did they Use Condoms?"
- Be prepared to complete the assignment within the next week.
- NOTE: This homework is designed to reference *age-appropriate* media such as TV shows and movies.

Rights, Respect, Responsibility (High School)

What Are My Reproductive Rights?

Lesson 8

Reminders

- Let's review our ground rules and procedures as a class.
- Remember to use the Anonymous Question Box!

Introduction

- Today we will talk about your legal rights, as teens, when it comes to pregnancy and pregnancy options.
- If someone your age has an unplanned pregnancy, or has a partner that becomes pregnant, *we encourage communication* with parents, caregivers, and trusted adults to help find a safe and healthy plan.
- California law protects teenagers' choices and their confidentiality in the case of pregnancy, whether parents are involved in the decisions or not.
- We're going to start by looking at some of these laws, and then we'll look at some implications of these laws.

Class Activity: "What Are My Reproductive Rights?"

1. Get into small groups.
2. Each group will need at least one computer.
3. Your group will receive a scenario and a copy of "*Reproductive Rights Research Guide*."
4. The scenario will have some guiding questions. You will have 15 minutes, as a group, to research the answers using the research guide.
5. Once you are done, you will need to discuss what you found and be ready to present and defend your opinions with the larger class.

Class Discussion: "What Are My Reproductive Rights?"

6. Each group presents their findings.
7. Do you agree or disagree with the laws? Why?
8. Who else can and should play a role in the situation? Why should or shouldn't they?

Class Activity: "What Do Teens Have a Right To Do?"

- These scenarios demonstrated just some of the laws relating to reproductive rights.
- Some of you agreed with the laws, and some of you didn't.
- Pretend that you are members of Congress, and that you want to create a Bill of Rights relating to teens and pregnancy, abortion, and/or adoption. What would it look like?

Class Activity: “What Do Teens Have a Right To Do?”

1. Write this sentence on the back of your scenarios:
“When it comes to teen pregnancy and parenting, teens have a right to...”
2. In your group, come up with 5 rights that you think are critical for teens.
3. You need to specify any important characteristics, such as:
 - o Is age a factor?
 - o Is gender a factor?
 - o What about relationship status?

Class Activity: “What Do Teens Have a Right To Do?”

Share Your Bill of Rights

4. Each group should share 1 response from your list. I will chart them as we share.
5. If you had a similar response to another group, let me know. We'll put a checkmark next to those.
6. Look at the list we created and the number of checkmarks:
 - o Which items do we have in common?
 - o Which ones are “outliers”?

Summary

- > No matter how you feel about any of these rights, or the laws governing them, there are laws that exist relating to whether, when, and sometimes even how, we as human beings can reproduce.
- > There are unique laws that specifically pertain to all of you under 18 in California. The best thing you can do is hold on to your list of organizations as a reference so that if you're in a situation where you need to choose what to do about a pregnancy, you know your rights.

Teens' Rights in CA

- I am going to hand out *California Minor Consent Laws* cards.
- In California, any student of any age may legally and confidentially obtain birth control, including condoms, without notifying or getting permission from their parent or guardians if they do not wish to.
- Anyone of any age can consent to their own pregnancy care, including pregnancy testing, pre-natal care, and abortion.
- Minors 12 years and older may also consent to their own STI and HIV testing and treatment without notifying their parents.
- This includes being able to consent to their own HPV vaccine as well as accessing PrEP medication for HIV Prevention.
- In addition, students in California may leave school during school hours to attend a sexual health care appointment. To pursue this option, talk to your School Nurse or Counselor.

Homework

None!



Rights, Respect, Responsibility (High School)

Is it Abuse If...?

Lesson 9

Reminders

- Let's review our ground rules and procedures as a class.
- Remember to use the Anonymous Question Box!

Introduction

- There are a lot of myths out there about sexuality and relationships, particularly relating to teens.
- One myth is that relationship abuse doesn't happen in teen relationships.
- Unfortunately, statistics show that relationship abuse of all kinds is just as prevalent in teen relationships as it is in adult relationships.

What Is Abuse?

- Often, people can't tell whether their relationship is abusive or it's just a rough time with their partner.
- We're going to try to figure this out today, along with what to do if you are in an unhealthy or abusive relationship.
- Our goal is to be able to recognize or foster healthy relationships based on mutual respect and affection that can lead to committed relationships, such as marriage.

Types of Relationship Abuse

Physical: hurting someone physically in some way.

Emotional: making someone feel bad about themselves, such as taking away their sense of self or self-esteem, or harassing someone so that they feel bad about themselves.

Psychological: using threats or intimidation to frighten someone, or 'gas lighting' (making them feel like they're losing touch with reality).

Sexual: similar to physical abuse, but sexual in nature. This includes sex trafficking.

Financial: when the finances in a relationship, or a person's potential to earn or have money, are controlled by one person.

Class Activity: "What Is Abuse?"

1. Get into groups.
2. Each group will be assigned one type of abuse.
3. Given the definitions I just shared, work in your groups to come up with some specific behaviors that would come under your category.
 - For example, "hitting" would be in the Physical Abuse category.
4. Each group will have their own list, but some behaviors will overlap categories.

Class Activity: “What Is Abuse?”

Each group will share their lists with the class.

Class Discussion: “What Is Abuse?”

- It can be relatively easy to come up with a list of behaviors, especially when we’re not in the middle of the relationship.
- But sometimes abusive situations aren’t so clear.
- For instance, other types of relationship abuse can include **sexual harassment, sexual assault, and sex trafficking.**

Sexual Harassment

Sexual Harassment is:

- Unwelcome sexual advances
- Requests for sexual favors
- Other verbal or physical harassment of a sexual nature, such as unwanted sexual notes or texts
- If the recipient tells someone to stop this type of harassment **even once**, and it continues, then it is defined as sexual harassment and it is **illegal**.

Sexual Harassment

- *If someone is touching you in a sexual manner without your explicit consent, that is **sexual assault**.*
- *This is also illegal and should be reported to a trusted adult.*

Can you think of examples of sexual harassment?
(No names, please. Report privately to me if you need to.)

Sex Trafficking

- **Human trafficking**, which includes labor and sex trafficking, is a form of modern day slavery.
- **Sex trafficking** occurs when a trafficker uses **force, fraud, or coercion** (which means tricking or pressuring someone) to control another person for the purposes of engaging in sex acts against her or his will **in exchange for money or other goods, including food and housing.**
- If a person is under 18, there does not have to be force, fraud, or coercion for it to be trafficking. Minors are **protected under the law and can safely seek help without fear or legal consequences.**

Sex Trafficking

- Traffickers may take a person by force, but **are more likely to befriend someone through social media or gaming sites**, or other places teenagers hang out to try to gain their trust.
- The trafficker could also be a **family member, friend, “boyfriend” or other romantic partner.**
- The person being trafficked might have sex with other people to **please the trafficker, because they are afraid, or for the promise of a certain lifestyle or basic needs.**
- Sometimes it **might even be another teenager** that is trafficking people.

Sex Trafficking

- Most people who are trafficked are **targeted as young teens, on average 15 years old.**
- **It can happen to anyone**, regardless of gender, race, socio-economic status, or location.
- In any form it takes, **sex trafficking—someone forcing or pressuring someone to have sex with others—is illegal.**

Class Activity: “Is it Abuse If...?”

1. Read the worksheet “*Is it Abuse If...*” on your own.
2. Decide whether each statement is abusive.
3. Now discuss your answers in your groups. You may change your answers if you find you have changed your mind during your discussion.

Class Discussion: “Is it Abuse If...?”

- What was it like to do that? Why?
- Which ones were easy to agree on? Which ones were not? Why?
- The gender(s) were not revealed in your examples. What gender(s) did you picture in these relationships? Who was the abuser? Who was being abused?
- Would your responses have changed if the gender(s) were different?

Video: “Teen Dating Violence PSA”

Let's watch: [“Teen Dating Violence PSA”](#).

Discussion: What are some examples from the video that people said to their abusive partner?

Seeking Help

Sometimes people don't feel like they can talk to someone face-to-face.

- It can be hard to speak up when these things happen to you or someone you care about for many reasons, such as fear, shame or confusion.
- Depending on the gender or genders of the people involved in the relationship, the person being abused may even be less likely to disclose and to seek help.
- **Identifying a safe and trusted adult is the first step in getting help.** That could be a family member, someone at school, a neighbor, a medical professional, a faith leader, or someone else in your community.
- An anonymous website or hotline can encourage people to get the help you need. The one you saw on the screen is an example.

Seeking Help

**National Teen Dating Abuse
Hotline:**

(866) 331-9474

Summary

- You can also use www.loveisrespect.org and resources from the *Student Support* website (www.sandiegounified.org/Support) to help in situations of relationship abuse, sexual harassment, or sex trafficking.
- In California, anyone of any age may consent to their own care and treatment for sexual assault confidentially, meaning without notifying parents if you do not wish to.
- See the *California Minor Consent Laws* card that I gave to you during the last lesson for more details.
- The counselor and/or I are available to talk if you have any questions about this topic that you'd like to discuss one-on-one.

Homework

- Watch the video on Human Trafficking in San Diego linked on your worksheet.
- Answer the questions from the video
- See your teacher for a non-tech option if you prefer.

Rights, Respect, Responsibility (High School)

My Life, My Decisions

Lesson 10

Reminders

- Let's review our ground rules and procedures as a class.
- Remember to use the Anonymous Question Box!

Introduction

- Have you ever said or done something to someone that afterwards you just asked yourself, "Holy smokes, why on Earth did I just say/do that?"
- It could be something really minor like walking in a room and calling a friend a nickname you've never used before, and once it's out, it sounds really silly.
- Or it could be something more significant, like someone asking you to keep something between the two of you, and it being too good to keep to yourself, so you tell someone else and immediately regret it.
- What examples can you think of?

Reflection

- What does it feel like in that moment right after we've realized that what we did was the wrong thing to do?
- We all go through this—and not just once. It's something we experience all our lives.
- We sometimes make decisions without thinking and, sometimes, even when we think them through really well at first, we still make a decision we wish we had not made.
- Can anyone think of examples when you made the right decision, and it really paid off for you?
- Clearly, there are just as many opportunities to make positive decisions as there are to make bad ones.
- Today we're going to talk about sexual decision making and what and who can have an impact on the decisions we make.

Class Activity: "Considering Others' Opinions"

1. I am going to give you a worksheet that lists some things people need to think about when they're in sexual relationships.
1. Across the top of the worksheet, you'll see categories of people we might have in our lives.
2. Read each statement on the left and think about what these different people might say about these statements.
3. Even if you wouldn't actually discuss this with that person, write what you imagine they'd say. Sometimes our perceptions are just as important as what we actually hear.

Class Discussion: "Considering Others' Opinions"

I'm going to ask you to talk in pairs about what that experience was like for you. Please use these discussion questions:

1. How did you know what these people in your lives would say?
2. What did you think of these messages? Were they mostly positive, negative, or a mix?
3. In what ways do you think the people listed on your sheet affect or would affect the decisions you make about sexuality? Why?

Now share out some of your ideas with the class.

Discussion

- ❖ People in our lives have influence over us, no matter who they are.
- ❖ Some have more influence on us than others.
- ❖ Let's look a little deeper at this.

What Would You Do If...?

- ... your parents/caregivers told you they can't stand your boyfriend/girlfriend/partner?
- ... your best friend said the same thing?



What Would You Do If...?

- ... you were hanging out with a good friend and they started making offensive comments and jokes about a classmate being gay or trans?
- ... they were making those comments and jokes to or in front of that classmate? Does that make a difference in how you would respond?



What Would You Do If...?

- ... you were thinking about having sex with your partner? Your friends tell you to go for it, but your mentor, who you talk to about everything, says you should wait?
- ... a family member told you the same thing?



What Else?

- Aside from the people in our lives, when it comes to making decisions about sex and sexuality, what other things influence us?
- For example: Past experience may have an impact on whether I choose to do something or not.
- What else comes to mind?

Influences

- We often hear from people: "I'm not influenced by other people or the media; I make my own decisions."
- But the reality is that it's impossible to make decisions about anything—let alone something as important as sex and sexuality—in a vacuum.
- We are definitely influenced by the people and the world around us. Sometimes we're not even aware of what that influence is.
- It feels simplistic to say that above all, what you want and think is right is the most important thing, but it's true!
- In the end, you are the one who benefits from your positive decisions or deals with the consequences of your negative decisions.

So no matter what you think or hear, you have the right to think and make decisions for yourself.

Summary

You don't have to be alone when making important decisions about sex and sexuality.

Finding trusted adults in your life that you talk honestly to is very important.

Homework

1. The "*Values and Beliefs Interview*" will help you think about which adults in your life you can talk to about sex and sexuality.
2. You will briefly interview an adults to begin creating open and honest communication.